Breast cancer is the most common cancer found in women and is the second leading cause of cancer deaths for women in the United States. Breast cancer diagnosed in women 35 years of age or less accounts for <2% of all breast cancer cases. A young age at breast cancer diagnosis is a red flag indicating the presence of hereditary breast cancer and an increased likelihood of identifying a BRCA1 or BRCA2 gene mutation. A significant population of women diagnosed with breast cancer at 35 years of age or less are followed at MD Anderson Cancer Center and have had BRCA1 and BRCA2 genetic testing. A review of the medical records of these individuals was performed, and information related to reproductive risk factors, BMI, tumor pathology and family history was analyzed to identify differences between BRCA1 positive, BRCA2 positive and BRCA negative individuals. Specific trends within the BRCA negative population with respect to these variables were also investigated. There were no differences in reproductive risk factors or BMI between BRCA1 positive, BRCA2 positive and BRCA negative women. The differences in tumor pathology and family history between these populations were consistent with those known to exist for women diagnosed with breast cancer at any age. Within the BRCA negative population, a higher incidence of cancer diagnoses, other than breast cancer, in their first and second degree relatives was not observed. Approximately half of the BRCA negative population had ER+PR+ tumors, which is inconsistent with previous reports that young onset breast cancer is associated with ER-PR- tumors. Several associations were identified between reproductive risk factors or BMI and tumor pathology characteristics that are not consistent with previous literature that did not focus on early onset breast cancer and/or stratify by BRCA mutation status when evaluating these associations. The further characterization of women diagnosed with breast cancer at 35 years old or less may aid in the identification of young women diagnosed with breast cancer that are more likely to carry a BRCA mutation, and will result in a better understanding of the trends in young onset breast cancer in BRCA negative women.