

2012 annual report





## we are living at an extraordinary moment.

building on amazing technologies that took decades to develop, **IIs** is helping to make and further discoveries that will provide every blood cancer patient with safe and effective therapy.

the years people have invested in us and the funds they continue to raise are bringing healing therapies once thought impossible.

simply put, we are closer than ever to the cures for many kinds of blood cancers. we are on the brink of historic breakthroughs that will literally change people's lives.

because of our work, blood cancers will never be the same.

# someday



## the eukemia & **Subbudy** society



John E. Walter President & CEO



Scott Carroll Chair

#### president & chairman's message

When people talk about cancer they often use hopeful words like "someday:" Someday a cure will be found. It is a wonderful shock to realize that today we find ourselves in that someday. As a result of our 60 plus years of investing in new cancer treatments, our productive approach to venture philanthropy, and the breathtaking achievements coming out of our Therapy Acceleration Program<sup>TM</sup> (TAP), the treatments LLS has supported and helped bring to market are bearing fruit: We are saving more lives. And we are saving them faster than ever before.

That is why we are proud to declare this new expression of our commitment: *Someday is today*. We are having a profound effect on the way blood cancers impact our lives. Read through this report and you will be astonished by the breakthroughs we have made and the ones we are close to making. By identifying and funding promising academic research, and making advances that attract necessary biotechnology support, LLS is rushing to patients the therapies they critically need.

An essential component underlying this research is supporting patients directly. LLS provides up-to-date disease, treatment and survivorship information as well as over \$120 million awarded in co-pay assistance for medications and insurance premiums since inception.

As this report goes to press, The Leukemia & Lymphoma Society will have launched a large-scale national media campaign. This important awareness and fundraising effort will differentiate LLS from all charitable causes and focus on the fundamentals of our achievements: We make cures happen. We save lives. We improve quality of life. We give people access to better treatments.

We are one part in the reality business, one part in the business of hope. Our mission is to bring these halves together.

Someday is today.

research 

My story is a wonderful example of how LLS has changed the world. I was one of the first people in the world, not just the country, to take Gleevec<sup>®</sup> With Gleevec as standard treatment, all I have to do is swallow six small yellow pills every day to live a normal life with my family and friends. Now instead of blood transfusions, staggering fatigue, persistent nausea and infections, I can walk marathons. It's truly a miracle. I've been taking this breakthrough drug for almost 14 years.

Virginia Garner San Gabriel Valley, CA

#### coming soon: a world without blood cancers

LLS is committed to life. Our mission is to find cures that make blood cancers a story from the past.

We are making this new world come into being with speed and purpose.

During the last 60+ years LLS has invested more than \$875 million dollars to develop better cancer treatments.

We have funded the development of nearly every drug that's been used in the battle against blood cancers. Nearly half of all cancer drugs first approved by the Food and Drug Administration (FDA) since 2000 were developed for blood cancer patients.

Since the early 1960s the survival rate for many with leukemia, lymphoma, myeloma and related blood malignancies has doubled, tripled, even quadrupled.

In 1964 the chance of surviving ALL, the most common childhood leukemia, was 3%. Today it's 90%.



Thanks to LLS support, hundreds of thousands of blood cancer patients today live normal lives. Some manage their condition with just a daily pill, rather than suffer acute treatment such as chemotherapy or radiation as in years past.

> Thanks to LLS support, hundreds of thousands of blood cancer patients today live normal lives.

#### NCE TRY CANCER, BUT I'M STILL HERE

Joshua was diagnosed with leukemia in April 2008. He was at death's door by the time we discovered what was wrong. It was a nightmare no parent wants to face. Joshua began a 3-1/2-year battle that he won. We are happy to report that with the amazing staff at Brenner's Hospital and many prayers, Joshua is now in remission. Last week he scored two goals in his soccer game that enabled his team to win. We look at this picture now and realize that, at the time, we just wanted him to live. Today he is alive and scoring in his soccer game!

Joshua Lancaster West Palm Beach, FL

#### a more selective approach to killing cancer cells

They're called targeted therapies, and they are some of today's most exciting cancer treatment advances. Like a sharpshooter,

these ingenious drugs take deadly aim at specific abnormal molecules in cancer cells, and destroy them.

LLS funds have helped advance successful targeted drugs such as Gleevec,<sup>®</sup> Velcade<sup>®</sup> and Dacogen<sup>®</sup> LLS is currently funding hundreds of researchers who are testing targeted drugs in new combinations and developing new targeted therapies. Sometimes more than one drug is needed to target the same molecular abnormality. LLS helped advance the related drugs, Sprycel<sup>®</sup> and Tasigna<sup>®</sup>, for leukemia patients for whom Gleevec wasn't good enough.

A new targeted drug Kyprolis<sup>®</sup> — also known as carfilzomib — was recently approved for myeloma patients. It takes aim at the proteasome, a molecular complex that normally degrades damaged proteins that can otherwise gunk up critical cellular functions.

Reports show that carfilzomib generally causes fewer neurological side effects than Velcade, the first approved proteasome-inhibiting drug, and can be used safely with other drugs. Kyprolis is an important new anti-myeloma missile that is also showing activity against other cancers, including other blood cancers.

Isaac, an energetic six-year-old, was diagnosed with lymphoma on New Year's Day 2009. He endured seven grueling rounds of chemotherapy over 12 weeks, which shrunk the tumor sufficiently so that Isaac underwent surgery to remove what was left of the tumor. Three years later he now enjoys a variety of sports and has been on the honor roll for the last two years. His family is thankful to LLS and the researchers who discovered the drugs to treat his lymphoma.

Isaac Bailey Duck Manassas, VA

## using your own immune system to defeat cancer

Immunotherapies that can selectively enhance anti-cancer immune responses are another exciting area of progress in targeted therapies.

Funded by LLS, Dr. Ralph Steinman first began studying an unknown type of immune cell in 1973. He showed that these so-called dendritic cells can activate other immune cells called T cells to promote the immune responses that clear infection from our bodies. Dr. Steinman's work has led to treatments that stimulate anti-cancer immune responses. He was awarded the 2011 Nobel Prize in Medicine.

At the University of Pennsylvania, Dr. Carl June and his LLS-funded team collected patients' normal T cells and genetically engineered them to display an artificial protein that physically delivers the immune T cells to cancer sites, while other parts of the engineered protein help produce additional T cells to amplify the anti-cancer attack.

People are alive today because of this major contribution.

In addition to cell-based therapies, LLS-supported researchers have helped to advance antibody drugs, and anti-cancer vaccines that are already helping patients. Rituxan was



the first antibody drug approved as a cancer therapy by the FDA. Rituxan is now widely used in therapies for patients with various forms of lymphoma or chronic lymphocytic leukemia (CLL), and a variety of other malignant and non-malignant diseases. More antibodies are on the way!

> Nearly half of all cancer drugs first approved by the FDA since 2000 were developed for blood cancer patients.

Kimie enjoys playing with her big brother Reese, riding her guad, swimming, and going to see Shamu. She has been on radio and TV and in the newspapers. She is in the 2012 **Childhood Cancer** Foundations (CCF) calendar. Awareness and advocacy to continue blood cancer research has become a major part of her life. Kimie has a rare sub-type of ALL called AF4/MLL. She falls outside the known treatment parameters, so there isn't a set treatment protocol. She will be followed closely for 10 years. We pray and hope for the best.

Kimie Kiyomi Metcalf Chino, CA

#### venture philanthropy: an investment in saving lives

LLS has a unique infrastructure for identifying and accelerating innovative research for patients with unmet medical needs.

For example, LLS proactively supports research focused on reducing the long-term and late effects of today's blood cancer therapies, so patients who are cured do not face treatment-related health concerns later. LLS is funding Dr. Steven Mittelman of Children's Hospital, Los Angeles, to test a vitamin treatment that may prevent some of these complications.

In another focus area, Dr. A. Keith Stewart of the Scottsdale Mayo Clinic is developing new targeted therapies for patients with myeloma cases that are unlikely to respond to available anti-myeloma drugs.

Through TAP, LLS forges partnerships with universities and biotechnology companies, bringing resources that can more rapidly transform promising research into critically needed therapies, including therapies that might otherwise go undeveloped. Through TAP, and further leveraging his original focused grant funding, LLS helped Dr. Stewart identify new compounds that inhibit a molecular target called GRK6 that he validated in myeloma.

Also, through TAP, LLS recently gave critical support to Onconova's rigosertib, a compound under development for patients with high-risk myelodysplastic syndrome (MDS). Baxter International has licensed the European commercial rights for rigosertib, providing significant resources to further advance this drug to patients.



As a result of LLS's long-time grant support (totalling over \$20 million) to Dr. Carl June, the University of Pennsylvania and Novartis recently formed an alliance to further develop Dr. June's groundbreaking immunotherapy approach using engineered T cells to kill cancers. LLS has funded Dr. June and his team for over 20 years to reach this point, enabling their laboratory discoveries to be developed into powerful new treatments and ultimately attracting a partner of the caliber of Novartis.

These focused funding mechanisms and collaborations, which raise promising therapies to the next level of funding, are a persuasive reason to believe that *someday is today*.



I got the diagnosis of stage 4 follicular, center cell, non-Hodgkin lymphoma. I started treatment as quickly as possible, and soon learned to live with being bald and tired. The doctors, physician's assistants and nurses were awesome, but the real heroes were my family and friends. Lisa and the kids were incredible. My mom and dad stayed three days a week. Neighbors and friends organized dinner deliveries that spoiled us beyond belief. They did whatever driving we needed. Eight months later, a clean bill of health and a 170-person recovery party put this one in the books.

Arthur Valentine Narberth, PA

## how to turn old drugs into new life-saving therapies

In the past, finding new uses for old drugs was largely fortuitous. Today, scientists are using special technologies to match already approved drugs to new purposes. This sharply reduces the time and cost of getting therapies to patients who need them.

Last year LLS entered into a unique public/private collaboration called the Learning Collaborative with the University of Kansas Cancer Center and the National Institutes of Health (NIH) to repurpose existing drugs to treat blood cancer patients. The first project is a clinical trial of auranofin, a rheumatoid arthritis therapy, as a treatment for patients with chronic lymphocytic leukemia. Auranofin has moved from rediscovery to clinical testing in an unusually short time.

LLS has also partnered with Princess Margaret Hospital in Toronto, University of Kansas, and a private company to advance an antifungal agent as a potential treatment for patients with acute myeloid leukemia (AML). Laboratory tests showed that the agent, called CPX, can be effective against leukemia cells as well as fungal infections. Now the drug is being tested in a clinical trial in blood cancer patients, including AML patients.

Other examples include drugs approved to treat viral infections and diabetes that are showing real promise as new treatments for blood cancer patients.

For over 60 years LLS has invested more than \$875 million in developing better cancer treatments. S advocacy 

#### fighting for the right to fair patient treatment

We took our 22-monthold daughter to the pediatrician in November 2011, She was experiencing high fevers and was having trouble walking. After many long hours and lots of tests, it was confirmed that Maddy had ALL. After a grueling nine months of intensive treatment, Maddy is now in long-term maintenance and is doing amazingly well. We are so thankful for our doctors, nurses, friends and family who have stood by our side and supported us during this crisis. And we are so incredibly grateful for the advances in treatment that are making it possible for our precious daughter to survive and thrive.

Erin McCarthy Chicago, IL



Since our founding in 1949, LLS has fought for better public policy on essential patient needs through advocacy. This year LLS brought more than 150 volunteers and staff to Capitol Hill to push for passage of the Prescription Drug User Fee Act (PDUFA); funding for a new institute at NIH called the National Center for Advancing Translational Sciences/Cures Acceleration Network (NCATS/CAN); and for oral-IV (intravenous) parity legislation.

PDUFA was signed into law with impressive bipartisan support, demonstrating that cancer takes no political side when patients express their collective will loud and clear. The law both accelerates the development of new treatments and cures and brings additional focus to the issue of drug shortages, which is of critical importance to LLS and our patients. NCATS/CAN is providing grants and contracts to academic researchers, pharmaceutical and biotechnology companies, and private research foundations to facilitate work on "high need" treatments. Collaborating with the University of Kansas Cancer Center and NCATS, LLS created the "Learning Collaborative" to serve as a model for expediting new treatments for rare or neglected diseases.

#### giving patients access to what their doctor recommends

LLS believes every cancer patient should be able to take advantage of the treatment regimens recommended by their physician. This year, LLS-led coalitions in multiple states resulted in the passage of oral-IV parity bills that improve access to oral and other patient self-administered drugs. These drugs are more widely used in blood cancer treatments but are prohibitive due to high cost-sharing and co-pay requirements. The oral-IV parity bills are intended to ensure patients' coverage at a cost equal to what they would have paid for an IV or other physician-administered drug.

These bills have now been passed in 20 states plus the District of Columbia. LLS is now also leading a study of the effects that these new laws have had on patient access.

#### helping to make the FDA more effective

LLS coordinates with our field advocates to drive better public policy for patients. And by working through the FDA we promote the development and approval of new blood cancer treatments. We also work to ensure that patients can access these new treatments by pressing for reimbursement policies to cover high quality cancer care.

Our TAP program sets a high standard, but we have further to go. To truly achieve the promise of personalized medicine, LLS must bring to bear resources that reflect our role as a leader in research, patient services and support, as well as developing public policies that ensure treatments and services are accessible to every patient who needs them.

Join us today by emailing advocacy@lls.org. S patient services 



I am now an eight-year survivor and have surpassed my original hope of seeing my son graduate from college and my daughter finish high school. I will always be in treatment because there is no cure for CML. I am grateful to LLS for their relentless efforts to find a cure and for supporting the research to develop the tyrosine kinase inhibitor drugs that keep me alive. I try to give back by raising funds through TNT. I have completed 21 TNT athletic events and am a TNT Triple Crown Athlete. Today I work as a Cancer Care Coordinator and help newly diagnosed cancer patients navigate the health care system. Every day is a miracle.

Gail Stephens Orange, CA

## continuing support for patients, family members and caregivers

Today no blood cancer patient will have to worry about having up-to-date information and support. This is readily available for all blood cancer patients through LLS programs and services. Two years ago LLS began a groundbreaking series to educate oncologists and primary care physicians about sharing care for blood cancer survivors. In 2012 the LLS program *Ongoing Nursing Management of Cancer Survivors:* 

Collaboration Between Oncology and Primary Care discussed side effects management and other quality of life issues.

#### doctors' choice for the most helpful co-pay foundation

In 2011 oncologists rated the LLS Co-Pay Assistance Program first in the nation in terms of helping their patients. The program provides support for prescription drug co-pays and health insurance premiums for blood cancer patients who meet diagnosis and income requirements. LLS has awarded over \$120 million to eligible patients since this program's inception.

#### giving patients access to in-depth individual attention

Through the Information Resource Center (IRC), specialists help patients connect with clinical trials and with LLS national education programs. These specialists also work with LLS community-based patient services managers, providing information about local healthcare resources and chapter education and support.

#### advances in blood cancer: webcasts and other new resources

To help patients feel more prepared to discuss treatment with their doctor, LLS launched a series of webcasts to inform them about the latest advances in blood cancer treatment. *Update on Treatment for NHL and CLL*, a webcast in the Advances in Blood Cancer Series, leads patients toward getting an accurate diagnosis.

New 2012 programs and services also include the chronic myeloid leukemia (CML) blog, a discussion of key issues for CML survivors; and the CML Tracker, a mobile tool to keep track of appointments, medications and test results.

#### Ils education programs and support services

LLS chapter, national staff and volunteers provide programs and services that encompass total patient care. Chapter staff maintain relationships with local medical and advocacy organizations. They close cultural gaps for under-represented cancer patient populations. Through a peer support program, the *Patti Robinson Kaufmann First Connection Program*, LLS-trained volunteers meet the needs of the blood cancer community.

LLS's innovative programs and services are reviewed by nationally recognized thought leaders in hematology and oncology.

## S fundraising today



At the age of two I was diagnosed with ALL. Since my treatment my family has been very involved in different fundraising events. I was a patient hero for Team In Training. I did several Light The Night Walks. I used to get mad because I had to carry a white balloon and everyone else had a red one. I wanted to carry the red ones. I didn't understand until later that having the white balloon made me special. I was declared cancer-free at age five and I've been cancer-free ever since. I won the battle. I beat cancer, but I had many friends in the hospital and the doctors' office that lost the battle. I will miss them.

Victoria Callihan McLean, VA

#### targeted giving and bequests that help bring someday to today

Someday could not be today without the help of thousands of donors who choose to forgo the range of LLS athletic and community fundraising activities in favor of a direct giving option. Using checks, appreciated stock or by clicking online, they experience the satisfaction of giving and making an impact through donations large and small. Some give in honor of another's success or in memory of someone lost. Others, making charitable investments of \$10,000 or more, focus their giving on a particular type of blood cancer by choosing among a dozen disease-specific research portfolios.

This year we have had two significant commitments totaling \$3.5 million from The Edward P. Evans Foundation and the Harry T. Mangurian, Jr. Foundation. Both are supporting an advanced phase clinical trial of a new treatment for patients with myelodysplastic syndromes to prevent the disease from advancing to an especially dangerous form of acute leukemia.

Still others, apart from their lifetime charitable giving, make bequest commitments either through a will or as a beneficiary in a retirement plan. By naming a specific amount or a fraction of an estate or retirement account, donors keep assets for as long as needed. Afterwards, the stipulated amount supports life-saving research or services for patients.

This year LLS received more than \$5 million from bequests of all sizes, and we welcomed many new members to our Legacy Circle, the valued group of friends who have let us know about their future intentions through their estate plans.

#### school & youth programs

schoolandyouth.org

This year School & Youth Programs<sup>®</sup> — Pennies for Patients<sup>®</sup> and Olive Garden's Pasta for Pennies<sup>®</sup> — generated a record-breaking \$29.1 million. And Olive Garden's Pasta for Pennies hit a milestone, raising over \$70 million since its inception.

School & Youth Programs show students how their involvement can have life-saving impact on blood cancer patients. Students collect spare change over a three-week period during February or March. The change can come from friends, relatives or under couch cushions. The programs are an important learning tool for kids. Over 27,000 schools registered to participate in the 2012-13 School & Youth Programs.

Someday could not be today without the help of thousands of donors using a direct giving option that better suits their lifestyle.

In April 2008 I was diagnosed with CLL. The type of leukemia I have has no cure. Yet. So I am in "active treatment." Six months after finishing chemo, I found TNT. I credit TNT with helping to keep me healthier and more sane for the last four years. My "numbers" have been slowly growing and I am now to a point where I will be needing chemo again. If it keeps me here four years or more, I'll do it, no problem. I have been blessed to have been able to do 18 endurance events.

Karin O'Brien Portland, OR



#### man & woman of the year

mwoy.org

This spirited fundraising competition is held in communities across the U.S. Participants compete for the title of Man or Woman of the Year. Each candidate relies on family, friends and business contacts to raise as much money as possible. They raise funds for blood cancer research in honor of local children who, as Boy and Girl of the Year, are blood cancer survivors.

In 2012 there were 71 campaigns in North America. Over 800 honored candidates collectively raised a record-breaking \$19.2 million.

The National Man of the Year was Tommy Cleaver of CBRE (Team Name "Living Proof") and the National Woman of the Year was Mary Pillsbury Wainwright of Mary Pillsbury Fine Jewelry Co. Together, they raised a total of over \$530,000.

#### team in training teamintraining.org

Once again Team In Training<sup>®</sup> (TNT) is this year's industry leader in charity endurance sports training programs raising over \$81 million in fiscal year 2012.

2,300 experienced coaches across North America delivered "champion-level" training to 40,000 participants, preparing them to succeed in the event they chose. Not surprisingly, the TNT Corporate Team Development program grew 40% year-over-year, driven by 57 new and returning national teams, and presented 15 Recognition Awards to high fundraising teams who surpassed \$100K.



#### leukemia cup regatta

leukemiacup.org

Held at yacht clubs and other locations across North America, the Leukemia Cup Regatta<sup>®</sup> is a thrilling series of sailing events that combines the excitement of boating with the important contribution of raising money to cure cancer. Since its inception, the Leukemia Cup Regatta has raised over \$42 million.

Skippers register their boats and recruit friends and colleagues to help crew and to raise funds. With national and local event sponsors also supporting Regatta, 2012 was a recordsetting year with nearly \$4.4 million raised at 50 events. Over 100 top fundraisers participated in the Fantasy Sail with Gary Jobson in New York Harbor in October 2011.

The October 2011 San Francisco Yacht Club Leukemia Cup was the first LLS Regatta venue to raise \$1 million; while the Annapolis sailing community marked the 20th anniversary of their Leukemia Cup Regatta.

### light the night walk

Our annual Light The Night<sup>®</sup> Walk continues to engage the business community, patients and their families. Walking in nearly 200 communities across the U.S. and Canada, 250,000 supporters walk to raise funds in honor of survivors, in memory or in support of anyone touched by blood cancer.

Since inception, we have raised over \$400 million, but last year, walks raised an historic recordbreaking total of over \$50 million. Our much honored friend, Burlington Coat Factory, raised over \$2.9 million last year alone, bringing their total amount to \$12 million in the past 10 years. And the ongoing development of local volunteer leadership, including Corporate Walk Chairs and Executive Committees, continues to pave the way to increased revenue for LLS.

Once again Team In Training (TNT) is this year's industry leader in charity endurance sports training programs.

I had stage 4 non-Hodgkin lymphoma. I've gotten chemo, radiation and a stem cell transplant. The transplant was by far the hardest part. I've been in remission since 2009. I got involved with LLS in 2009. Nonetheless I feel lucky to have not only survived but to have gotten sick to begin with. I think many cancer survivors feel that way. Nearly losing your life quickly teaches you how valuable it really all is, and it's easy for people to overlook that on a day-to-day basis. Still, I don't wish the experience on anyone else and that's why I fundraise.

James DeMasi Philadelphia, PA

## research grants

#### The Marshall A. Lichtman **Specialized Center** of Research

The Specialized Center of Research Program funds multi-disciplinary research by teams of leading-edge academic investigators that hasten the discovery and development of better treatments for leukemia. lymphoma and myeloma patients. A center is composed of at least three independent research programs that are integrated and supported by scientific core laboratories.

Jerry Adams, PhD\* Walter & Eliza Hall Institute of Medical Research

Frederick Alt. PhD Immune Disease Institute

Jon Aster, MD\* Brigham & Women's Hospital

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Riccardo Dalla-Favera, MD<sup>2</sup> Columbia University

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Carl June, MD University of Pennsylvania

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> **Career Development Program**<sup>2</sup>

The Career Development Program provides stipends to investigators of exceptional promise in the early stages of their careers, helping them devote their careers to research in leukemia. lvmphoma or myeloma.

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Quality of Life<sup>10</sup>

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Therapy Acceleration Program<sup>12</sup>

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- <sup>1</sup> Acute Lymphoblastic Leukemia Research Portfolio is funded in part by Megan's Wings, Inc. and Deborah Tobias - Translational Research Program.
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\* Denotes multi-year commitment

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account or insurance policy, or fund a charitable gift annuity. We list our newest members below along with those whose bequests of \$10,000 or more were received this year. Rose Accardi\* Petrina Aguilar Mary Albright Joseph Arnold\* Lorae Aumack\* Lorraine Azrak\* **Charles David Barton** Florence Bevan\* Betty Birk\* Roy and Barbara Bouque\* Mariorie Bundrock\* Leatrice Cane\* Tom and Chris Carleton Michael Carter Antoinette Chesere\* Ted Christiansen Elise Church\* Cvnthia Clark Samuel Cohen\* Margot Cole and Seymour Falik Marie Comodo\* Beatrice Cuneo\* Velid Dag\* Helen Dao Winifred DaVia\* Shirley Davidner Joanne Davis Frederick Dibble\* Margaret DiDonato\* Nelson Doland\* Peggy and Margaret Dupaguier\* Hubert Erickson\* Alejandro Garcia

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of their will, trust, retirement

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## independent auditors' report

The Board of Directors

The Leukemia & Lymphoma Society, Inc.:

We have audited the accompanying consolidated statement of financial position of The Leukemia & Lymphoma Society, Inc. (LLS) as of June 30, 2012, and the related consolidated statements of activities, functional expenses, and cash flows for the year then ended. These consolidated financial statements are the responsibility of LLS's management. Our responsibility is to express an opinion on these consolidated financial statements based on our audit. The prior year summarized comparative information has been derived from LLS's 2011 consolidated financial statements and, in our report dated September 15, 2011, we expressed an unqualified opinion on those statements.

We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes consideration of internal control over financial reporting as a basis for designing audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of LLS's internal control over financial reporting. Accordingly, we express no such opinion. An audit also includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements, assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the financial position of The Leukemia & Lymphoma Society, Inc. as of June 30, 2012, and the changes in its net assets and its cash flows for the year then ended in conformity with U.S. generally accepted accounting principles.

KPMG LLP

September 21, 2012 New York, New York

## consolidated statement of financial position

The Leukemia & Lymphoma Society, Inc. / June 30, 2012 (With comparative amounts at June 30, 2011) (In thousands)

	2012		 2011
Assets			
Cash and cash equivalents	\$	25,972	\$ 17,866
Prepaid expenses and other assets		6,716	5,171
Legacies and contributions receivable, net (note 2)		5,413	19,614
Investments (note 3)		184,084	181,876
Fixed assets, less accumulated depreciation			
and amortization of \$11,374 and \$8,606, respectively		6,854	 5,413
Total assets	\$	229,039	\$ 229,940
Liabilities and Net Assets			
Liabilities:			
Accounts payable and accrued expenses	\$	20,196	\$ 17,715
Deferred revenue		17,737	17,241
Grants payable (notes 4, 5, and 6)		73,966	 71,579
Total liabilities		111,899	 106,535
Commitments and contingencies (notes 4, 6, and 8)			
Net assets (note 9):			
Unrestricted		101,620	95,108
Temporarily restricted		12,163	24,405
Permanently restricted		3,357	 3,892
Total net assets		117,140	 123,405
Total liabilities and net assets	\$	229,039	\$ 229,940

## consolidated statement of activities

The Leukemia & Lymphoma Society, Inc. / Year ended June 30, 2012 (With summarized totals for the year ended June 30, 2011) (In thousands)

			т	emporarily		Permanently Total		tal	I	
	U	nrestricted		restricted		restricted		2012		2011
Revenue										
Campaign contributions	\$	262,114	\$	68,041	\$	257	\$	330,412	\$	314,044
Less direct donor benefit costs		(39,173)			_	_		(39,173)		(38,070)
Net campaign contributions		222,941		68,041		257		291,239		275,974
Legacies		3,165		1,884		-		5,049		7,736
Donated services (note 1)		5,328		-		-		5,328		5,983
Net interest and dividend income (note 3) Net (decrease) increase in fair value		2,057		84		11		2,152		2,463
of investments (note 3)		(7)		(212)		64		(155)		15,283
Grant refunds		1,477		-		-		1,477		1,748
Net assets released from restrictions/redesignation		82,906		(82,039)		(867)				
Total revenue		317,867		(12,242)		(535)		305,090		309,187
Expenses (note 10)										
Program Services:										
Research		73,512		-		-		73,512		71,985
Patient and community service		115,727		-		-		115,727		109,496
Public health education		44,772		-		-		44,772		44,197
Professional education		8,785						8,785		7,979
Total program services		242,796						242,796		233,657
Supporting Services:										
Management and general		24,869		-		-		24,869		23,051
Fund raising		43,557						43,557		42,367
Total supporting services		68,426			_			68,426		65,418
Total expenses		311,222			_			311,222		299,075
Change in net assets before foreign currency										
translation adjustment		6,645		(12,242)		(535)		(6,132)		10,112
Foreign currency translation adjustment		(133)						(133)		320
Change in net assets		6,512		(12,242)		(535)		(6,265)		10,432
Net Assets										
Beginning of year		95,108		24,405	_	3,892		123,405		112,973
End of year	\$	101,620	\$	12,163	\$	3,357	\$	117,140	\$	123,405

## consolidated statement of functional expenses

The Leukemia & Lymphoma Society, Inc. / Year ended June 30, 2012 (With comparative totals for the year ended June 30, 2011) (In thousands)

	Program Services			Supporting Services					Direct Donor			
		Patient and community	Public health	Professional		Managemen and	Fund			tal	Benefi	t Costs
	Research	service	education	education	Total	general	raising	Total	2012	2011	2012	2011
Awards and grants	\$ 54,527	\$ -	\$ -	\$ -	\$ 54,527	\$ -	\$ -	\$ -	\$ 54,527	\$ 49,906	\$ -	\$ -
Therapy acceleration program (note 6)	13,871	-	-	-	13,871	-	-	-	13,871	17,895	-	-
Financial aid to patients	-	3,057	-	-	3,057	-	-	-	3,057	5,579	-	-
Co-pay assistance (note 5)	-	45,961	-	-	45,961	-	-	-	45,961	37,947	-	-
Donated services	1,150	4,178	-	-	5,328	-	-	-	5,328	5,983	-	-
Salaries	1,972	28,845	17,498	4,588	52,903	8,034	9,903	17,937	70,840	67,772	-	-
Employee benefits and taxes (note 7)	276	7,755	5,195	1,303	14,529	2,433	3,633	6,066	20,595	20,131	-	-
Occupancy (note 8)	42	3,400	2,522	675	6,639	1,066	1,456	2,522	9,161	8,801	-	-
Insurance	9	262	135	19	425	59	107	166	591	570	-	-
Telephone	35	1,214	918	136	2,303	307	988	1,295	3,598	3,692	-	-
Travel	94	1,403	1,082	293	2,872	613	678	1,291	4,163	3,614	9,801	10,500
Printing and supplies	197	2,615	5,413	413	8,638	3,997	8,489	12,486	21,124	22,385	6,867	6,294
Equipment rentals and maintenance	19	1,026	598	153	1,796	279	427	706	2,502	2,509	-	-
Postage and shipping	9	921	3,418	110	4,458	1,604	5,727	7,331	11,789	13,322	-	-
Meetings	633	1,976	803	138	3,550	394	411	805	4,355	3,446	11,129	10,266
Professional fees	607	10,531	5,471	535	17,144	4,982	10,395	15,377	32,521	30,426	3,682	3,529
Miscellaneous	26	1,647	1,030	295	2,998	754	719	1,473	4,471	3,021	7,694	7,481
Depreciation and amortization	45	936	689	127	1,797	347	624	971	2,768	2,076		
Total expenses	\$ 73,512	\$ 115,727	\$ 44,772	\$ 8,785	\$ 242,796	\$ 24,869	\$ 43,557	\$ 68,426	\$ 311,222	\$ 299,075	\$ 39,173	\$ 38,070

Expenses		
Research	23.6%	
Patient and Community Service	37.2%	
Public Health Education	14.4%	000/
Professional Education	2.8%	22%
Total Program Services	78.0%	
Management and General	8.0%	
Fundraising	14.0%	78%
Total Supporting Services	22.0%	
Total Expenses	100.0%	

## consolidated statement of cash flows

The Leukemia & Lymphoma Society, Inc. / Year ended June 30, 2012 (With comparative amounts for the year ended June 30, 2011) (In thousands)

	2012		 2011
Cash flows from operating activities:			
Change in net assets	\$	(6,265)	\$ 10,432
Adjustments to reconcile change in net assets to			
net cash provided by (used in) operating activities:			
Net decrease (increase) in fair value of investments		155	(15,283)
Permanently restricted contributions collected		(257)	(105)
Depreciation and amortization		2,768	2,076
Increase (decrease) in allowance for uncollectible accounts		40	(426)
Changes in operating assets and liabilities:			
Prepaid expenses and other assets		(1,545)	(464)
Legacies and contributions receivable, net		14,161	(771)
Accounts payable and accrued expenses		2,481	1,267
Deferred revenue		496	301
Grants payable		2,387	 (9,001)
Net cash provided by (used in) operating activities		14,421	 (11,974)
Cash flows from investing activities:			
Purchases of fixed assets		(4,209)	(2,357)
Purchases of investments		(94,729)	(49,023)
Sales of investments		92,366	 59,919
Net cash (used in) provided by investing activities		(6,572)	 (8,539)
Cash flows from financing activities:			
Permanently restricted contributions collected		257	 105
Net cash provided by financing activities		257	 105
Net increase (decrease) in cash and cash equivalents		8,106	(3,330)
Cash and cash equivalents at beginning of year		17,866	 21,196
Cash and cash equivalents at end of year	\$	25,972	\$ 17,866

## notes to consolidated financial statements

The Leukemia & Lymphoma Society, Inc. / June 30, 2012 (with comparative amounts as of and for the year ended June 30, 2011)

#### 1. Organization and Significant Accounting Policies

#### Organization

The Leukemia & Lymphoma Society, Inc. (LLS) is an international not for profit health agency dedicated to seeking the cure of leukemia, lymphoma, Hodgkin's disease, and myeloma and improving the quality of life of patients and their families. LLS's principal activities include: awarding research grants; facilitating psychosocial support groups; providing financial aid to patients; answering phone requests for blood cancer information made to LLS's Information Resource Center; and disseminating educational information about blood cancers in the form of publications, internet sites, conference calls, and symposia sponsorship for both the medical community and the general public.

#### **Tax Exempt Status**

LLS qualifies as a charitable organization as defined by Internal Revenue Code Section 501(c)(3) and, accordingly, is exempt from federal income taxes under Internal Revenue Code Section 501(a). Additionally, since LLS is publicly supported, contributions to LLS qualify for the maximum charitable contribution deduction under the Internal Revenue Code.

The Leukemia & Lymphoma Society of Canada, Inc. (LLSC) is registered as a charitable organization under the Income Tax Act (Canada) and is, therefore, not subject to income taxes if certain disbursement requirements are met.

LLS recognizes the effect of income tax positions only if those tax positions are more likely than not to be sustained. Income generated from activities unrelated to LLS's exempt purpose is subject to tax under Internal Revenue Code Section 511. LLS did not recognize any unrelated business income tax liability for the years ended June 30, 2012 and 2011.

#### **Principles of Consolidation**

The accompanying consolidated financial statements include the accounts of LLS, which encompasses the Home Office of LLS and its fifty six chapters in the United States, LLSC and its five chapters in Canada, and LLS's not for profit affiliates, The Leukemia & Lymphoma Society Research Programs, Inc. and The Leukemia & Lymphoma Society Research Foundation. All significant intercompany and intra-LLS accounts and transactions have been eliminated in consolidation.

#### Estimates

The preparation of the consolidated financial statements in conformity with generally accepted accounting principles requires LLS's management to make estimates and assumptions that affect the amounts reported in the consolidated financial statements and accompanying notes. The significant estimates made in the preparation of these consolidated financial statements include the fair value of alternative investments, the allowance for uncollectible accounts, and the allocation of expenses. Actual results could differ from those estimates.

#### **Risks and Uncertainties**

LLS invests in various investment securities. Investment securities are exposed to various risks such as interest rate, fluctuations in market security values, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect the amounts reported in the consolidated statement of financial position.

LLS's principal source of revenue is amounts contributed by the general public. Accordingly, LLS's operations are impacted by individual contributions, which are impacted by general economic conditions, employment levels and other factors over which LLS has little or no control. In addition, five contributors provided support to the co-pay program in 2012.

#### **Summarized Financial Information**

The consolidated financial statements are presented with 2011 summarized or comparative information. With respect to the consolidated statement of activities, such prior year information is not presented by net asset class and, in the consolidated statement of functional expenses, 2011 expenses by object are presented in total rather than by functional category. Accordingly, such information should be read in conjunction with LLS's 2011 consolidated financial statements from which the summarized information was derived.

#### Subsequent Events

LLS evaluated subsequent events after the consolidated statement of financial position date of June 30, 2012 through September 21, 2012, which was the date the consolidated financial statements were issued, and concluded that no additional disclosures are required.

#### **Net Asset Classifications**

To ensure observance of limitations and restrictions placed on the use of resources available to LLS, funds that have similar characteristics have been classified into three net asset categories as follows:

Unrestricted net assets: Consist of funds that are fully available, at the discretion of LLS's Board of Directors, for LLS to utilize in any of its programs or supporting services.

*Temporarily restricted net assets:* Consist of funds that are restricted by donors for a specific time period and/or purpose.

Permanently restricted net assets: Consist of funds that contain donor-imposed restrictions requiring that the principal be invested in perpetuity and that only the income be used except where donor specified. Income earned on these funds are recorded as temporarily restricted net assets and are released from restriction when the donor stipulated purpose has been fulfilled and/or the amount has been appropriated in compliance with the Board-approved spending policy (note 9).

#### **Foreign Currency Translation**

LLSC uses the Canadian dollar as its functional currency. Accordingly, the currency impact of the translation of the financial statements of LLSC to U.S. dollars is included as a translation adjustment in the consolidated statement of activities.

#### **Fair Value Measurements**

Fair value is defined as the exchange price that would be received for an asset or paid to transfer a liability (an exit price) in the principal or most advantageous market for the asset or liability in an orderly transaction between market participants at the measurement date. The three levels of the fair value hierarchy are as follows:

- Level 1 inputs are quoted prices (unadjusted) in active markets for identical assets or liabilities that a reporting entity has the ability to access at the measurement date.
- Level 2 inputs other than quoted prices included within Level 1 that are observable for the asset or liability, either directly or indirectly.
- Level 3 unobservable inputs for the asset or liability.

LLS follows the provisions of Accounting Standards Codification (ASC) 820, *Fair Value Measurements and Disclosures* (ASC 820), which allows as a practical expedient, for the estimation of the fair value of investments in investment companies for which the investment does not have a readily determinable fair value, using net asset value per share or its equivalent, as reported by the investment managers. Most investments classified in Levels 2 and 3 consist of shares or units in investment funds as opposed to direct interests in the funds' underlying holdings, which may be marketable. Because the net asset value reported by each fund is used as a practical expedient

## notes to consolidated financial statements

The Leukemia & Lymphoma Society, Inc. / June 30, 2012 (with comparative amounts as of and for the year ended June 30, 2011)

to estimate the fair value of LLS's interest therein, its classification in Level 2 or 3 is based on LLS's ability to redeem its interest at or near June 30. If the interest can be redeemed in the near term, the investment is classified as Level 2.

#### **Contributions and Deferred Revenue**

Contributions are recorded as revenue, at their fair value, when received or promised unconditionally. Contributions received with donor restrictions that limit their use are reported as either temporarily or permanently restricted revenue. When a donor restriction is met through the passage of time and/or fulfillment of a purpose restriction, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the consolidated statement of activities as net assets released from restrictions. Conditional contributions are recognized as revenue when the conditions have been substantially met.

Deferred revenue includes amounts received for special events that will be held subsequent to the fiscal year end.

#### **Donated Services**

LLS has determined that certain of the donated services it receives meet the criteria for recognition in the consolidated financial statements. Specifically, the donated services of family support group facilitators and research grant reviewers in the amount of \$5,328,000 in 2012 and \$5,983,000 in 2011 have been valued and are reported as both revenue and expense.

#### **Cash Equivalents**

Cash equivalents consist of short term investments with an original maturity of three months or less from date of purchase, except for amounts held for long term purposes reported as investments.

#### Investments

Investments are stated at fair value. Investments in equity securities and mutual funds are determined by utilizing quoted year end closing prices. Alternative investments are stated at net asset values provided by the fund managers or general partners based upon the underlying net assets of the funds consistent with the concepts of ASC 820. These values are reviewed and evaluated by management.

#### **Fixed Assets and Depreciation**

Fixed assets, which consist principally of equipment, software, and leasehold improvements, are recorded at cost, if purchased, or at fair value at date of donation, if contributed, and are depreciated or amortized using the straight-line method over the estimated useful lives of the assets or the terms of the leases, if shorter.

#### **Professional Fees**

Professional fees included in the consolidated financial statements principally include fund raising counsel fees, data processing services, contracted software development, and legal and auditing fees.

#### **Recently Issued Accounting Standards**

In May 2011, the FASB issued ASU 2011-04, *Fair Value Measurement (Topic 820): Amendments to Achieve Common Fair Value Measurement and Disclosure Requirements in U.S. GAAP and IFRSs.* The new standards do not extend the use of fair value but, rather, provide guidance about how fair value should be applied where it already is required or permitted under IFRS or U.S. GAAP. For U.S. GAAP, most of the changes are clarifications of existing guidance or wording changes to align with IFRS. A nonpublic entity is required to apply the ASU prospectively for annual periods beginning after December 15, 2011. LLS expects that the adoption of ASU 2011-04 will not have a material impact on its consolidated financial statements.

#### 2. Legacies and Contributions Receivable

LLS's legacies and contributions receivable at June 30, 2012 and 2011 consist of unconditional promises to give and legacies for which the underlying wills have been declared valid by the probate court and no other conditions are required to be met. Amounts are scheduled to be received as follows (in thousands):

	2012	2011
Less than one year	\$ 3,766	\$ 17,905
1 to 5 years	2,300	2,710
After 5 years	712	104
Subtotal	6,778	20,719
Less allowance for uncollectible accounts	(778)	(738)
Less discount to present value (1.5% to 5%)	(587)	(367)
Total	\$ 5,413	\$ 19,614

Approximately 66% of LLS's legacies and contributions receivable was from one estate at June 30, 2011, which was received in 2012.

#### 3. Investments

The following tables present LLS's fair value hierarchy of investments measured at fair value on an annual basis as of June 30, 2012 and 2011 (in thousands):

	2012	Level 1	Level 2	Level 3
Money market funds and cash	\$ 956	\$ 956	\$ -	\$ -
Fixed income (mutual funds):				
Long duration	70,220	70,220	-	-
Short duration	37,159	37,159	-	-
Other	1,061	1,061	-	-
Equities and other mutual funds:				
Large cap	11,484	11,484	-	-
International	15,958	15,958	-	-
Small/mid cap	4,491	4,491	-	-
Alternative investments:				
Funds of hedge funds	37,501	-	34,459	3,042
Limited partnership equity indices	5,254		5,254	
	\$184,084	<u>\$141,329</u>	\$ 39,713	\$ 3,042

	2011	Level 1	Level 2	Level 3
Money market funds and cash	\$ 839	\$ 839	\$ -	\$ -
Fixed income (mutual funds):				
Long duration	57,910	57,910	-	-
Short duration	42,826	42,826	-	-
Other	1,039	1,039	-	-
Equities and other mutual funds:				
Large cap	16,703	16,703	-	-
International	6,552	6,552	-	-
Small/mid cap	5,369	5,369	-	-
Alternative investments:				
Funds of hedge funds	35,503	-	35,503	-
Limited partnership equity indices	15,135		15,135	
	\$181,876	\$131,238	\$ 50,638	<u>\$                                    </u>

Investment expenses of \$625,000 and \$752,000 have been netted against interest and dividend income for the years ended June 30, 2012 and 2011, respectively. The unrealized (losses) and gains were (\$5,514,000) and \$7,428,000 for the years ended June 30, 2012 and 2011, respectively.

LLS invests in certain alternative investments, through "funds of hedge funds" investments, which invest in multiple strategies through a portfolio of hedge fund managers to provide diversification and reduce manager risk. These strategies create indirect exposure to LLS through short sales of securities, trading in future and forward contracts, and other derivative products. Derivatives are investment contracts used to hedge risk. While these financial instruments may contain varying degrees of risk, LLS's risk with respect to such transactions is limited to its capital balance in each investment.

The underlying holdings of the limited partnership equity indices are principally domestic and international marketable securities.

LLS's alternative investments contain various redemption restrictions with required written notice ranging from 70 to 95 days, after the initial holding period. As of June 30, 2012, the following table summarizes the composition of such investments at fair value by the various redemption provisions (in thousands):

Redemption period	Funds of Limited hedge funds partnerships
Monthly	\$ - \$ 5,254
Quarterly	34,459 –
Annual	3,042 -
Total	<u>\$ 37,501</u> <u>\$ 5,254</u>

As of June 30, 2012 and 2011, LLS has no unfunded commitments on its alternative investments.

The following table presents a reconciliation for all Level 3 assets measured at fair value as of June 30, 2012 and 2011 (in thousands):

	Level 3 Assets			
	2	012	20	11
Balance at July 1	\$	_	\$ 15	,992
Purchases	;	3,135		-
Investment expense		-		(211)
Net (decrease) increase in fair value				
Transfers to Level 2 due to expiration		(93)	1	,118
of lock-up period)			(16	,899)
Balance at June 30	\$	3,042	\$	_

#### 4. Awards and Grants

Awards and grants for research are recognized as expense when approved by LLS's Board of Directors and conditions have been satisfied. Multiyear grants, which are generally two to five years in length, are approved on an annual basis and may be terminated at the discretion of LLS's Board of Directors. LLS has unconditional grants payable of \$68,315,000 and \$66,098,000 at June 30, 2012 and 2011, respectively.

In addition, LLS has grant commitments of \$48,875,000 and \$63,500,000 at June 30, 2012 and 2011, respectively, that are conditioned upon future events and, accordingly, are not recorded.

#### 5. Co-Pay Assistance Program

The Co-Pay Assistance program offers assistance to patients in meeting their insurance co-pay obligations for prescription medications and/or private/public health insurance premiums. Amounts awarded under the program are expensed in the year approved based on the available funding in the program. Approximately \$5,651,000 and \$3,931,000 were included in the grants payable balances for amounts awarded but unpaid at June 30, 2012 and 2011, respectively.

#### 6. Therapy Acceleration Program (TAP)

TAP is LLS's strategic initiative to speed the development of blood cancer treatments and supportive diagnostics by creating business alliances with biotechnology and pharmaceutical companies. TAP provides funding for investigational new drug-enabling studies and clinical-stage projects. TAP contract commitments are recognized as an expense in the year program milestones are achieved. Approximately \$1,550,000 was included in the grants payable balances for milestones achieved but unpaid at June 30, 2011. No amounts were payable at June 30, 2012. Multiyear contracts, which are generally two to three years in length, are reviewed against milestones on a quarterly basis and may be terminated at the discretion of LLS's Board of Directors.

In addition, LLS has contract commitments of \$19,078,000 and \$25,169,000 at June 30, 2012 and 2011, respectively, that are conditioned upon future events and, accordingly, are not recorded.

## notes to consolidated financial statements

The Leukemia & Lymphoma Society, Inc. / June 30, 2012 (with comparative amounts as of and for the year ended June 30, 2011)

#### 7. Pension Plan

LLS has a defined contribution 403(b) pension plan covering all employees meeting age and service requirements. Contributions are based on a percentage of each eligible employee's salary and years of service. Expenses under this plan aggregated \$3,967,000 and \$3,823,000 for the years ended June 30, 2012 and 2011, respectively.

LLS has a 457(b) deferred compensation plan (the 457 Plan) for its executive staff. The 457 Plan is a nonqualified deferred compensation plan subject to the provisions of the Internal Revenue Code Section 457. Expenses under the 457 Plan approximated \$157,000 and \$167,000 for the years ended June 30, 2012 and 2011, respectively. The assets and liabilities of the 457 Plan are included in investments and accounts payable in the accompanying consolidated statement of financial position and amounted to approximately \$1,196,000 and \$973,000 at June 30, 2012 and 2011, respectively.

#### 8. Lease Commitments

The leases for premises, which LLS's Home Office and chapters occupy, expire on various dates through September 30, 2018 and provide for certain payments subject to escalation and periodic rate increases relating to real estate taxes, operating expenses, and utilities. The Home Office lease expires in March 2016.

The approximate minimum aggregate future annual rental commitments are summarized as follows (in thousands):

Year ending June 30:	_	
2013	\$	7,840
2014		6,593
2015		5,904
2016		4,059
2017		1,714
Thereafter		450
Total	\$	26,560

#### 9. Temporarily and Permanently Restricted Net Assets

Temporarily restricted net assets and the income earned on permanently restricted net assets are available for the following purposes at June 30, 2012 and 2011 (in thousands):

	20	12	2011			
	Temporarily restricted	Permanently restricted	Temporarily restricted	Permanently restricted		
Time restrictions	\$ 1,150	\$ -	\$ 15,259	\$ -		
Research	7,898	3,139	5,450	3,016		
Patient service	2,718	-	3,608	730		
Other	397	218	88	146		
Total	\$ 12,163	\$ 3,357	\$ 24,405	\$ 3,892		

LLS follows the provisions of the New York Prudent Management of Institutional Funds Act (NYPMIFA), which imposes guidelines on the management and investment of endowment funds. LLS has interpreted the relevant law as allowing LLS to appropriate for expenditure or accumulate so much of an endowment fund as LLS determines is prudent considering the uses, benefits, purposes and duration for which the endowment fund is established, subject to the intent of the donor as expressed in the gift instrument. LLS has adopted investment and spending policies for endowment funds while seeking to protect the original value of the gift. Under this policy, the endowment assets are invested in a manner that is intended to produce results consistent with LLS's overall investment strategy.

The following table presents changes in the donor-restricted endowment funds for the year ended June 30, 2012 (in thousands):

	Unrest	ricted	nporarily stricted	manently	 Total
Endowment net assets at July 1	\$	_	\$ 3,280	\$ 3,892	\$ 7,172
Investment income		-	77	11	88
Net (depreciation) appreciation		-	(202)	64	(138)
Contributions		-	-	257	257
Net assets redesignated by donor		_	 	 (867)	 (867)
Endowment net assets at June 30	\$	_	\$ 3,155	\$ 3,357	\$ 6,512

The following table presents changes in the donor-restricted endowment funds for the year ended June 30, 2011 (in thousands).

	Uni	restricted	nporarily stricted	manently stricted	 Total
Endowment net assets at July 1	\$	1,895	\$ 362	\$ 3,688	\$ 5,945
Investment income		-	152	-	152
Net appreciation		-	760	127	887
Contributions		-	111	105	216
Net assets redesignated by donor		-	-	(28)	(28)
Reclassification upon enactment					
of NYPMIFA		(1,895)	 1,895	 	 
Endowment net assets at June 30	\$		\$ 3,280	\$ 3,892	\$ 7,172

#### **10. Joint Costs Allocation**

For the years ended June 30, 2012 and 2011, LLS incurred joint costs for informational materials and activities that included fund raising appeals as follows (in thousands):

	2012	2011
Fund raising	\$ 11,509	\$ 12,543
Patient and community service	1,049	1,078
Public health education	9,522	10,725
Total	\$ 22,080	\$ 24,346

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Brookfield, WI 53005

5845 Richmond Highway-Suite 800

200 South Executive Drive-Suite 203

#### New York

5 Computer Drive West - Suite 100 Albany, NY 12205

518.438.3583 4053 Maple Road - Suite 110 Amherst, NY 14226

914.949.0084

Suite 200

North Carolina

Cary, NC 27513

North Dakota

See Minnesota

Ohio

919 367 4100

401 Harrison Oaks Boulevard

2225 City Gate Drive-Suite E

5700 Brecksville Road - 3rd Floor

500 North Broadway-Suite 250

Oklahoma City, OK 73102

9320 SW Barbur Boulevard

Portland, OR 97219

Independence, OH 44131

Columbus, OH 43219

614 476 7194

216.264.5722

Oklahoma

405.953.8888

Oregon

Suite 140

503.245.9866

716.834.2578 1324 Motor Parkway - Suite 102 Hauppauge, NY 11749 631.370.7530

475 Park Avenue South 8th Floor New York, NY 10016

#### 212.376.7100 1311 Mamaroneck Avenue - Suite 130 White Plains, NY 10605

## the faces 13 VI D

1. Sophie Medlock, leukemia survivor, Post Falls, ID

2. Isaac Bailey Duck, lymphoma survivor, Manassas, VA

3. Melissa Casteel, Hodgkin lymphoma survivor, Massachusetts

4. Anthony Poichetti, juvenile myelomonocytic leukemia survivor, Mount Washington, KY

5. Jonte Smith, ALL & Sicklecell survivor, Kansas City, MO

6. Sadie Floyd, ALL survivor, Portland, OR

7. Arthur Valentine, non-Hodgkin lymphoma survivor, Narbeth, PA

8. Judie Orem, CML survivor, Orange, CA

9. Madalyn McCarthy, ALL survivor, Chicago, IL

10. Kimie Kiyomi Metcalf, ALL survivor, Chino, CA

11. Karina Miziolek, leukemia survivor, Portland, OR

12. Jacob Kenneth DeLong, ALL survivor, Santa Clarita, CA

13. Billie, ALL survivor, Boulder, CO

14. Brianna Garcia, ALL survivor, Springfield, VA

15. Virginia Garner, CML survivor, Claremont, CA

16. Alex Wilkison, leukemia survivor, California

17. Victoria Callihan, ALL survivor, McLean, VA

18. Angela Mary Butler, Hodgkin lymphoma survivor, St. John's Newfoundland, Canada

19. Jamie Quevedo & Joshua, PH+ ALL -Jamie passed away a year after giving birth to her son Joshua. West Palm Beach. FL

20. Douglas McBride, MALT lymphoma survivor

21. Agnes Connors, B-cell lymphoma survivor

22. James DeMasi, non-Hodgkin lymphoma survivor, Philadelphia, PA

23. Jeff Gusinow, follicular lymphoma survivor, Eugene, OR

24. Aaron Baral, T-cell ALL survivor, Boston, MA



## mission

cure leukemia, lymphoma, hodgkin's disease and myeloma, and improve the quality of life of patients and their families.

not in the future, but now.



1311 Mamaroneck Avenue Suite 310 White Plains, NY 10605 914.949.5213 www.lls.org

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