

The image features a vibrant pink background adorned with a repeating pattern of stylized flowers in shades of pink, red, and orange. These flowers are scattered across the page, some appearing as buds and others as fully bloomed blossoms. A wide, dark pink border with a woven, basketweave texture frames the entire composition. In the top right corner, the text "Volume 33" is printed in a clean, white, sans-serif font.

Volume 33

Vera Bradley Foundation
**OUR MISSION,
YOUR IMPACT**

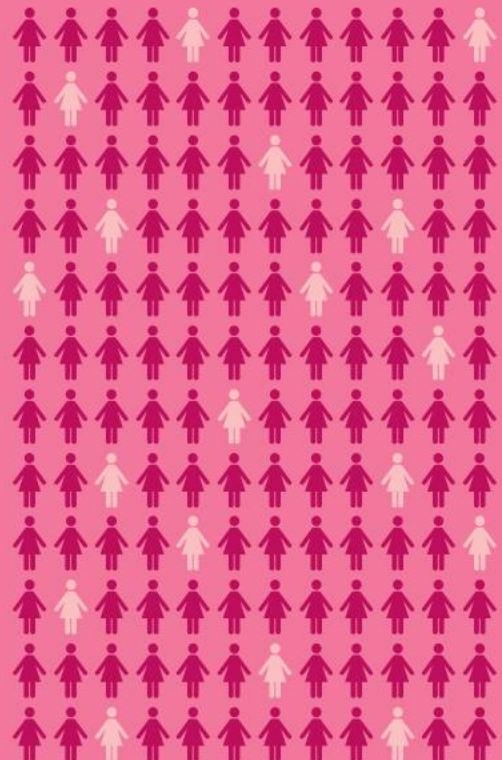
While much progress
has been made in treating
breast cancer, this disease still

affects 1 in 8 women.

Chances are you already know
or can anticipate knowing
someone who will be diagnosed.
Your support not only
funds research, it funds
impactful results!



in



\$43 MILLION OF IMPACT AND COUNTING!



Patricia R. Miller, Vera Bradley and
Vera Bradley Foundation co-founder



Barbara Bradley Baekgaard, Vera Bradley
and Vera Bradley Foundation co-founder

To our incredible supporters, thank you for your unwavering support, belief in our mission and trust in our process! For over three decades, you've been our steadfast companions on this journey, helping us raise more than \$43 million to advance life-saving breast cancer research. We are deeply grateful for your partnership and proud of the progress we've made together. Because of you, hope continues to flourish and the future holds brighter prospects for all affected by breast cancer.

Patricia R. Miller

Barbara B. Baekgaard

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Printing of this book was generously donated by Baesman Printing.

 **vera bradley**
FOUNDATION FOR BREAST CANCER



Join the
Movement

Purpose



Generous
Supporters



FOUNDATION
MOMENTS



Hope

Mission
Driven



Treasured
Volunteers



IMPACTFUL
RESEARCH



OUR MISSION AND OUR WHY!

We're funding critical research so women can thrive, not just survive, after a diagnosis.



Our Mission: Raising funds for research to find a cure and to improve the lives of the many affected by breast cancer.



1 in 8 Women will develop breast cancer in her lifetime.

**NOT JUST NUMBERS
—IT'S LIVES**

Dear Friends,

As we enter an exciting new era, we are profoundly grateful for your belief in our mission. Every decision we make is guided by transparency, responsibility, and a steadfast commitment to creating the greatest possible impact. Because of you, research is advancing more rapidly, discoveries are reaching patients sooner, and more individuals and families have renewed reason to hope.

Your partnership has made this moment possible, and it is my great pleasure to introduce Dr. Alastair Thompson, the Director of the Vera Bradley Foundation Center for Breast Cancer Research at the Indiana University Simon Comprehensive Cancer Center. His vision, scientific excellence, and unwavering dedication to transforming the future of breast cancer care make him an extraordinary leader for this next chapter. I can't wait for you to get to know Dr. Thompson.

I believe you'll share our excitement for all that lies ahead as, together, we continue to accelerate discoveries and bring hope to more patients and families.

Stephanie Scheele

United States 2025:

- **321,916 new cases** of invasive breast cancer
- **60,730 new cases** of Ductal Carcinoma in situ (DCIS), a non-invasive breast cancer

Stephanie Scheele, Vera Bradley Foundation Executive Director



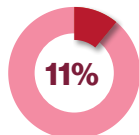
Women under 40 are nearly **40% more likely to die** from breast cancer than women over 40.

UNDER

40

Researchers say the **reasons for rising incidence in younger women** are complex and multi-factorial: changing childbearing and breastfeeding patterns, increased alcohol use, excess body weight, genetics, environmental exposures and more.

BREAST CANCER IS THE LEADING CAUSE OF CANCER DEATHS FOR WOMEN AGED 20-49



11% of all breast cancer cases in the US are diagnosed in **women under 40**. But, young women are more likely to be diagnosed with aggressive subtypes like triple-negative breast cancer (TNBC).



Today, there are 4.3 million breast cancer survivors in the US, including women currently being treated and those who have finished treatment. By 2035 that number is expected to grow to 5.3 million.

WOMEN UNDER 50 ARE NOW NEARLY TWICE AS LIKELY TO BE DIAGNOSED WITH CANCER COMPARED TO MEN OF THE SAME AGES
a trend primarily attributed to increasing rates of breast cancer.

Early-stage cancer diagnosed at the localized stage has a 5-year relative survival rate **over 99%**

5

YEAR

SURVIVAL RATES

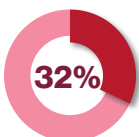
The **5-year survival rate has improved**, with an increase from 85.7% in 1990, to over **92% today** (but varies by stage at diagnosis).

2026

1990



BREAST CANCER REMAINS THE MOST COMMON CANCER AMONG WOMEN IN THE UNITED STATES



About **32%** of **all newly diagnosed cancers in women are breast cancer**



About **85%** of breast cancers occur in women who have **no family history** of breast cancer.

TRIPLE-NEGATIVE BREAST CANCER (TNBC) ACCOUNTS FOR ABOUT 10-15% OF ALL BREAST CANCERS.

These cancers tend to be more common in women younger than age 40, women who are Black, and women who have a BRCA1 mutation.

Breast cancer **mortality rates have decreased** in the US by approximately **44%** since 1990, largely due to increased mammography screening and advances in treatment.

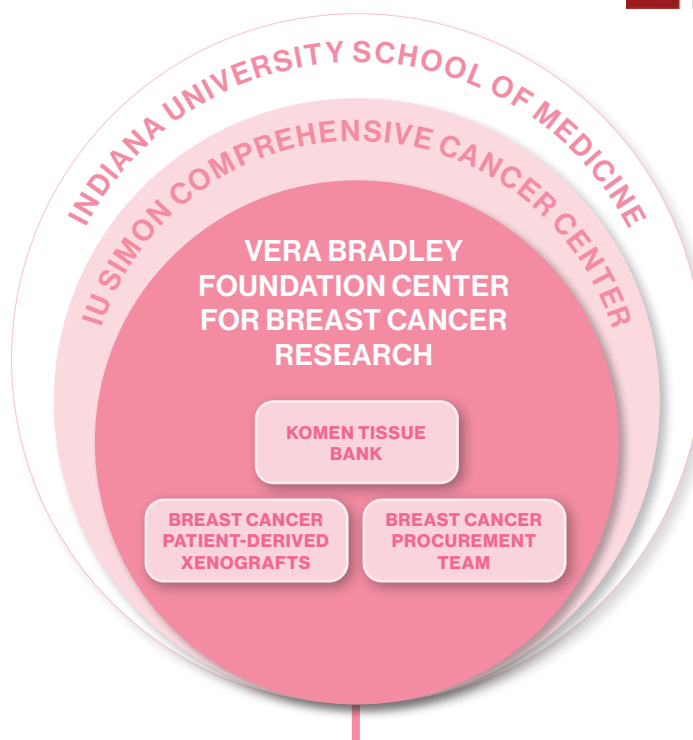
41

PERCENT

44

Black women experience a **41% higher mortality rate** from breast cancer compared to white women.





Alastair Thompson, MBChB, MD, FRCSEd, FACS
Director, Vera Bradley Foundation Center for Breast Cancer Research



* Denotes Executive Committee

VERA BRADLEY FOUNDATION CHAIRS

Bryan P. Schneider, MD

Vera Bradley Foundation Chair in Oncology

Mateusz Opyrchal, MD, PhD

Vera Bradley Foundation Scholar in Breast Cancer Discovery

Pravin Kaumaya, PhD

Vera Bradley Foundation Chair in Breast Cancer Innovation

Tarah Ballinger, MD

Vera Bradley Foundation Scholar in Breast Cancer Research

THE SCIENCE BEHIND TOMORROW'S BREAKTHROUGHS



The Vera Bradley Foundation Center for Breast Cancer Research at the IU Simon Comprehensive Cancer Center (IUSCCC) continues to advance innovative research shaping the future of breast cancer prevention, diagnosis, and treatment. The following recent highlights represent impactful research made possible through the generosity of our supporters.



THE FOUNDATION ISN'T CHANGING DIRECTION IT'S ENTERING ITS NEXT ERA

Meet Alastair Thompson, the inaugural Director of the Vera Bradley Foundation Center for Breast Cancer Research

When Dr. Alastair Thompson talks about breast cancer, he rarely begins with science. He begins with people.

Long before he became one of the world's leading breast cancer surgeons and researchers, he learned a lesson that has shaped his entire career.

As a young surgical trainee in Edinburgh, Scotland, he was encouraged by pioneering breast cancer surgeon Sir Patrick Forrest to step away from the operating room and into the research laboratory.

"Go and do some research early," Forrest advised. "It will inspire you."

And it did.

Thompson entered breast cancer research at an extraordinary moment. Scientists were just beginning to understand the role of genes like HER2 and BRCA1, discoveries that would forever change how breast cancer is understood and treated. For a young physician-scientist, it was exhilarating — not because of the science alone, but because each breakthrough carried the promise of changing someone's future.

More than four decades later, that sense of possibility still drives him.

Now, as the inaugural Director of the Vera Bradley Foundation Center for Breast Cancer Research at the Indiana University Simon Comprehensive Cancer Center, Thompson brings something increasingly rare in modern medicine: the ability to move seamlessly between laboratory discovery and patient care.

**Alastair M. Thompson,
MBChB, MD,
FRCSEd, FACS**

Director, Vera Bradley
Foundation Center for
Breast Cancer Research

Professor of Surgery,
Division of Breast Surgery,
IU School of Medicine

Vera Bradley Foundation
Senior Professor of
Breast Cancer Discovery

Associate Director of
Translational Research,
IU Simon Comprehensive
Cancer Center

Vera Bradley
FOUNDATION FOR BREAST CANCER





Thompson has spent his career asking one question:

How do we help today's discoveries reach tomorrow's patients faster — and more thoughtfully?

“

It's the individual patients who continue to motivate me. Every advance matters because every person is different.

— Dr. Alastair Thompson

Why Indiana? Why Now?

After leadership roles in Scotland, at MD Anderson Cancer Center and at Baylor College of Medicine, Thompson had no shortage of opportunities.

What drew him to Indiana was something he believes is increasingly uncommon: a philanthropic partnership with the courage to invest in bold ideas over the long term.

For over thirty years, Vera Bradley Foundation supporters have fueled discoveries that extend far beyond Indiana. More than \$43 million has been invested in breast cancer research, creating one of the nation's most collaborative environments for scientists and clinicians working toward better prevention, earlier detection, more personalized treatments and, ultimately, cures.

That commitment impressed Thompson immediately.

He points to the Center's extraordinary breast tissue biorepository, internationally respected basic science programs, and ambitious work to conquer triple-negative breast cancer (TNBC) — one of the disease's most aggressive forms — as evidence that Indiana is pursuing questions many institutions have yet to tackle.

But what excites him most isn't any single project.

It's the opportunity to connect them.

He often compares research leadership to tending a garden. Every promising idea deserves attention, but successful leaders also know when to redirect resources so the strongest discoveries can flourish.

Those who know Dr. Thompson best are unlikely to begin with his titles. They are more likely to mention his quick wit, his British charm, and the affection with which he speaks of his family. He cheerfully admits to being “besotted” with his wife, Dr. Stacy Moulder, whose own remarkable career in oncology complements his lifelong commitment to advancing cancer care. Together, they have raised two wonderful sons, Christopher and Shephard, and remain each other's greatest champions.

His vision is one of thoughtful momentum — bringing together scientists, physicians, industry partners and philanthropists to accelerate the journey from promising discovery to meaningful improvements in patients' lives.

Perhaps most importantly, Thompson sees Indiana as a place capable of leading globally.

He believes discoveries made here can influence breast cancer care not only across the United States, but around the world.

That vision aligns naturally with the Vera Bradley Foundation's own mission: transforming generosity into life-changing progress.

Over 30 years ago, supporters planted the seeds.

Today, under Dr. Alastair Thompson's leadership, the next era begins.

BY THE NUMBERS

40+

Years dedicated to breast cancer surgery and research

3

Countries — Scotland, England and the United States

455

Peer Reviewed **Publications** — and there's more beyond the peer reviewed papers

102

Pages on his CV including appointed posts, education highlights, achievements, awards & honors, publications, book chapters, and innovation & patents

ONE MISSION

1

Moving discoveries from the laboratory to patients faster — and more personally.

RESEARCH HIGHLIGHTS



Hari Nakshatri, PhD reviewing data with his colleague.

Decoding Male Breast Cancer

Using healthy breast tissue donated by men through the Komen Tissue Bank (KTB), Hari Nakshatri, PhD, the Marian J. Morrison Professor of Breast Cancer Research, is advancing research into male breast cancer, a disease that remains significantly understudied.

Nakshatri's lab discovered that male breast cancer behaves differently from female breast cancer at the biological level. Genetic changes that readily triggered tumors in

female breast cells did not produce the same results in male cells, requiring researchers to develop entirely different models of male breast cancer. In laboratory models, a potent oncogene that successfully triggered cancer growth in female breast cells did not produce tumors in male cells. Surprisingly, when researchers used a less potent oncogene, tumors developed and metastasized to the lungs.

These unexpected findings suggest important biological differences in how breast cancer forms and spreads in men versus women and may ultimately provide broader insight into sex-based differences across multiple cancers. With new models for both male and female breast cancer now established, Nakshatri's lab is studying whether commonly used chemotherapy treatments may work differently in men and women.

Radiation Therapy, Reimagined

Radiation therapy remains a cornerstone of breast cancer treatment, but advances in the field are making it faster, more precise, and potentially less burdensome for patients. Thanks to ongoing clinical research, some patients can now complete radiation treatment in just five sessions, compared to the previous standard of 15 to 30 treatments.

Richard Zellars, MD, researcher and IUSCCC radiation oncologist, is leading efforts to further improve how radiation therapy is delivered. Zellars is overseeing IU's participation in national clinical trials studying whether certain women ages 50 to 70 can safely avoid radiation altogether and receive hormone therapy alone.

Additional research is also examining whether chemotherapy and radiation may work more effectively when given at the same time rather than sequentially. While those results are still pending, the approach could potentially improve treatment response while shortening overall treatment timelines for patients.

Setting the Standard for Breast Cancer Care

The National Comprehensive Cancer Network (NCCN), the nonprofit organization whose clinical guidelines help shape cancer care worldwide, recently launched new interactive NCCN Guidelines Navigator resources for breast cancer treatment and hereditary cancer risk assessment. The digital tools make complex recommendations easier for physicians and patients to search, navigate, and connect to additional NCCN resources.

Bryan Schneider, MD, serves on the NCCN breast cancer guidelines panel, while Nawal Kassem, MD, contributed to the organization's genetic and familial high-risk assessment guidelines. Their involvement helps ensure the latest breast cancer research continues to inform nationally and globally utilized standards of care.



Bryan Schneider, MD



Pravin Kaumaya, PhD in his lab.

Advancing Breast Cancer Vaccine Therapies



Pravin Kaumaya, PhD, a world-renowned innovator of vaccines for cancer treatment and the Vera Bradley Foundation Chair in Breast Cancer Innovation, continues to lead groundbreaking work in breast cancer vaccine development.

Kaumaya's peptide-based vaccine, B-Vaxx, can be both prophylactic (preventative) and therapeutic to enhance the body's immune system response to existing cancer. Multiple clinical trials are currently underway evaluating the vaccine in patients with HER2-positive breast cancer.

Kathy Miller, MD, the Ballvé Lantero Professor of Oncology, serves as lead clinical investigator for a trial involving patients with metastatic HER2-positive breast cancer. Tarah Ballinger, MD, the Vera Bradley Foundation Scholar in Breast Cancer Research, is leading a separate trial focused on patients with locally advanced HER2-positive breast cancer following standard first-line treatment.

In addition to these clinical studies, Kaumaya's team has completed promising preclinical research exploring combination vaccine therapies for triple-negative breast cancer and other aggressive breast cancer subtypes.

Reversing Cancer's Immune Suppression



Mateusz Opyrchal, MD, PhD, the Vera Bradley Foundation Scholar in Breast Cancer Discovery, is studying how breast tumors suppress the body's immune system — a major challenge in treating breast cancer. In many

cases, cancer cells are able to slow down or block the immune cells that would normally attack them, allowing tumors to grow and evade treatment.

Opyrchal and his collaborators are developing new strategies to target the immune-suppressing cells within the tumor microenvironment, including macrophages, a type of immune cell commonly manipulated by breast cancer cells. His team has discovered that iron signaling plays an important role in determining how these macrophages behave. By altering iron signaling, researchers were able to shift macrophages into a more immune-activating, anti-tumor state.

The findings may have important implications not only for immunotherapy, but also for how physicians treat anemia and low iron levels in cancer patients. Opyrchal's long-term goal is to advance more personalized immunotherapy approaches by using tumor profiling to better match patients with targeted immune-based treatments.

His lab recently had a study accepted for publication in the Journal of Experimental & Clinical Cancer Research titled "Iron diminishes immunosuppressive macrophages and enhances anti-PD-1 immunotherapy in breast cancer models." Led by Qingfei Wang, PhD, Assistant Research Professor of Medicine, the study further explored how iron signaling regulates macrophage function and contributes to the immune-suppressive tumor environment. The research suggests anemia in cancer patients may play a more significant role in disease progression than previously understood and could warrant more aggressive treatment.



Mateusz Opyrchal, MD, PhD



Expanding Access to Healthy Breast Tissue Research



In partnership with the WNBA All-Star 2025 Host Committee, the Komen Tissue Bank (KTB) at the IUSCCC engaged 400 women in donating healthy breast tissue for research. The KTB, housed within the

Vera Bradley Foundation Center for Breast Cancer Research, remains the world's only repository dedicated to healthy breast tissue.

By comparing healthy tissue to cancerous tissue, researchers are gaining critical insight into how breast cancer develops and why it behaves differently among patients. The initiative placed special emphasis on recruiting younger women and women of color, populations disproportionately affected by more aggressive breast cancers and historically underrepresented in research. Among participants, 40% were under the age of 40 and 34% identified as women of color.

Samples donated through the KTB are already helping researchers create the most comprehensive mapping of healthy breast cells to date for both women and men. Current studies are extending this work to include tissue from pregnant, breastfeeding, and post-breastfeeding women to better understand the biology of pregnancy-associated breast cancer.

See pages 14 & 15 for more details.



Containing the Spread of Triple-Negative Breast Cancer



A study co-led by Yann Gibert, PhD*, Professor of Medical and Molecular Genetics, identified a promising drug candidate called Ifetroban that may help prevent the spread of triple-negative breast cancer, one of the most aggressive and difficult-to-treat forms of the disease.

Published in *Experimental Hematology and Oncology*, the research demonstrated that Ifetroban prevented triple-negative breast cancer cells from binding to platelets in mouse and zebrafish models. Researchers believe this interaction plays a key role in helping cancer cells spread, or metastasize, to other organs.

While Ifetroban is not intended to replace surgery, chemotherapy, or radiation therapy used to treat the primary tumor, it may help stop remaining cancer cells from spreading beyond the breast to other organs. Because the drug is already being studied in humans for other diseases, researchers have existing safety and dosing data that could help accelerate future breast cancer clinical trials.

**The study was originally conducted by scientists from the University of Mississippi Medical Center and the University of Mississippi, led by Gibert and Thomas A. Werfel, prior to Dr. Gilbert joining the IU School of Medicine.*

National Cancer Institute

Academic Cancer Centers are evaluated by the National Cancer Institute (NCI), the federal government's principal agency for cancer research and training of cancer physicians and researchers. The NCI provides the center's core grant to fund administrative components and shared research facilities.

Nationally, there are 74 NCI-designated cancer centers. Only 58 are comprehensive, which means they meet rigorous criteria for research and education efforts focused on preventing cancer. They also demonstrate substantial transdisciplinary research that bridges basic science, clinical science, cancer control, and population science.

Indiana University's Melvin and Bren Simon Comprehensive Cancer Center (IUSCCC) is the only comprehensive cancer center in Indiana with the rigorously maintained NCI designation.

The IUSCCC, home of the Vera Bradley Foundation Center for Breast Cancer Research, holds the same designation as Memorial Sloan Kettering, MD Anderson, and Mayo Clinic. As a member institution of the National Comprehensive Cancer Network, IUSCCC physicians have a role in determining the recognized standard of clinical care for cancer patients.

Consortium

The Vera Bradley Foundation Center for Breast Cancer Research networks with regional, national, and international peers to share data and ideas, and to collaborate on clinical trials.

Key partnerships include:

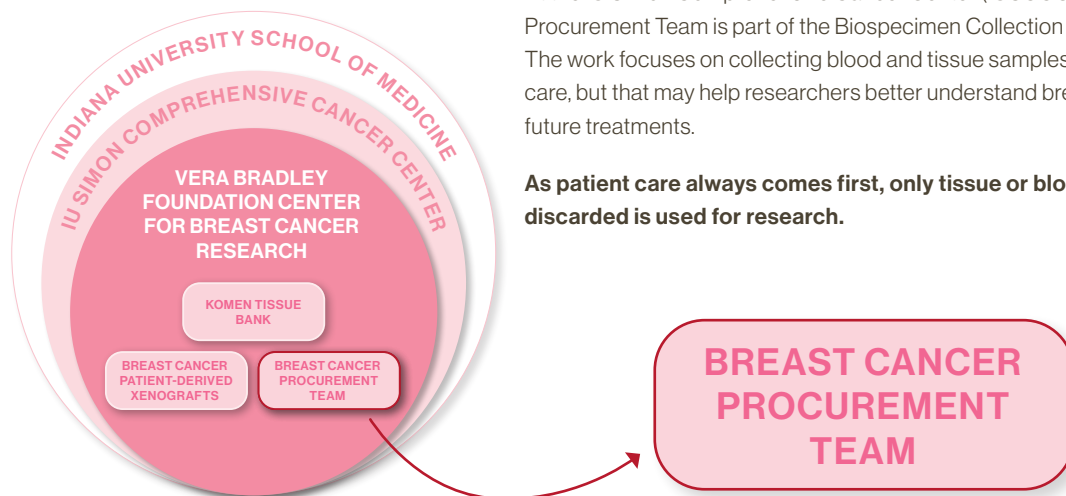
- Membership in the Translational Breast Cancer Research Consortium — a partnership of the 18 largest breast cancer programs in the country.
- Leadership of NCI-funded national collaborative research groups (ECOG-ACRIN).
- Leadership of the NCI's Breast Cancer Steering Committee, the body responsible for setting national research priorities.
- Leadership of a team from four universities specifically focused on improving outcomes for black patients.

THE POWER BEHIND THE BREAKTHROUGHS

Behind every breakthrough in breast cancer research is a dedicated team working behind the scenes to help scientists access the tools and samples they need to make discoveries possible.

At the IU Simon Comprehensive Cancer Center (IUSCCC), the Breast Cancer Procurement Team is part of the Biospecimen Collection and Banking Core (BC²). The work focuses on collecting blood and tissue samples not needed for patient care, but that may help researchers better understand breast cancer and develop future treatments.

As patient care always comes first, only tissue or blood that can be safely discarded is used for research.



■ How Samples Help ■

Samples may include:

- Leftover tissue from surgery
- Additional blood collected during routine clinical visits
- Fresh tissue for time-sensitive studies
- DNA extracted from blood samples for future research

These materials are carefully processed and stored in specialized biobanks. Some tissue is rapidly frozen in liquid nitrogen to preserve biological activity, while other samples are preserved in wax blocks so researchers can study tissue structure under a microscope years later.

■ Why Biobanking Matters ■

Patients who participate in the BC² biobanking program complete an informed consent process that allows donated samples collected over time to support future approved research studies.

Researchers use these samples to:

- Study how breast cancers develop and respond to treatment
- Compare tissue samples across patient groups
- Identify patterns that may lead to new therapies or earlier detection methods

One important research tool is a Tissue Micro Array (TMA), a single block containing tiny samples from many patients' tissues. TMAs allow scientists to analyze multiple breast cancer samples side-by-side, helping speed up discoveries and improve research efficiency.

■ The Power of Data & AI ■

In addition to the samples themselves, researchers rely on important clinical information connected to each specimen, **including:**

- Diagnosis
- Tumor stage
- Treatment history
- Other de-identified medical data

To help researchers access this information more efficiently, BC² uses an AI-powered platform called Manifold. The system allows scientists to search complex datasets using everyday language rather than advanced database coding.

For example, a researcher could simply search for "Patients with triple negative breast cancer treated with taxane chemotherapy before surgery who also have tissue samples available." The platform quickly identifies matching samples and anonymous patient data dramatically speeding up research efforts.

Every donated sample represents an opportunity to better understand breast cancer, accelerate discoveries, and help plant the seeds of hope for future patients and families.

BREAST CANCER PATIENT-DERIVED XENOGRAPHS

With his lab, Hari Nakshatri, PhD leads the development of

specialized breast cancer research models known as **Patient-Derived Xenografts (PDXs)**. These models are created using tumor tissue donated by breast cancer patients and allow researchers to study cancer in ways that closely mimic how it behaves in the human body.

Once developed, these PDX models are shared with researchers across the IU Simon Comprehensive Cancer Center (IUSCCC) to support a wide range of breast cancer studies and grant-funded projects.

PDXs are especially valuable because they help scientists better understand:

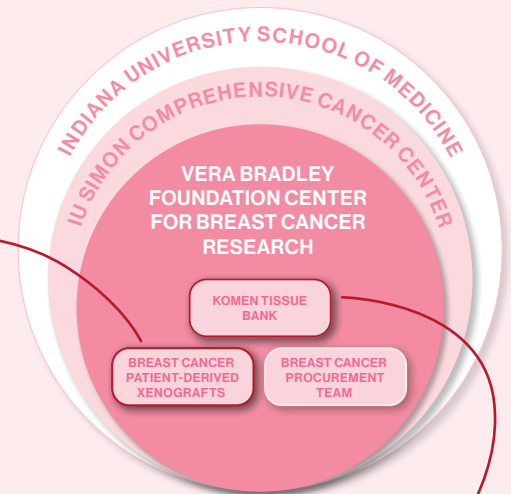
- How breast cancer grows and spreads
- Why some cancers become resistant to treatment
- Which therapies may work best for different patients

Using these models, researchers recently published important findings in the leading scientific journal, *Cancer Cell*, that help explain how certain breast cancers develop resistance to commonly used CDK4/6 inhibitor drugs, including medications such as Verzenio and Ibrance.

The team is also conducting ongoing research focused on inflammatory breast cancer, one of the most aggressive forms of the disease, and is preparing new findings for publication in the prestigious science journal, *NPJ Breast Cancer*.

In addition, a new National Cancer Institute (NCI) research proposal currently under review will continue using these PDXs models to help drive future discoveries and treatment advances.

Hari Nakshatri, PhD



KOMEN TISSUE BANK

Some of the most important discoveries in breast cancer begin with a simple question:

What does healthy breast tissue look like?

The question is surprisingly difficult to answer — because until recently, researchers had almost no access to healthy breast tissue for study.

That changed with the creation of the Susan G. Komen Tissue Bank (KTB) at the IU Simon Comprehensive Cancer Center, the only repository in the world dedicated to collecting normal breast tissue from volunteer donors with no evidence of breast disease.

As a cornerstone of the Vera Bradley Foundation Center for Breast Cancer Research, the KTB gives scientists something they've never had before — a true baseline for understanding how breast cancer begins, long before it can be detected.

Every donated sample helps researchers compare healthy tissue with cancerous tissue, revealing the earliest biological changes that may one day lead to more accurate risk prediction, earlier diagnosis, and better prevention.

A Resource Without Boundaries

The KTB belongs to Indiana, but it serves the world.

Researchers from institutions including Purdue University, Mayo Clinic, the National Cancer Institute, Yale University, Dartmouth College, Dana-Farber Cancer Institute, The Royal Marsden Hospital in London, and the University of Queensland in Australia have all relied on these remarkable samples to accelerate discovery.

Every Donation Tells a Story

Donating takes about an hour.

Using local anesthesia, physicians collect a tissue sample approximately the size of two peas through a minimally invasive needle biopsy. Each specimen is processed immediately to preserve its scientific value before becoming part of a resource that may help researchers answer questions for decades to come.

For every woman who chooses to donate healthy tissue, there is an opportunity to better understand breast cancer before it ever begins.

Why It Matters

Research made possible by the KTB is already reshaping our understanding of breast cancer. Scientists have identified biological changes that may signal cancer years before a tumor develops, uncovered how the breast's surrounding tissue can influence cancer growth, mapped how obesity affects healthy breast cells, and created the most comprehensive atlas of normal breast tissue ever assembled. These discoveries are laying the foundation for earlier detection, more personalized prevention, and ultimately, fewer lives touched by breast cancer.

Komen Tissue Bank

Scan this QR code to learn how you can participate.



WHERE GENEROSITY MEETS DISCOVERY

Every breakthrough begins with someone who chooses to give. Sometimes that gift is philanthropy. Sometimes it's healthy tissue. Together, they are changing the future of breast cancer.

The Genomic Map

Germline DNA "Switches"

The Science: Scientists used exome sequencing to compare healthy tissue from donors who remained healthy vs. those who later developed breast cancer.

The Discovery: Women who eventually developed breast cancer had more germline DNA changes present from birth.

The Impact: Proves that telltale biological signs exist years before a tumor is ever detectable.

The Micro-Environment

Stromal "Scaffolding"

The Science: Researchers analyzed the stroma (the tissue that holds cells in place) for signs of "disruption."

The Discovery: Damaged scaffolding creates an environment that is significantly "friendlier" to breast cancer growth.

The Impact: Women with this disruption were 4x more likely to develop aggressive breast cancer.

Lifestyle & Stress

Obesity & DNA Damage

The Science: A study on how high BMI (obesity) physically alters the health and stress of individual breast cells.

The Discovery: Obesity is directly linked to increased DNA damage and cellular stress in otherwise healthy tissue.

The Impact: Provides a physical map of how lifestyle creates risk, allowing for personalized prevention.

Predictive Timing

Accelerated Risk

The Science: Comparing the tissue of women with benign breast disease to those who remained breast cancer-free.

The Discovery: Structural changes in the breast can predict cancer appearing 3 years sooner than average.

The Impact: Driving the development of new tests to identify high-risk women earlier than ever before.

WHAT IS A CLINICAL TRIAL?

Clinical trials are the essential links between research and patient care.

Why are clinical trials so important?

Advancing Better Care:

- Every breast cancer treatment considered standard care today — from improved surgical techniques to therapies like tamoxifen and Herceptin — was first tested in a clinical trial.
- Clinical trials provide the evidence needed to establish new treatment guidelines and continually improve patient care, going beyond just new drug therapies.

Researchers use clinical trials to:

- Prevent breast cancer or reduce the risk of recurrence.
- Improve screening and provide earlier, more accurate diagnosis.
- Optimize existing treatments by testing new combinations and treatment sequences.
- Reduce side effects and improve quality of life during and after treatment.
- Advance precision medicine by matching targeted therapies to the unique biology of each patient's cancer.

Benefits to Patients:

- Clinical trial participants may have access to promising new therapies before they become widely available — particularly important for patients whose cancer has not responded to standard therapies.
- Patients in clinical trials are typically monitored with exceptional care and more frequent testing by an experienced medical team.

Clinical trials originating at the Vera Bradley Foundation Center for Breast Cancer Research:

Opening Soon

IUSCCC-0898 | Dr. Carla Fisher This is a longitudinal study to monitor breast deformation and cosmetic outcomes following breast conserving cancer treatment.

IUSCCC-0959 | Dr. Tarah Ballinger This Phase II single-arm pilot study is evaluating the efficacy of hydroxychloroquine in treating Aromatase Inhibitor-Associated Musculoskeletal Syndrome (AIMSS) in postmenopausal breast cancer survivors. This study targets painful musculoskeletal symptoms resulting from Aromatase Inhibitor-therapy.

Clinical trials are the bridge between laboratory discoveries and real-world patient care. Every major advance in breast cancer treatment has been made possible because patients participated in clinical research.

Actively Enrolling

IUSCCC-0817 | Dr. Kathy Miller The purpose of this study is to test the effectiveness of the combination of two drugs, Tocilizumab and standard of care chemotherapy versus standard of care chemotherapy only to treat subjects of different racial and ethnic groups diagnosed with metastatic breast cancer that is either triple negative (test negative for all three proteins estrogen, progesterone and HER2) or Estrogen Receptor (a group of proteins found inside cells that are activated by the hormone estrogen) (ER)-low.”

IUSCCC-0931 | Dr. Kathy Miller This study investigates the financial barriers faced by breast cancer patients who participate in clinical trials. It looks at indirect costs such as lost income, travel, and parking for patients enrolled in these trials.

IUSCCC-0819 | Dr. Bryan Schneider This is a non-randomized observational trial designed to collect detailed clinical, social determinant, and genomic data from patients enrolled in molecular oncology tumor boards across four comprehensive cancer centers.

IUSCCC-0880 | Dr. Tarah Ballinger This study assesses the feasibility of using the NearWave monitoring system to monitor therapy progression in breast cancer patients undergoing chemotherapy before other treatment. This study will measure the data quality captured with the device.

IUSCCC-09138 | Dr. Pravin Kaumaya This phase I trial studies the side effects and best dose of vaccine therapy in treating patients with metastatic solid tumors. Vaccines are made from antibodies and peptides combined with tumor cells may help the body build an effective immune response to kill tumor cells..

IUSCCC-0864 | Dr. Pravin Kaumaya This study is testing an investigational (not approved for general use by the United States Food and Drug Administration — FDA) vaccine to activate the immune system so that it can fight cancer that has a high risk of recurrence (cancer that returns after previous treatment).

Active, Enrollment Closed

2022C0174 | Dr. Tarah Ballinger This study is looking at how a person's genetic ancestry and the effects of long-term stress may influence whether they are able to complete their recommended breast cancer treatment. Researchers hope the findings will help identify patients who may need additional support to improve treatment completion and outcomes.

IUSCCC-0818 | Dr. Tarah Ballinger This study is focused on understanding gaps in identification, referral, and delivery of preventive care for women at increased risk of breast cancer, with the goal of improving access to risk-reduction strategies and early detection.

IUSCCC-0879 | Dr. Tarah Ballinger The purpose of this study is to better understand why eligible participants opt out of exercise programs tailored to fit the needs of women living with metastatic breast cancer.

IUSCCC-0861 | Dr. Tarah Ballinger This study examines whether building regular exercise habits can help reduce breast cancer risk in women who may be at increased risk. Researchers are testing an exercise program to understand how changes in physical activity affect health factors linked to breast cancer development. The goal is to identify practical ways to use exercise as part of breast cancer prevention.

IUSCC-0680 | Dr. Tarah Ballinger The purpose of this study is to find out whether standing on a low-intensity vibrating platform for 10 minutes twice a day for one year can help improve muscle strength and energy in people with early-stage breast cancer who are starting aromatase inhibitor therapy and do not regularly exercise. Researchers will compare those using the vibration therapy with a group that starts the therapy later.

IUSCCC-0855 | Dr. Tarah Ballinger The purpose of this study is to test a program for black women and their family members who are at risk for breast cancer. The study will provide access to community health advocates who will help them understand their risk of developing breast cancer, navigate screenings, and access additional ways to reduce their risk.

2023C0120 | Dr. Tarah Ballinger This study looks at whether the effects of long-term stress on the body (called allostatic load) may help explain differences in breast cancer types and outcomes among people of different racial backgrounds. Researchers will examine health information and biological markers to better understand why some patients may develop more aggressive breast cancers or have different treatment outcomes. The goal is to identify factors that could help improve breast cancer prediction, prevention, and care for all patients.

J11155 | Dr. Richard Zellars The purpose of this study is to test whether adding veliparib, a drug that blocks cancer cells from repairing damaged DNA, to radiation therapy is safe and may improve treatment for people whose breast cancer remains after chemotherapy before surgery. Researchers hope this combination will shrink tumors more effectively, increasing the chance of breast-conserving surgery and reducing the risk of the cancer returning.

J13104 | Dr. Richard Zellars The purpose of this study is to find out whether giving a shorter course of radiation therapy at the same time as chemotherapy is as safe and effective as giving the treatments one after the other for people with early-stage breast cancer. Researchers also want to learn whether this approach can shorten treatment time, reduce side effects, and lower the chance of the cancer returning in the treated breast.

MOVEMENT IS MEDICINE

How exercise and healthy weight impact breast cancer risk and recovery.



Obesity is associated with about a 30-40% increased risk of postmenopausal breast cancer, as well as more advanced stage at diagnosis and more complications from therapy.



Weight alone does not tell the whole story. We also know that within women of normal weight, higher body fat percentage is associated with significantly increased risk.

Being more physically active (guidelines suggest 150 minutes of moderate activity per week) **reduces risk of breast cancer by about 20-40%** depending on the data set — even if you don't lose weight — because of physiologic changes in the body with each “dose” of exercise.

**150
MINUTES
PER WEEK
20-40
PERCENT**



Meeting activity guidelines also reduces risk of breast cancer recurrence by over 20% depending on the patient population, which is similar to results for those taking tamoxifen.



EXERCISE CAN BE GIVEN AS A “PRESCRIPTION”



Pre-diagnosis physical activity is associated with **improved survival after diagnosis** of many different cancers, including breast cancer.



Muscle impacts prognosis even in early-stage disease. A study of over 3,000 patients with Stage II and Stage III breast cancer showed that patients who were sarcopenic (progressive loss of muscle mass and strength) showed a 40% increase in mortality.



1 in 8 Women will develop breast cancer in her lifetime.

1/2

Weight loss successfully reduces risk of breast cancer*

HIGHER LEVELS OF PHYSICAL ACTIVITY ARE ASSOCIATED WITH LOWER RISK OF BREAST CANCER

RECURRENCE

24 PERCENT



In terms of survivorship, **better body weight and exercise also reduce risk of recurrence**, and improve tolerability of therapy. For example, among 2,987 women with stage I-III breast cancer, participation in physical activity after diagnosis was associated with a 24% reduction in disease recurrence and a 45% reduction in mortality.

MORTALITY

45 PERCENT



PHYSICAL ACTIVITY IS ASSOCIATED WITH PREVENTION OR IMPROVEMENT OF MANY CANCER THERAPY SIDE EFFECTS,

including anxiety and depression, fatigue, peripheral neuropathy, lymphedema, bone and muscle loss, cognitive function and insomnia.



“

*The best example of this is bariatric surgery, which reduces risk of breast cancer approximately in half. We've long known that maintaining a healthy weight meaningfully reduces the risk of developing breast cancer. Additionally, early observational data on GLP-1 medications suggest they may offer protective benefits beyond weight loss alone. Researchers are now actively investigating this in prospective studies, and the early signals are genuinely encouraging — bringing real hope that GLP-1s could one day be part of a broader strategy to prevent breast cancer before it starts.

— Tarah Ballinger, MD

AWARENESS AND PREVENTION

Women with average risk for breast cancer should have mammograms every other year from ages 40 through 74.



Movement (see pages 18-19) is associated with prevention or improvement of many cancer therapy symptoms, including anxiety and depression, fatigue, peripheral neuropathy, lymphedema, bone and muscle loss, cognitive function and insomnia.

Symptoms

Besides a lump, are there any other physical symptoms to look for that might be a sign of breast cancer?

Women are advised to “know” their breasts. If you’re premenopausal, know how they look and feel at different times in your cycle. If you notice a change, and it persists for two weeks, it’s time to see your doctor.

Signs of breast cancer may include:

- Lump in the breast, usually painless — may not be uniform shape
- Unexpected nipple discharge, especially bloody
- Redness or warmth of the breast, which can also result in one-sided swelling
- Dimpling or puckering of the skin of the breast
- Change in the nipple or distortion of the nipple direction
- Firm lump(s) under the arms or above the clavicle
- Thickening of the breast tissue

Self-Exams

How important are breast self-exams? I've been told to do them but I'm not sure what to feel for!

Breast self-exams by themselves are poor screening tools. Women should adhere to mammogram guidelines, especially women with a strong family history of breast cancer or other risk factors. BUT, examining your breasts is FREE! We counsel every woman, starting at about age 25, to know her breasts. While you're in your childbearing years, examine yourself at different times in your cycle, because the breast changes with normal hormonal fluxes. After menopause, examine yourself once a month. Though breast cancer usually forms a lump, this isn't always the case — there may be a thickness, a puckering, a change in color, or a new asymmetry. If you're worried about "how", just ask your primary care provider. Remember, it's never wrong to talk to your doctor about a change in how your body feels.

EXAMINING YOUR BREASTS IS FREE!

Screenings

Lately I've been seeing more stories about young women being diagnosed with breast cancer. Why wouldn't I start screenings and mammograms before age 40?

Guidelines from the United States Preventive Services Task Force (USPSTF) include the following:

Women with average risk for breast cancer should have mammograms every other year from ages 40 through 74. Deciding what's right for you involves talking to your doctor and getting a proper breast cancer risk assessment.

However, many experts are concerned that the recommended two year interval will miss detecting more aggressive cancers in younger women. As a patient, how do you decide what's right for you? Like many other aspects of life, one size does NOT fit all. Our best advice is that you talk to your doctor about your risk factors.

Risk Assessment

How do I determine if I'm at higher risk?

One of the challenges of primary prevention and early detection is figuring out who would most benefit from earlier screening than guidelines suggest. Complicating that fact is that guidelines differ by group — in fact, there are *six major medical organizations* in the United States for breast cancer screening and mammograms. This can be further complicated by insurance companies favoring guidelines that delay or deny requests for early screening.

If you have a family history of breast cancer, are black or of Ashkenazi-Jewish descent, that risk assessment should be done by age 25.

Additionally, if you have dense breasts, or genetic mutations (like BRCA1 or BRCA2), screening organizations recommend a risk assessment by age 25 and starting annual mammograms or breast MRIs as early as age 30.

“

My best advice is to encourage a discussion with your physician. Just ask! Go to your appointment with a list of questions. And include questions about your colorectal health and cervical cancer in addition to questions about your breast cancer risk. You are your own best advocate.

— Michele Coté, PhD



Michele Coté, PhD

STORY OF STRENGTH

A Lump. A Long Christmas. A Life Forever Changed.

By: Jennifer Bojrab

Five years ago, I heard three words no one ever wants to hear: “You have cancer.”

Today, I have the privilege of saying something even more powerful: **“I am a breast cancer survivor!”**

If sharing my story encourages even one woman to schedule her mammogram, perform regular self-exams, pay attention to her body, or face a diagnosis with a little more hope, then every word is worth it. Breast cancer changes your life, but doesn't define it. There are extraordinary physicians, groundbreaking research, remarkable support systems, and abundant life on the other side of treatment.

It all began with a habit I developed as a 20-year-old. I remember seeing a simple illustration explaining how to perform a breast self-exam. Something about it stayed with me, and ever since then I've made a point of checking while in the shower. In August 2020, my 3-D mammogram was completely normal. Four months later, after celebrating my fiftieth birthday, I felt something I had never felt before — a small, pea-sized lump high in my right breast. I had also noticed discomfort beneath my right arm. Deep down, I knew something wasn't right.

December 23, 2020, is a date forever etched in my memory. What began as a repeat mammogram quickly became a diagnostic ultrasound, followed by a biopsy. There are moments in life when your intuition speaks louder than reassurance. Before a pathology report confirmed it, I believed I had breast cancer. I just knew.

Only my husband and our son and daughter knew about the biopsy. I wanted to protect everyone else until we had answers. It was Christmas, after all. My family lovingly reminded me not to assume the worst, but that holiday carried a different weight than any before it. Every tradition felt more precious. Every prayer a little more urgent.

The hardest conversations weren't with my doctors. They were with the people I loved. Telling my parents was heartbreaking. As a parent myself, I couldn't stop thinking how devastating it would be to hear those words from one of my own children. I couldn't have been more wrong. Their love became my strength. Along with my faith, my family and friends carried me through the days when I wasn't strong enough to carry myself.

I met with both a surgeon and an oncologist and underwent a lumpectomy with sentinel lymph node removal. The pathology confirmed Stage IIA invasive ductal carcinoma (ER-positive, HER2-negative) with one positive lymph node. Because of the type of cancer, the lymph node involvement, and my relatively young age, chemotherapy and radiation were both recommended.

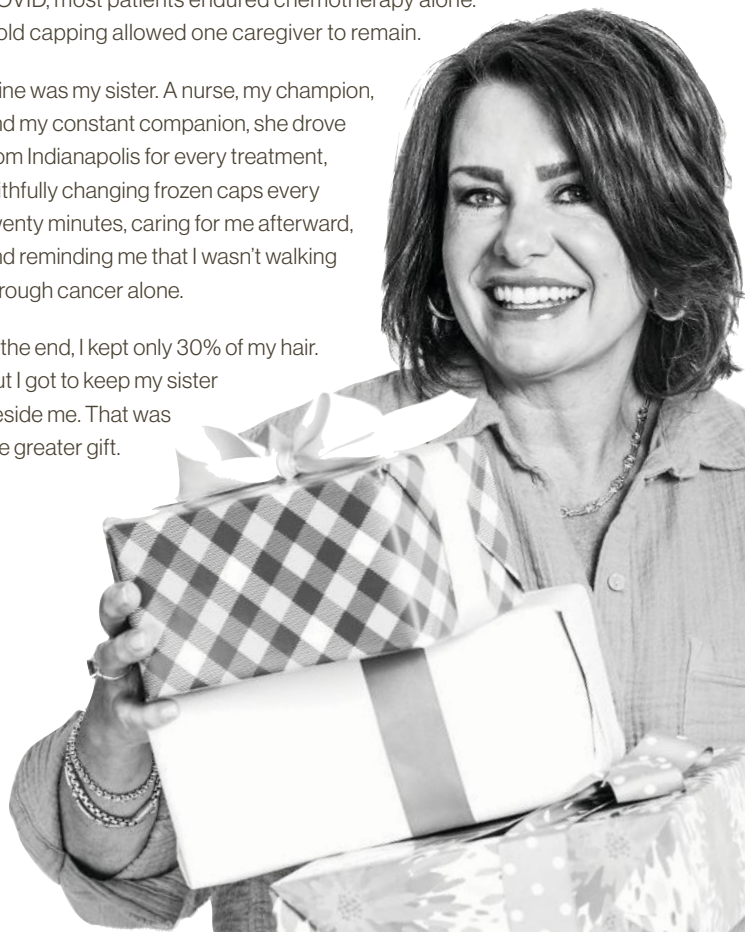
My response was simple: “Hit me with everything you've got.”

Chemotherapy consisted of four rounds of Adriamycin followed by four rounds of Taxol, every other week over four months. Adriamycin is nicknamed “the Red Devil” — a name I refused to use. Instead, I chose to think of it as the healing blood of Jesus. That simple shift in perspective helped me focus not on fear, but on healing.

I chose to cold cap in hopes of preserving my hair — not because of vanity, but because I longed for a piece of normalcy during a season that felt anything but normal. Because this was during COVID, most patients endured chemotherapy alone. Cold capping allowed one caregiver to remain.

Mine was my sister. A nurse, my champion, and my constant companion, she drove from Indianapolis for every treatment, faithfully changing frozen caps every twenty minutes, caring for me afterward, and reminding me that I wasn't walking through cancer alone.

In the end, I kept only 30% of my hair. But I got to keep my sister beside me. That was the greater gift.



Cancer teaches patience. There is so much waiting.

Waiting for pathology reports. Waiting for appointments. Waiting for insurance approvals. Waiting for treatments to end. Waiting to feel like yourself again. But life doesn't wait! Birthdays still come. Grandchildren are born. Spring flowers bloom. You laugh over dinner with friends. You hold your husband's hand during a movie.

Cancer teaches you that joy doesn't return after the storm. It quietly exists within it.

Looking back, I can't help but smile at God's timing. Two years before my diagnosis, a dear friend and fellow breast cancer survivor invited me to volunteer to wrap gifts for Boxes & Bows. I said yes! I had no idea that years later I would become one of the women whose future depended on the research those beautifully wrapped boxes helped fund.

What began as volunteering became deeply personal.

Because of the Vera Bradley Foundation, I was never facing the unknown alone. When cancer entered my life, I already knew researchers were making extraordinary progress and that survival rates continued to improve because people had dedicated their lives to discovering better treatments.

One in eight women will hear the words, "You have breast cancer." I was one of them.

Because of early detection, exceptional medical care, unwavering faith, groundbreaking research, and the love of countless people around me, I am also one of the women who gets to say, "I am cancer-free."

Stories of Strength

Scan this QR code for more inspiring stories.



I'VE JUST BEEN DIAGNOSED WITH BREAST CANCER...NOW WHAT?

Educate yourself and

find out as much as you can about your breast cancer — Estrogen, Progesterone, HER2, TNBC — but get the facts! The internet can be an overwhelming and even misleading place. Most physicians' offices have information available — and that's the stuff worth reading.

Write down questions

you have prior to your appointments.

Have a loved one with you

at all your appointments to take notes. You won't hear anything after hearing words like "double mastectomy", "chemotherapy" or "radiation".

Understand that you may have a team of doctors, not just one guiding your care.

Become familiar with your medical portal and log in

for checking on appointment times and test results. This will become an important tool.

Lean on your "community", as every connection in your life can provide hope and help.

Start a notebook or binder

to keep the information you collect at appointments.

Use your assigned Nurse

Navigator for questions and support. Your Nurse Navigator is a gift!

Join a support group

— whether in person or on social media. You can find general groups for breast cancer survivors or groups dedicated to specific types of breast cancer.

Talk to others who have walked through a similar breast cancer diagnosis, but know everyone's journey is very different.

Begin to explore post-surgery options for bras and prosthetics as there are many options. Two favorites are from Athleta and Handful.

Be an advocate for yourself and know it's okay to get a second opinion.

Let friends and family help you and try to maintain a normal lifestyle with work and activities.

Develop your own coping strategies — exercise, meditation, yoga, journaling and seeking spiritual support are all terrific options.

For Your Notebook

Scan this QR code for a helpful checklist.



HOW CAN I SHOW UP?

When someone you care about is diagnosed with breast cancer, it's natural to ask, "What can I do for you?" A better question may be, "How can I show up for you?"

The good news is that meaningful support doesn't require grand gestures. **Often, the most impactful acts are the simplest ones:** showing up consistently, offering specific help, and reminding someone they are not navigating this journey alone.



Stay Connected

A breast cancer diagnosis can be profoundly isolating. In the days and months that follow, a text message, handwritten note, phone call, or card in the mail can be a powerful reminder that someone is loved, supported and remembered.

The Power of Showing Up

You don't need the perfect words. Simply being present matters.

A short visit, a walk around the neighborhood, a cup of coffee or quiet companionship can provide comfort during a time when life may feel anything but normal. Always ask first, and understand that treatment can make energy levels and schedules unpredictable.

Showing up isn't about filling the silence. It's about reminding someone they don't have to face this alone.

Make Everyday Life Easier

One of the greatest gifts you can offer is practical support.

Rather than saying, "Let me know if you need anything," offer something specific:

- "I'd love to drop off dinner this week. Is Tuesday or Thursday better?"
- "Can I drive you to your appointment next week?"
- "I'd be happy to walk the dog or help with errands while you're recovering."
- "I'm free Saturday morning — what would be most helpful?"
- "Why don't I pick your kids up for soccer practice since I'm heading there anyways?"
- "I'm going to the grocery store this afternoon. What can I pick up for you?"

Specific offers remove the burden of asking for help and make it easier to accept.

“

The key is consistency. Support is abundant immediately after a diagnosis. It becomes even more meaningful weeks and months later.

—Kellen Gordon, Breast Cancer Survivor



Support the Circle of Care

A breast cancer diagnosis affects more than one person. Spouses, partners, parents, children, siblings, and close friends often become caregivers while balancing their own responsibilities and emotions.

A simple check-in, meal, or offer of assistance can provide meaningful support to those caring for someone they love.

Above All

Breast cancer can change many things. It should never leave someone feeling alone.

The most meaningful support rarely comes from grand gestures. It comes from the people who continue to call, continue to visit, continue to help and continue to care.

Sometimes the greatest gift we can offer is simply showing up.

Give Comfort, Not Clutter

Many people appreciate thoughtful gifts during treatment, especially items that provide comfort, convenience or moments of joy.

Consider:

- Soft button-front pajamas or loungewear
- Cozy blankets, wraps, or shawls
- Comfortable socks or slippers
- A yummy meal combined with useful gifts from Spoonful of Comfort
- Lip balm and fragrance-free lotions
- A beautiful mug paired with tea or hot chocolate
- A reusable insulated tumbler
- Audiobook, streaming, or music subscriptions
- Gift cards for online retailers, restaurants, or meal delivery services
- A cheerful plant or fresh flowers
- A mastectomy pillow or recovery comfort items

The most appreciated gifts are often those that make everyday life a little easier.





Fun and
Interactive

Support



Year-Round
Opportunities

Crucial to
our Cause



JOIN THE MOVEMENT



Ribbons for Research

Every fall, the Vera Bradley Foundation proudly shows our support in the fight against breast cancer by hanging beautiful pink ribbons in our hometown. Each ribbon represents a donation made in honor or memory of a family member, friend, co-worker or neighbor.

Neighborhoods, businesses and individuals across the nation come together during National Breast Cancer Awareness Month to support breast cancer research. You can join us all year long in turning any location pink!

Scan to learn more about Ribbons for Research



Mastectomy Pillow

When Elizabeth Miller, a Foundation supporter and board member, had a double mastectomy, she shared she'd fallen in love with a hand-sewn pillow during recovery. Thanks to our friends at Vera Bradley, a similar pillow can now be shared with a friend or loved one to bring comfort and relief as they heal!

Scan to learn more about the Mastectomy Pillow



Gift of Hope

Give hope all year long! With a Gift of Hope donation, the Vera Bradley Foundation will send a beautifully packaged gift set to a special person in your life. Each set includes thoughtful products that support our cause.

Available year-round and ideal for:

- a breast cancer survivor or someone recently diagnosed with breast cancer
- a birthday, holiday, Mother's Day or thank you gift
- a little "happy" for anyone needing a little hope
- a special treat for yourself

Scan to learn more about Gifts of Hope



Volunteer



We are grateful for the hundreds of volunteers who donate their time, talent and treasure.

YOU can make an impact!

Scan to learn more about volunteering



Quilt with a Cause

Each year, dedicated Foundation volunteers design and craft a one-of-a-kind quilt using Vera Bradley patterns. Come springtime, Vera Bradley enthusiasts and Foundation supporters delight in entering for a chance to win. Donations can be made online at verabradley.org or in Vera Bradley stores across the country. A stunning way to support breast cancer research!

Scan to learn more about Quilt with a Cause



Join the Movement on Social Media

Social media is a powerful tool for raising awareness! Here are three ways you can join us to amplify our mission:

1. Follow us!

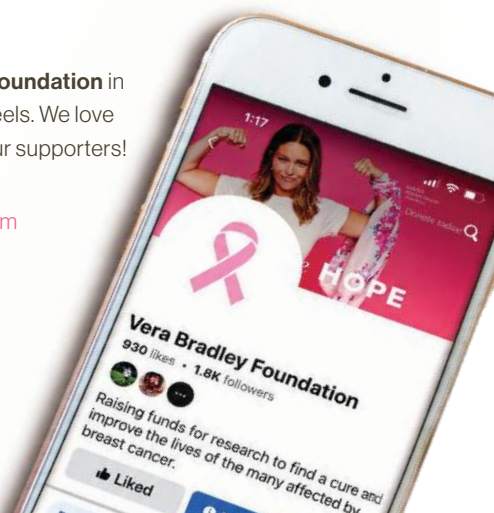


2. Repost, share, like and comment on posts from our official accounts. Your engagement can make a big impact by introducing our cause to new friends.

3. Use our hashtag — #vbfoundation to join the conversation. Share your story, post photos from our events or give a shout out to someone on their cancer journey.

4. Tag us — @verabradleyfoundation in your photos, stories and reels. We love amplifying the voices of our supporters!

Scan to follow us on Instagram



Hope Grows Challenge

Small gifts. Shared purpose. Extraordinary impact.

Start a meaningful tradition at your workplace or with your organization through the Hope Grows Challenge. We'll personalize beautiful campaign materials with a custom QR code unique to your organization, making it easy to see the real-time difference your team is making together.

The idea is simple! Invite employees or members of your organization to give just \$5 or more each month. When an entire team joins together, small acts of generosity become a powerful force that accelerates life-changing breast cancer research.

Each participant receives a plantable ribbon seed card — a lasting reminder that hope grows when it is nurtured. As wildflowers bloom, so does the impact your team is making for patients and families everywhere.

More than a fundraiser, the Hope Grows Challenge is an opportunity to strengthen culture, unite a team around a meaningful cause, and create lasting change — one small gift at a time.



Scan to learn more about the Hope Grows Challenge.

Host an Event for the Foundation

A backyard brunch. A campus fundraiser. A company challenge. A girls' night with purpose. No matter the size or style, your event can help advance groundbreaking breast cancer research and bring hope to countless individuals and families.

Every fundraising event makes a difference — and you won't be doing it alone. Our Foundation team is here to help with ideas, planning tools, downloadable resources, and fundraising support every step of the way.

Depending on your commitment, we may even be able to provide fun giveaways or prizes for your guests, employees, teammates, or supporters.



Scan to learn more about hosting an event.



Who Can Host an Event?

- Friends and family groups
- Clubs and organizations
- Sports teams
- Schools and campuses
- Companies and workplaces
- Retail partners and community organizations

Planning tips, budget-friendly inspiration, and creative event ideas can be found on pages 30–35!

EVENT PLANNING MADE EASY

Steps to Turn Your Event into a Powerful Movement for Good

■ Start with a Goal ■

Decide what you'd like to raise and what success looks like for your event. Whether your goal is \$250 or \$25,000, having a target helps guide everything from ticket pricing to sponsorships and activities.

Guests love seeing progress! Create a fundraising thermometer or “pink progress bar” guests can track throughout the event.

■ Pick a Theme ■

A great theme makes planning easier — and more fun. Go glam, sporty, cozy, retro, wellness-inspired, or all things pink. The more interactive the experience, the more memorable it becomes. Need inspiration? We've got you covered!

■ Add Details That Make It Special ■

We'll provide customizable digital assets, invitations, signage, QR codes, and social graphics to help your event look polished and cohesive.

As you plan, think about:

- Food & drinks
- Decor & photo moments
- Music & entertainment
- Budget & expenses
- Ways guests can donate throughout the event

Easy crowd-pleasers:

- Signature pink cocktails and mocktails
- A “best-dressed in pink” contest
- Raffle baskets, silent auction, or mystery prizes
- A DIY flower or charm bar
- Insta-snap photo stations

■ Spread the Word ■

Invite everyone! Use social media, email, text chains, flyers, and community groups to build excitement before the big day.

Free to low cost sites such as Pixieset, Memento, ShootProof, GuestCam or SmugMug provide a simple way to have your guests share photos and help spread awareness.

■ Rally Your Crew ■

Every great event has a great team behind it. Ask friends, coworkers, teammates, or family members to help with setup, food, check-in, decorating, photography, or other fundraising activities.

After all, we all love being part of something bigger than ourselves!

■ Enjoy the Big Day ■

Celebrate, connect, and share why this cause matters to you. Your event is helping fund critical breast cancer research and bringing hope to countless families all over the globe.

Don't forget to snap photos, tag the Foundation on social media and encourage guests to share their experience.

■ Say Thank You ■

A heartfelt thank-you goes a long way. Follow up with guests, volunteers, sponsors and donors after the event with photos, updates and appreciation.

“

“Have fun, get creative, and celebrate the impact you're making in the fight against breast cancer. Every gathering helps plant seeds of hope, and we're here with ideas, resources, and support to help you host something truly meaningful!”

—Stephanie Scheele, Foundation Executive Director



A LITTLE INSPO

From casual get-togethers to galas — find your perfect fit.

Gather Your People & Go Pink

Friends, Clubs & Community Groups

Host a Pink Party with a Purpose! Whether it's your sports team, sorority, fraternity, book club, church group, neighborhood association or circle of friends, you can create an event that's both meaningful and fun.

Small Effort, Big Dividends

- Sell Ribbons for Research kits or distribute Hope Grows Challenge cards throughout your school or community
- Create a crowdfunding page in honor of someone you love
- Host a birthday fundraiser in lieu of gifts
- Set up a pink pop-up table at local events

If you decide to plan an event, keep it simple with coffee and cupcakes OR go all out with themed décor, games and entertainment — **every dollar raised supports breast cancer research.**

Big Man on Campus Bachelor Pageant
Bouquets for Breast Cancer
Breast Weekend Ever Wellness Retreat
Brunching for Breast Cancer
Cupcakes for a Cure Bake Sale
Flower Bar for the Foundation
Girls' Night Out for the Girls
Hope for the Holidays
Hope-Sweet-Hope Dessert Party
"How-To" for Hope Cooking or Craft Class
Mahjong & Mimosas
Painting with a Purpose
Pink Patio Party Wine & Cheese Night
Pink Picnic in the Park
Sips & Sweets Soirée
Tea Time for the Ta-tas
Pink Karaoke Night
Pickleball & Prosecco
Pajamas for a Purpose Movie Night
Pink Boots Line Dancing Night
Build-Your-Own Bouquet Bar
Rosé & Ribbons Bingo



SPORTS EVENT INSPO

Get moving for the cause—from casual walks to game day.

Bowling for Breast Cancer
Dig Pink Volleyball Tournament
Golf Fore a Cure
Pickleball in the Park
Pink Ribbon Run/Walk
Pink-A-Palooza Field Day
Pink the Rink
Stick It to Cancer
Hockey Night
Turn the Ballpark Pink
Shoot for a Cure
Basketball Challenge
Pink Yoga on the Lawn

Sports Teams & Associations

Bring your team together for a cause that matters. From youth leagues to college athletics, sports communities are powerful fundraising vehicles. Plus, pink uniforms never go unnoticed!

Once you commit to supporting the Foundation, our team will help coach you through the process.

Team Fundraising Ideas

- Host a Pink Out game or tournament
- Donate a portion of registration or ticket sales
- Auction signed pink jerseys or gear
- Create team fundraising competitions
- Offer “round up” donations at concessions
- Recognize survivors or friends battling breast cancer during halftime

A little friendly competition can do a world of good!





Companies & Retail Locations

Companies

Chances are someone within your workplace has been impacted by breast cancer. Give your employees a meaningful cause to rally around while building connection and community within your organization.

Easy Ways to Participate

- Launch a company-wide Pink Week
- Offer payroll giving options
- Host a pink-themed happy hour or holiday party
- Set fundraising challenges between departments
- Display QR codes and signage in common areas
- Invite a Foundation team member to speak virtually or in person with your employees
- Designate a “desk drop” day with our customizable Hope Grows Challenge campaign.

When a company supports a cause, employees notice!

Retail Locations

Turn everyday shopping into an opportunity to give back.

Retail Fundraising Ideas

- Invite customers to round up at checkout
- Host a Girls’ Night Out shopping event
- Donate a percentage of sales for a day or weekend
- Create an in-store pink display or photo backdrop — exposure for your retail location and for the Foundation at the same time. We call that a win/win!
- Offer pink treats, drinks, or giveaways in exchange for a small donation

Cause-driven experiences build community, and customers love supporting businesses that give back.



HOPE INSPIRED HOSTING

Max Charm...Minimal Spend!

Start with a Color Palette

Pink is always a good idea — but don't be afraid to mix it with bold, unexpected colors.

Pink & red? Pink & green? Pink & blue? Don't mind if we do!

Layer patterns, florals, ribbons, bows, candles, disco balls, or colorful fruit for a fun, modern look.



Blooming on a Budget

Affordable floral tricks we love:

- Single-stem grocery store flowers in bud vases are effortlessly chic and budget-friendly.
- Mix in fruit like apples, pomegranates, dragon fruit, strawberries, or cherries for easy centerpieces that look like they sprang to life from the most perfect Pinterest board.
- Carnations, baby's breath, daisies, and alstroemeria are having a moment again. They're affordable, long-lasting, and surprisingly beautiful when styled in monochromatic bunches.
- A simple potted plant can make a perfect centerpiece. Pink mums, orchids, mini roses, or herbs are all terrific choices.

Remember: It Doesn't Have to Be Perfect

The most meaningful events are the ones filled with heart. Whether you're hosting 10 or 200 people, you're helping create hope for families affected by breast cancer — and that's something worth celebrating.





DIY Details we Love



OUR CURRENT FAVS

Spray paint and Mod Podge can transform almost anything!

- Start with what you have on hand — old toys, vases, fruit or veggies — nothing is off limits
- Pasta sauce jars sprayed or decoupaged become stylish vases
- Turn lanterns, lampshades, and frames into statement décor
- Dollar Store plastic tablecloths easily become giant bows...cute, creative, and incredibly budget-friendly oversized bows



Create a Photo Moment

Guests LOVE a good photo backdrop!

A festive setup doubles as décor and entertainment — and helps spread awareness for the Foundation when guests share their photos on social media.

Current obsession: ribbons & bows, giant flowers, and layered pink textures everywhere.

Start with a Pink Drink

Nothing says “party” quite like a signature pink beverage station.

Offer both cocktails and mocktails, then style the area with pretty glasses, fruit or flower garnishes, pink cotton candy, striped straws, and fun drink tags or beverage toppers.

Even grocery store treats feel elevated when displayed beautifully.



DIRECT GIVING

Power Our Purpose and Discover Ways to Give

General Donation

Every financial donation provides incredible impact to the Foundation. Magnificent discoveries and progress fuel our passion for breast cancer research. Our mothers, daughters, sisters, co-workers, neighbors and friends are at the heart of our dedication. Because of your generous support, a cure is on the horizon!

Scan to donate today



Patricia and P. Michael Miller & Family, Foundation Supporters



Barbara Bradley Baekgaard & Children, Foundation Supporters

Planned Giving

We want to see women thrive, not just survive! You can leave a legacy and ensure the Foundation's mission will live on — today and tomorrow — through planned giving. Gifts can be designated in the form of appreciated stock, real estate, life insurance, cash or a designation of a gift in a will or living trust. Leaving a gift to the Foundation in a will provides a simple way to ensure the future of breast cancer research.

Scan to start a legacy conversation with us



FOUNDATION SPONSORS *LEADING THE WAY*

Platinum \$100,000 +

Barbara Bradley Baekgaard Family Foundation
Patricia and P. Michael Miller & Family
The James Foundation, Inc.
Vera Bradley Associates and Customers

Pink Diamond \$50,000 +

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Kris Reese
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Guiding efforts to bring tangible improvements to the lives of countless individuals impacted by this disease.

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Spoonful of Comfort is honored to collaborate with the Vera Bradley Foundation for Breast Cancer on a special-edition care package that brings comfort to recipients while helping support cancer research.

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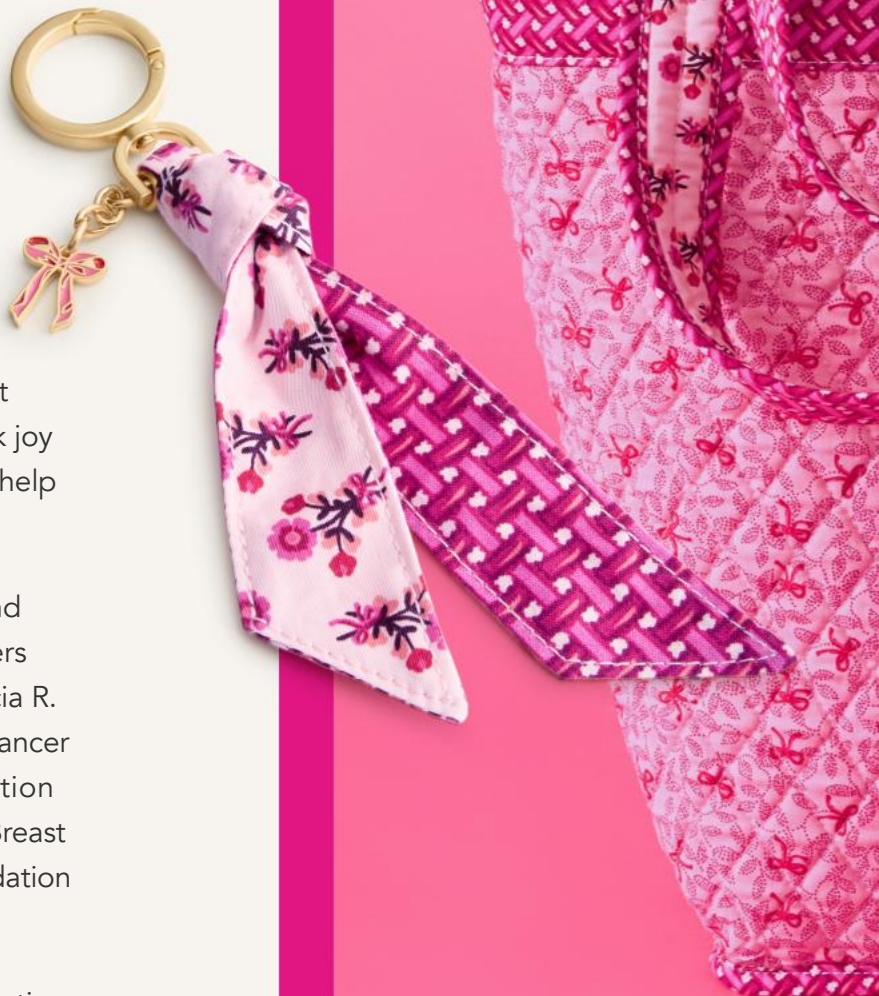
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Inspired by the loss of their dear friend and colleague Mary Sloan, co-founders Barbara Bradley Baekgaard and Patricia R. Miller began raising funds for breast cancer research in 1993, leading to the creation of the Vera Bradley Foundation for Breast Cancer in 1998. Since then, the Foundation has raised more than \$42 million.

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Jenny Lynn McGee
MARCH 31, 1948 ♥ JANUARY 24, 2008



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Our hope for a cure lives on.

The Barbara Bradley Baekgaard Family Foundation
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