

2015 ANNUAL REPORT

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MICAYLA WYNN CHRONIC MYELOID LEUKEMIA SURVIVOR President and Chairman's Message



Louis J. DeGennaro, PhD President & CEO



James H. Davis, PhD, JD Chairman of the Board

Every day brings more proof of The Leukemia & Lymphoma Society's impact

on the cancer treatment landscape, and our leadership was especially apparent in Fiscal Year 2015. New therapies for blood cancers are being discovered faster than ever before and those same treatments are also being tested for patients with other cancers like breast, colon and pancreatic cancer, and serious diseases like rheumatoid arthritis. And we continue to work diligently every day to ensure that all blood cancer patients have access to the treatments they so desperately need.

Thanks to you, The Leukemia & Lymphoma Society (LLS) is a driving force in making someday today for the more than 1.2 million people in the United States living with a blood cancer. From the strong science and advances in research you are helping us to spearhead, to wins in advocating for patients with legislators and policymakers, to helping newly diagnosed patients navigate their treatment, we continue to earn our

leadership mantle as the voice for all blood cancer patients. Patients, caregivers and donors continually inspire us to keep investing in lifesaving breakthroughs.

We raised awareness about blood cancers and the LLS mission through a wide array of media and communications channels in Fiscal Year 2015.
You'll see this, for example, in our support of the PBS documentary, *"Ken Burns Presents Cancer: The Emperor of All Maladies,"* which allowed LLS to showcase our historic role in advancing blood cancer treatments.

Our Therapy Acceleration Program continues to bridge the gap between discoveries in the laboratory and drug development, and this past year we entered into partnerships with even more biotechnology companies working on cutting-edge drug discovery and development programs. We continue to lead the charge against acute myeloid leukemia (AML) – now the most frequently diagnosed leukemia in adults – through the Harry T. Mangurian, Jr. Foundation Beat AML collaboration, changing the paradigm of how patients with AML are treated.

Fiscal Year 2015 also saw advances in therapies for patients with chronic lymphocytic leukemia (CLL), and a first-ever therapy indicated specifically for patients diagnosed with the rare Waldenstrom's macroglobulinemia.

We continued to help patients when they were diagnosed by providing critical support and information through our Information Resource Center, which received more than 60,000 calls from patients, families, and caregivers this past year alone. And, our advocacy efforts paid off this year with five additional states adopting oral parity legislation and the near unanimous passage in the U.S. House of Representatives of the 21st Century Cures Act, designed to reform and accelerate the drug discovery and development process.

As LLS's impact grows we see our important work not just helping patients with blood cancers, but reaching well beyond to help patients with other cancers and serious diseases as well. Treatments originally designed and tested in blood cancer patients are now being tested in other patients with diseases as diverse as pancreatic cancer and Parkinson's disease. We have made much progress, but there is more work to be done.

We are inspired every day by the researchers who are in a hurry to find cures, by thousands of volunteers across the country raising funds and supporting patients, by our dedicated staff across our 55 chapters on the frontlines with patients and families, and, most of all, by blood cancer patients waging heroic battles against these diseases. With your continued support, we will make someday today for more blood cancer patients and pave the way for treatments and cures across the cancer landscape.

Louis J. DeGennaro, PhD President & CEO

James H. Davis, PhD, JD Chairman of the Board

THERAPY ACCELERATION PROGRAM

LLS celebrated milestones achieved by several partners in our Therapy Acceleration Program (TAP), and introduced two new companies into the TAP portfolio in Fiscal Year 2015. We supported a total of 24 TAP partnerships in Fiscal Year 2015.

UNIVERSITY OF MICHIGAN

A promising University of Michigan research project, supported through TAP and focused on developing new treatments for patients with a rare and lethal subtype of leukemia, received a significant boost from a licensing agreement with a new biotechnology company, Kura Oncology. LLS has been funding this work, led by Assistant Professor Jolanta Grembecka, PhD, in collaboration with Tomasz Cierpicki, PhD, at the University of Michigan, since 2009. The research aims to develop new treatments for patients with leukemia associated with abnormalities in the mixed lineage leukemia (MLL) gene. These patients have a very poor prognosis with current therapies.

CELATOR PHARMACEUTICALS

LLS has been supporting the development of Celator Pharmaceuticals' CPX-351, a special formulation of two standard chemotherapy drugs, to treat patients with high-risk acute myeloid leukemia (AML). The therapy received a Fast Track Designation from the U.S. Food and Drug Administration, and interim data released from a Phase 3 clinical trial showed that CPX-351 performed better than standard therapy. LLS looks forward to seeing the overall survival data within the coming year.

ONCOPEP

LLS entered into a partnership with OncoPep to advance an experimental cancer vaccine that is designed to activate the immune system and control smoldering multiple myeloma (SMM), an asymptomatic stage of myeloma.

Advancing Innovation in Research

The LLS research agenda is focused on finding cures. LLS drives research in areas of unmet medical need.



LLS'S VENTURE PHILANTHROPY IN THE MEDIA

The vaccine, PVX-410,

was granted orphan drug designation by

the U.S. Food and

in 2013. LLS has

committed to an

equity investment

of \$690,000 in

the effort. A Phase

1/2 clinical trial is

currently under way.

KITE PHARMA

LLS and Kite Pharma entered into a partnership

to support a clinical trial for KTE-C19, a CAR-T

investigational therapy that genetically modifies patients' T cells to target a specific protein, CD19, on the cell surface of B-cell lymphomas and leukemias. Once activated, the T cells home in on and eliminate the cancer cells.

(chimeric antigen receptor) immunotherapy for the treatment of patients with refractory non-Hodgkin lymphoma (NHL). KTE-C19 is an

Drug Administration

LLS's venture philanthropy leadership in the cancer space garnered significant visibility in the October 2014 issue of *Health Affairs*, a leading peerreviewed journal on health policy, thought and research. The article, "New Players Join the Drug Development Game," features our TAP prominently throughout.

In developing TAP, LLS recognized the need to take a more proactive role in order to accelerate the development of treatments and cures. The *Health Affairs* article noted that five of the small companies that LLS invested in later benefited from investment and licensing deals from large pharmaceutical companies.

JOLANTA GREMBECKA, PhD, PROFESSOR AND RESEARCHER AT UNIVERSITY OF MICHIGAN

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THE LEUKEMIA & LYMPHOMA SOCIETY 3



BEAT AML

LLS continued to lead the charge against acute myeloid leukemia (AML) in Fiscal Year 2015, with its groundbreaking Harry T. Mangurian, Jr. Foundation Beat AML collaboration. LLS teamed up with Brian Druker, MD, and his research team at Oregon Health & Science University's Knight Cancer Institute in 2013 to accelerate the development of treatments for patients with AML. The researchers are deploying cutting-edge technology to create a profile of genetic defects in AML cells, and testing different drugs and drug combinations to determine the most effective treatments based on individual patients' particular genetic mutations. As we look to the next phase of the groundbreaking Beat AML initiative in the coming year, LLS anticipates that the innovative collaboration will prove to be a model for other cancer research and discovery programs. Generous donors have contributed more than \$8 million to support this initiative, including more than \$4 million from the Harry T. Mangurian, Jr., Foundation and more than \$300,000 raised through an online spring campaign.



THE EMPEROR OF ALL MALADIES

LLS was a proud supporter of the PBS documentary, *Ken Burns Presents "Cancer: The Emperor of All Maladies,"* a film by Barak Goodman. The film showcased a number of key treatment advances pioneered by LLS, including groundbreaking work in targeted

277 academic grants funded in FY15

therapies for certain forms of leukemia. This brilliant history of cancer, based on the Pulitzer Prize-winning book by Siddhartha Mukherjee, MD, is really the story of LLS and blood cancers, and shows we are truly at a unique moment in our ability to treat and cure patients.

AMERICAN SOCIETY OF HEMATOLOGY

At the **56th American Society of Hematology** (ASH) annual meeting, more than 20,000 researchers from around the world converged in San Francisco to learn about the latest exciting advances in treating blood cancers. The LLSfunded team from University of Pennsylvania

\$67.2 million invested in research in FY15

and The Children's Hospital of Philadelphia continued to demonstrate more evidence of the durability of chimeric antigen receptor T-cell (CAR-T) immunotherapy for patients with acute lymphoblastic leukemia (ALL).

During the treatment, the patient's immune T cells are engineered and then injected back into the patient to hunt and destroy cancer cells. After receiving the experimental treatment, 36 of 39 children (92%) with treatment-resistant ALL achieved a complete response. Six months after treatment, more than two-thirds (70%) of children enrolled in the study remained cancer free, and 75% have survived. Only five children have required subsequent treatment. The CAR-T approach, first pioneered in the blood cancers, is now being tested in other types of cancers, including breast, colon and pancreatic cancer and mesothelioma.

Other therapies showing promise are for patients with relapsed Hodgkin lymphoma (HL) and AML. The data with immune checkpoint inhibitors showed encouraging outcomes for patients with relapsed HL, which typically has a very poor prognosis. LLS is supporting this research as well.

An experimental approach to a therapy called IDH inhibitors showed promising, durable responses in patients with a subset of AML.

This is encouraging news for a disease that has not seen a change in the standard of therapy in the past 40 years. Researchers reported response rates of between 50% and 60% in refractory AML patients.

In addition, two research teams, one from Italy and one from the U.S., both supported by LLS, reported a high response rate in two separate studies of a precision medicine approach to treating patients diagnosed with hairy cell leukemia. Patients in both trials were treated with vemurafenib, a therapy that inhibits the BRAF gene mutation present in 95% of these patients.



LLS President and CEO Louis J. DeGennaro attends the 56th ASH Annual Meeting



LLS'S SATELLITE SYMPOSIUM AT ASH

LLS featured immunotherapy at its satellite symposium in advance of the 56th ASH Annual Meeting. The symposium, "Emerging Immunotherapies for

Hematologic Malignancies: Improving Patient Outcomes by Harnessing the Immune System," featured renowned researchers and highlighted multiple approaches to stimulating the body's immune system to kill cancer cells. The standing-room-only crowd of more than 700 attendees was evidence of the overwhelming interest in this subject.

BLOOD CANCER DRUG APPROVALS IN FISCAL YEAR 2015

Ibrutinib for Waldenstrom's Macroglobulinemia

Breaking new ground, the U.S. Food and Drug Administration's approval of ibrutinib (Imbruvica®) for all patients with Waldenstrom's macroglobulinemia (WM) marked the first time a therapy was indicated specifically for patients with this rare diagnosis. Despite the numerous CONTRACTOR OF CO

currently utilized therapies to treat WM, until now there has been no standard of care for the disease and the current treatments are not curative. The approval of ibrutinib,

which is given as an oral pill, as both a first-line therapy and for those who have relapsed after other therapies, is a promising development, as recurrence is common. Ibrutinib had been approved for patients with CLL and mantle cell lymphoma the previous year, and is now being tested for patients with pancreatic cancer.

Idelalisib approved for CLL The U.S. Food and Drug Administration's approval of idelalisib to treat patients with relapsed CLL, follicular lymphoma (FL) and small lymphocytic lymphoma (SLL) was a significant advance for patients, as the number of treatment options for patients continues to expand. Idelalisib, an oral therapy indicated in combination with rituximab, is a first-in-class inhibitor of PI3K delta, a protein that is highly expressed in many B-cell malignancies and plays a critical role in the proliferation of these cancer cells. LLSfunded research helped pave the way to such inhibitors of the PI3K pathway. In another example of how blood cancer research continues to lead the way for other cancers, other PI3K inhibitors are also being tested for the treatment of patients with solid tumors.

DANA-FARBER CELEBRATES 40 YEARS/\$60M INVESTMENT

Dana-Farber Cancer Institute recognized LLS's \$60 million investment in its blood cancer research programs over 40 years at a special event in April. At the event, some of the world's most accomplished physicians and scientists said that LLS's investment in their work from the earliest days of their careers through the present allowed them to pursue with success areas of research for which they might not otherwise have had the resources.



conducted clinical trial **5,000** searches for patients in FY15

Driving Policy Agenda: Federal and State Priorities

LLS recognizes that finding cures is not enough; we must ensure that patients have access to the treatments they need to live longer, better, healthier lives. LLS's Policy and Advocacy Team is dedicated to removing barriers to care.

ORAL PARITY BILLS

There are now 40 states with oral parity legislation on the books. Since 2012, LLS has helped to pass "oral parity" legislation in 20 of these states, removing barriers for patients who rely on prescription drugs to treat their cancer. LLS played a role in helping bills get passed in 5 states this past year alone: North Dakota, South Dakota, Mississippi, Wyoming and West Virginia.

21ST CENTURY CURES

LLS worked with Congress over the past year to help lawmakers develop the 21st Century Cures bill, a bipartisan Congressional initiative to invest in medical research and remove outdated impediments that slow the discovery and development of new therapies. In addition to LLS President and CEO Louis J. DeGennaro's testimony during a House committee roundtable on personalized medicine, LLS advocates engaged their elected officials in Washington, D.C., and in their home states. The House approved the act with an overwhelming majority in July. Similar legislation is now being developed in the Senate for consideration this coming year.

MILLIMAN REPORT AND OUT-OF-POCKET COSTS FOR PATIENTS

LLS commissioned a study from Milliman Inc., which found that placing limits on out-of-pocket costs for patients would relieve their financial burden without imposing a significant impact on insurers. The study, which used examples of insurance plans available on health insurance exchanges across the country established by the Affordable Care Act, reinforces LLS's efforts to advocate for state and federal legislation that helps to control patient out-of-pocket costs.

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Fures In 4 Words

LLS ADVOCACY LEADERS CAME TO D.C. AND HELPED THE 21ST CENTURY CURES ACT PASS IN THE HOUSE

CO-PAY ASSISTANCE

LLS's Co-Pay Assistance Program helps eligible patients with qualifying diagnoses pay their insurance premiums and meet co-pay obligations. LLS provided \$41.8 million for patients in Fiscal Year 2015 to help them afford these costs.

PATTI ROBINSON KAUFMANN FIRST CONNECTION PROGRAM

The Patti Robinson Kaufmann First Connection Program is a peer-to-peer program that matches newly diagnosed patients and their families with trained volunteers who have been touched firsthand by a blood cancer and share similar experiences. In Fiscal Year 2015, the free service matched well over 1,000 patients with trained volunteers.

INFORMATION RESOURCE CENTER

LLS's Information Resource Center (IRC) is a toll-free call center staffed by master's level healthcare professionals equipped with the latest information on all of the blood cancers. IRC specialists responded to approximately 60,000 inquiries in Fiscal Year 2015, more than half related to financial hardship. Information specialists can be reached at (800) 955-4572 from 9 a.m. to 9 p.m. ET Monday through Friday.

Helping Patients Gain Access to Care

LLS is the leading source of free, highly specialized blood cancer information, education and support for patients, survivors, families and healthcare professionals.

> BEATRICE ABETTI LCSW, DIRECTOR OF LLS'S INFORMATION RESOURCE CENTER

Advancing Innovation in Fundraising

As a nonprofit, LLS relies on the generosity of individuals, corporations and foundations.

LIGHT THE NIGHT WELCOMES CHARLES ESTEN AS AMBASSADOR

In Fall 2014, friends, families and companies walked in LLS's Light The Night[®] Walks in approximately 180 venues around the country, and raised \$58.6 million to support LLS's mission. Actor and musician Charles Esten joined LLS as the National Light The Night Walk honorary chair. Thankful for his daughter Addie's recovery from childhood leukemia, Esten aimed to inspire other individuals, families and teams with his and Addie's appearances in national public





Light The Night Honorary Chair, actor and musician Charles Esten and daughter Addie

service announcements, radio segments and extensive educational materials promoting the Light The Night campaign. The Esten family also participated in the Light The Night Walk in their hometown of Nashville. Addie is living proof of LLS's impact on blood cancer patients and their families. Her experience demonstrates that funds raised for research can result in lifesaving treatments and cures.

LIGHT THE NIGHT WALK / BURLINGTON

Burlington Stores has been supporting LLS's Light The Night Walk campaign for the past 13 years. And in Fall 2014, for the 11th consecutive year, Burlington Stores was the largest national partner for Light The Night Walk. With a 15-week, in-store promotion, Burlington raised more than \$3 million. Since the partnership began, Burlington, a national off-price retailer, has collected more than \$22 million to help LLS advance therapies for blood cancer research and ensure patients have access to lifesaving treatments.

LEUKEMIA CUP REGATTA AND TIMEX

In Fiscal Year 2015, sailing enthusiasts who participated in LLS's Leukemia Cup Regatta raised nearly \$3.8 million for the LLS mission, culminating with a Fantasy Sail with Gary Jobson to take place in Bermuda in October 2015. Timex[®], the world's leading global watch manufacturer, joined LLS as a national sponsor of the Leukemia Cup Regatta. Throughout calendar year 2015, Timex had a presence at events in support of LLS in the fight against cancer. The company also donated to LLS a percentage of the sales of its Yacht Racer watch.



Suja Rock 'n' Roll San Diego Marathon & 1/2 Marathon Team In Training Participants

TEAM IN TRAINING

Team In Training[®] (TNT) continues to deliver a meaningful fundraising and training experience to individuals who have a desire to move the LLS mission forward. In Fiscal Year 2015, more than 12,500 TNT participants came together to raise \$41.8 million to support blood cancer research and patient services. TNT means corporate teams, community teams, passionate athletes, dedicated mission-minded fundraisers, online and social teams and more under one big TNT tent. The \$1.4 billion dollars raised by TNT participants over 27 years has helped drive blood cancer survival rates to new heights. Go TEAM!

STUDENT SERIES

In Fiscal Year 2015, the combined Student Series (formerly known as School & Youth Programs) Pennies for Patients and Pasta for Pennies presented by Olive Garden raised a total of \$27.7 million. Nearly 14.5 million students in 28,000 schools learned about service, leadership and philanthropy, and saw firsthand how their involvement made a difference in helping save the lives of blood cancer patients.

MAN & WOMAN OF THE YEAR

The 2015 Man & Woman of the Year campaign broke yet another record, with candidates raising more than \$32.5 million to help end blood cancer. In the 25th year of this prestigious program, more than 900 participants from across the country competed for the coveted national title. Man of the Year **Jason Fleischer** of New York used creative techniques such as a cornhole tournament and a date auction to raise \$302,045. The Woman of the Year, **Erin Ragsdale** of Texas, used her personal connections to elicit large donations that propelled her to a record-setting \$469,159. Campaign donations totaled \$1.7 million more than the previous year.

We also recognized our "All Star" alumni this year. This year the "All Star" winners were Summer Hall, from Davidson, NC, and Gary Cohen, from Hillsdale, NJ. Hall is a longtime LLS volunteer and mother who raised an "All Star" record of \$167,000 for a world without blood cancers. Gary Cohen, a TNT alumnus, raised \$62,335 to help eradicate blood cancers worldwide.



ONLINE FUNDRAISING AND LAUNCH OF NEW WEBSITE

Charitable giving continued its migration online during Fiscal Year 2015, growing by 9% as compared to an industry overall growth rate of 2%. LLS was well ahead of that trend, with online donations growing 22% year over year, as we focused our digital strategy on streamlining our digital donation path and adapting our platforms to increasingly mobile-focused consumer behavior.

LLS.org relaunched in May with a new design and new technology that allows patients, professionals and supporters easier access to the wealth of content and support offered, whether they're working at their desk, or have just left their doctor's office and are urgently seeking information on their mobile phone.

The new site has improved functionality and clearer navigation to discussion, support and research pages. Visitors also see stories and photos of survivors, caregivers and volunteers, and have a chance to submit their own. The migration of all our campaign sites to a similar platform is under way and will be complete by the middle of our next fiscal year. BLOOD CANCER AWARENESS MONTH

During Blood Cancer Awareness Month, LLS continued to ramp up its efforts to reach new audiences of participants and donors, as well as patients. The integrated marketing and communications campaign, featuring LLS President and CEO Louis J. DeGennaro, launched across TV, radio and digital channels, including our website, and created the strongest awareness yet for LLS. Our targeted call to action garnered donations of \$433,000 through our website.

A SEPTEMBEA OFFICE



The UFCW continued to grow its 32-year partnership with LLS, by connecting its Locals to our chapters in 20 markets to support LLS's Light The Night Walk. It was a banner year for the UFCW's commitment to LLS with an astounding \$4,350,000 raised through Light The Night and the myriad other fundraising events the union holds to benefit LLS, including golf tournaments, dinners, auctions, clay shoots and more. UFCW members affiliated with The Beer Store supported a bottle drive for LLSC in Ontario.

> This initiative alone raised more than \$1.7 million. The UFCW has raised close to \$77 million since 1983, and all funds raised by its more than 120 Locals in the U.S. and Canada are restricted to fund lifesaving research.

We salute new UFCW President Marc Perrone and the more than 1.3 million UFCW members for their tireless support and extraordinary commitment.

DONOR DEVELOPMENT – FUNDING THE MISSION

Donors were exceptionally generous with direct gifts of \$27.9 million. A highlight was the completion of the \$8.3 million fundraising campaign to Beat AML. This pioneering effort was sparked by a lead gift of \$4 million from the Harry T. Mangurian, Jr. Foundation, and further advanced by long-time LLS volunteer Michael Copley, who served as National Chair. Under his leadership, generous donors across the country recognized the value of this effort and brought us to the fundraising finish line in two years, a full year earlier than expected.

Major Gift donors of \$10,000 or more, who are listed in the pages of this report, funded many other mission-critical programs, ranging from new research in pediatric blood cancers to patient support through a Transportation Assistance Fund. And forward-looking individuals who chose to shape the future through their estate plans provided \$10.2 million in resources this year with thoughtful bequests.

LIGHT THE NIGHT BURLINGTON'S RETAIL IN-STORE CAMPAIGN MODELS – CANCER SURVIVORS SHAYNE AND CHASE

difference in

RESEARCH GRANTS

SPECIALIZED CENTER **OF RESEARCH**

The Specialized Center of Research Program funds multi-disciplinary research by teams of leading-edge academic investigators that hasten the discoverv 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 2013 Walter & Eliza Hall Institute of Medical Research

Frederick Alt, PhD 2012 Immune Disease Institute

Jon Aster, MD 2013 Brigham and Women's Hospital

John Byrd, MD 2011¹ The Ohio State University

William Carroll, MD 2014² New York University School of Medicine

Irene Ghobrial, MD 20143 Dana-Farber Cancer Institute

Anthony Green, MD, PhD 2012 University of Cambridge

Helen Heslop, MD 2014⁴ Baylor College of Medicine

Carl June, MD 20135 University of Pennsylvania

Thomas Kipps, MD, PhD 20146 University of California, San Diego

Jonathan Licht, MD 2013 Northwestern University

- ¹ Dr. John Bvrd is funded in part by Rita Cavanagh & Gerald Kafka, Phyllis & Douglas A. Smith, and Judy & Michael H. Thomas.
- ² Dr. William Carroll is funded in part by Jane Elissa/Charlotte Meyers Endowment Fund.

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CAREER DEVELOPMENT **PROGRAM (SCHOLARS** AND CLINICAL SCHOLARS)

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. lymphoma or myeloma.

Gregory Abel, MD 2013 Dana-Farber Cancer Institute

K Mark Ansel, PhD 2013 University of California, San Francisco

Uttiya Basu, PhD 2016* Columbia University Medical Center

Julie Blander, PhD 2015 Icahn School of Medicine at Mount Sinai

Ivan Borrello, MD 20087 The Johns Hopkins University School of Medicine

Patrick Brown, MD 20128 Icahn School of Medicine at Mount Sinai

Jan Burger, MD, PhD 2014 The University of Texas MD Anderson Cancer Center

George Calin, MD 2012 The University of Texas

Boston Children's Hospital

lain Cheeseman, PhD 2013 Whitehead Institute for **Biomedical Research**

Dipanjan Chowdhury, PhD 2015 Dana-Farber Cancer Institute

MD Anderson Cancer Center

Fernando Camargo, PhD 2016*

- ³ Dr. Irene Ghobrial is funded in part by the Edwards P. Evans Foundation.
- ⁴ Dr. Helen Heslop is funded in part by Lee Goodwin & Linda Schwartzstein.

Christopher Cogle, MD 2013 University of Florida

Yali Dou, PhD 2013 University of Michigan

Benjamin Ebert, MD, PhD 2013 Brigham and Women's Hospital

Thomas Fazzio, PhD 2015 University of Massachusetts Medical School

Elsa Flores, PhD 2012 The University of Texas MD Anderson Cancer Center

Benjamin Garcia, PhD 2016* Perelman School of Medicine at the University of Pennsylvania

Ramiro Garzon, MD 2016* The Ohio State University

Andrei Goga, MD, PhD 2013 University of California. San Francisco

Ananda Goldrath, PhD 2012 University of California, San Diego

Jolanta Grembecka, PhD 20149 University of Michigan

David Guertin, PhD 2016* University of Massachusetts Medical School

Jonathan Higgins, PhD 2012 Newcastle University

Morgan Huse, PhD 2015 Memorial Sloan Kettering Cancer Center

Holbrook Kohrt, MD, PhD 2015 10 The Board of Trustees of the Leland Stanford Junior University

Marina Konopleva, MD, PhD 2012 The University of Texas MD Anderson Cancer Center

⁵ Dr. Carl June is funded in part by

Dr. Stephen Grupp is funded in part

by HM Insurance Group for his work

Dr. Thomas Kipps is funded in part

Beckman Coulter Foundation.

under Carl June's SCOR grant.

by Harvey & Yetta Saltzman.

John Koreth, MD, PhD 201411 Dana-Farber Cancer Institute

Ross Levine, MD 2013 Memorial Sloan Kettering Cancer Center

Ming Li, PhD 2015 Memorial Sloan Kettering Cancer Center

Ivan Maillard, MD, PhD 2014 University of Michigan

Ravindra Majeti, MD, PhD 2016* The Board of Trustees of the Leland Stanford Junior University

Sami Malek, MD 2012 University of Michigan

Hanna Mikkola, MD, PhD 2012 12 University of California, Los Angeles

Golam Mohi, PhD 2014 SUNY Upstate Medical Center

James Mullov, PhD 201113 Cincinnati Children's Hospital Medical Center

Rvoma Ohi, PhD 2014 Vanderbilt University Medical Center

Sophie Paczesny, MD, PhD 2015 Indiana University

Emmanuelle Passegué, PhD 2013 University of California, San Francisco

Cathie Pfleger, PhD 2013 Icahn School of Medicine at Mount Sinai

Joel Pomerantz, PhD 2012 Icahn School of Medicine at Mount Sinai

Loredana Ruggeri, MD, PhD 201114 University of Perugia

⁷ Dr. Ivan Borello is funded in part by

⁸ Dr. Patrick Brown is fully funded

by The Orokawa Foundation.

⁹ Dr. Jolanta Grembecka is funded

in part by Jennifer & Jeff Butler.

Lee Goodwin & Linda Schwartzstein.

Talya Salz, PhD 2014 Memorial Sloan Kettering Cancer Center

Joseph Scandura, MD, PhD 2014 Weill Cornell Medical College

Tait Shanafelt, MD 2013 Mayo Clinic

Jane Skok, PhD 2011¹⁵ New York University School of Medicine of Medical Research

Merav Socolovsky, MD, PhD 2013 University of Massachusetts Medical School

Daniel Starczynowski, PhD 2016* Cincinnati Children's Hospital Medical Center

Kimberly Stegmaier, MD 2014 Dana-Farber Cancer Institute

Ulrich Steidl, MD, PhD 2015 Albert Einstein College of Medicine

Enrico Tiacci, MD 2014 University of Perugia

Raoul Tibes, MD, PhD 2015 Mayo Clinic Arizona

Wei Tong, PhD 2014 The Children's Hospital of Philadelphia

David Traver, PhD 2013 University of California, San Diego

Christopher Vakoc, MD, PhD 2016* Cold Spring Harbor Laboratory

Amit Verma, MD 2013 Albert Einstein College of Medicine of Yeshiva University

Loren Walensky, MD, PhD 2015 16 Dana-Farber Cancer Institute

¹⁰ Dr. Holbrook Kohrt is funded in part

by The Adami-Robertson Family.

¹² Dr. Hanna Mikkola is funded in part

¹¹ Dr. John Koreth is fully funded

by Parents Against Leukemia.

by an anonymous donor.

Roland Walter, MD, PhD, MS 2015 Fred Hutchinson Cancer **Research** Center

Matthew Walter, MD 2014 Washington University School of Medicine in St. Louis

Hengbin Wang, PhD 2013 The University of Alabama at Birmingham

Wenyi Wei, PhD 2014 Beth Israel Deaconess Medical Center

David Weinstock, MD 2014 Dana-Farber Cancer Institute

Hans-Guido Wendel, MD 2015 Memorial Sloan Kettering Cancer Center

Johnathan Whetstine, PhD 2015 Massachusetts General Hospital

Catherine Wu, MD 2015 Dana-Farber Cancer Institute

Xiaochun Yu, MD, PhD 2015 University of Michigan

Shan Zha, MD, PhD 2014 Columbia University Medical Center

Jing Zhang, PhD 2014¹⁷

Xiaolan Zhao, PhD 2014

Elina Zuniga, PhD 2013

University of California,

Cancer Center

San Diego

Golfers for Charity.

Lee Zou, PhD 2012

Memorial Sloan Kettering

Chengcheng Zhang, PhD 2014 UT Southwestern Medical Center

University of Wisconsin-Madison

Massachusetts General Hospital

¹³ Dr. James Mullov is funded in part

¹⁴Dr. Loredana Ruggeri is funded

in part by an anonymous donor.

by The Marge & Charles J. Schott Foundation and the Cincinnati

RESEARCH GRANTS (CONTINUED)

CAREER DEVELOPMENT PROGRAM (SPECIAL FELLOWS, CLINICAL SPECIAL FELLOWS, AND FELLOWS)

Alison Adams, PhD 2014 Yale University

Koshi Akahane, MD, PhD 2014 Dana-Farber Cancer Institute

Spencer Alford, PhD 2015 The Board of Trustees of the Leland Stanford Junior University

Burton Barnett, PhD 2015 University of California, San Diego

Cora Bergantinos, PhD 2015 Columbia University Medical Center

Ami Bhatt, MD, PhD 2014 Dana-Farber Cancer Institute

Jessica Blackburn, PhD 2014 Massachusetts General Hospital

Andres Blanco, PhD 2015 Boston Children's Hospital

Nicholas Brown, PhD 2016* St. Jude Children's Research Hospital

Marcella Cesana, PhD 2015 Boston Children's Hospital

Tiffany Chang, MD 2014¹⁸ University of California, San Francisco

Michael Chu, MD 2015 The Board of Trustees of the Leland Stanford Junior University

Ahmet Coskun, PhD 2016* California Institute of Technology

Dan Dominissini, PhD 2016* The University of Chicago

- ¹⁵ Dr. Jane Skok is funded in part by The Jim Jacobs Charitable Foundation.
- ¹⁶ Dr. Loren Walensky is funded in part by Hockey Fights Cancer.

Zhixun Dou, PhD 2015 University of Pennsylvania

Jonathan Driver, PhD 2014 University of Washington

Cihangir Duy, PhD 2013¹⁹ Weill Cornell Medical College

Chen Fang, PhD 2014²⁰ Fred Hutchinson Cancer Research Center

Eva Fast, PhD 2015 President & Fellows of Harvard College

Craig Forester, MD 2016* University of California, San Francisco

Xiaofei Gao, PhD 2014 Whitehead Institute for Biomedical Research

Jacqueline Garcia, MD 2015 Dana-Farber Cancer Institute

Charles Gawad, MD 2014²¹ The Board of Trustees of the Leland Stanford Junior University

Luke Gilbert, PhD 2014 University of California, San Francisco

Stephanie Grainger, PhD 2015 University of California, San Diego

Sarah Hainer, PhD 2014 University of Massachusetts Medical School

Alexandre lannello, PhD 2014 University of California, Berkeley

Andrew Intlekofer, MD 2016* Memorial Sloan Kettering Cancer Center

Caron Jacobson, MD 2014 Dana-Farber Cancer Institute Ana Janic, PhD 2014 Walter & Eliza Hall Institute of Medical Research

Stephanie Johnson, PhD 2015 University of California, San Francisco

Brian Jonas, MD, PhD 2013 The Board of Trustees of the Leland Stanford Junior University

Neeraj Joshi, PhD 2016* University of California, San Francisco

Christopher Kanakry, MD 2014 Johns Hopkins University

Michael Khodadoust, MD, PhD 2015 The Board of Trustees of the Leland Stanford Junior University

Seoyoung Kim, PhD 2015 Memorial Sloan Kettering Cancer Center

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Alan Shih, MD, PhD 2015 Memorial Sloan Kettering Cancer Center

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Anastasia Tikhonova, PhD 2015 New York University School of Medicine

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Joshua Zeidner, MD 2015 The University of North Carolina at Chapel Hill

Haojian Zhang, PhD 2014 Dana-Farber Cancer Institute

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Hufeng Zhou, PhD 2016* Brigham and Women's Hospital

¹⁷Dr. Jing Zhang is funded in part by The Greater Milwaukee Foundation, Inc.

¹⁸ Dr. Tiffany Chang is funded in part by Cynthia Hinojosa and Sydney Tassin.

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²² Dr. Sarwish Rafiq is The Jake
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- ²³ Dr. Kendra Sweet is funded in part by Imagine a Cure for Leukemia.
- * Newly awarded or renewed grants in fiscal year 2016
- [†] This program is run in partnership with the Myeloproliferative Neoplasm Research Foundation (MPNRF)

RESEARCH GRANTS (CONTINUED)

TRANSLATIONAL RESEARCH PROGRAM

The Translational Research Program supports outstanding investigations deemed by our expert advisors most likely to translate basic biomedical discoveries into new. safe and effective treatments, ultimately prolonging and enhancing patients' lives.

Iannis Aifantis, PhD 2016* New York University School of Medicine

Gheath Al-Atrash DO, PhD 2015 The University of Texas MD Anderson Cancer Center

Caroline Arber, MD 2016* **Baylor College of Medicine**

Mukta Arora, MD 2014 University of Minnesota, Twin Cities

David Avigan, MD 2014 Beth Israel Deaconess Medical Center

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Leandro Cerchietti, MD 2016* Weill Cornell Medical College

Li Chai, MD 2016* Brigham and Women's Hospital

Xiu-bao Chang, PhD 2014 Mayo Clinic

Jianjun Chen, PhD 2014 The University of Chicago

Tomasz Cierpicki, PhD 2014 University of Michigan

Curt Civin, MD 2014 24 University of Maryland, Baltimore

James Coghill, MD 2015 The University of North Carolina at Chapel Hill

Seth Corey, MD 2014 Northwestern University

Chi Dang, MD, PhD 2014 University of Pennsylvania

Sandeep Dave, MD 2016* Duke University Medical Center

Bimalangshu Dey, MD, PhD 2014 Massachusetts General Hospital

Elizabeth Eklund, MD 2014 Northwestern University

Rudi Fasan, PhD 2014 University of Rochester

Adolfo Ferrando, MD, PhD 2015 Columbia University Medical Center

Maria Figueroa, MD 2014 Weill Cornell Medical College Stephen Forman, MD 2014²⁵ Beckman Research Institute of the City of Hope

Mark Frattini, MD, PhD 2015 Columbia University Medical Center

Paul Frenette, MD 2015 Albert Einstein College of Medicine of Yeshiva University

Karin Gaensler, MD 2014 University of California. San Francisco

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Stephen Gottschalk, MD 2016* Baylor College of Medicine

Douglas Graham, MD, PhD 2016* Emory University

Steven Grant, MD 2015²⁶ Virginia Commonwealth Universitv

Jolanta Grembecka, PhD 2016* University of Michigan

H. Leighton Grimes, PhD 2013²⁷ Cincinnati Children's Hospital Medical Center

Javeed Igbal, PhD 2014 University of Nebraska Medical Center

Richard Jones, MD 2015 Icahn School of Medicine at Mount Sinai

Marina Konopleva, PhD 2016* The University of Texas MD Anderson Cancer Center

Andrew Kuna, MD, PhD 2015 Columbia University Medical Center

John Kuruvilla, MD 2013²⁸ University Health Network

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Mignon Loh, MD 2015 University of California, San Francisco

Thomas Loughran, MD 2014 University of Virginia

Ivan Maillard, MD 2015 University of Michigan

Matthew Matasar, MD 2014 Memorial Sloan Kettering Cancer Center

William Matsui, MD 2016* Icahn School of Medicine at Mount Sinai

Ari Melnick, MD 2014 Weill Cornell Medical College

Constantine Mitsiades. MD. PhD 2014 Dana-Farber Cancer Institute

Nikhil Munshi, MD 2016* Dana-Farber Cancer Institute

Markus Muschen, MD, PhD 2014 31 University of California, San Francisco

Nicolas Nassar, PhD 2014 Cincinnati Children's Hospital Medical Center

Antonio Palumbo, MD 2016* Universita degli Studi di Torino-Dipartimento di Biotecnologie e Scienze per la Salute

Christopher Park, MD, PhD 2014 Memorial Sloan Kettering Cancer Center

Alessandra Pernis, MD 2014 Hospital for Special Surgery

Javier Pinilla, MD, PhD 2015 32 H. Lee Moffitt Cancer Center & Research Institute

Karen Rabin, MD 2014 Baylor College of Medicine

Anjana Rao, PhD 2015 La Jolla Institute for Alleray and Immunology

Feyruz Rassool, PhD 2016* University of Maryland

Katy Rezvani, MD, PhD 2015 The University of Texas MD Anderson Cancer Center

Alain Rook, MD 2016* University of Pennsylvania

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Aaron Schimmer, PhD, MD, FRCPC 2015 University of Toronto

Matthew Shair, PhD 2014 Harvard Medical School

Ulrich Steidl, MD, PhD 2014 Albert Einstein College of Medicine of Yeshiva University

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Chengcheng Zhang, PhD 2014 UT Southwestern Medical Center

- ²⁴Dr. Curt Civin is funded in part by Northrop Grumman.
- ²⁵ Dr. Stephen Forman is funded in part by The Jim Jacobs Charitable Foundation.
- ²⁶ Dr. Steven Grant is funded in part by the Breeden-Adams Foundation.
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³¹ Dr. Markus Muschen is funded

Tarik Morov, PhD 2015 30 Institut de Recherches Cliniques de Montreal

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Stephen Ansell, MD, PhD 2016* 33 Mayo Clinic Rochester

Smita Bhatia, MD, MPH 2016* The University of Alabama at Birmingham

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John Byrd, MD 2015³⁴ The Ohio State University

John Crispino, PhD 2015 Northwestern University

Ryan Wilcox, MD, PhD 2016* University of Michigan

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Nadia Carlesso, MD, PhD 2016* Indiana University School of Medicine

Robert Kralovics, PhD 2016* Center for Molecular Medicine of the Austrian Academy of Sciences

Zhijan Qian, PhD 2016* University of Illinois at Chicago

Katya Ravid DSC, PhD 2016* Boston University School of Medicine

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Zhaohui Ye, PhD 2016* Johns Hopkins University

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Michael Deininger, MD, PhD 2014 The University of Utah

SPECIAL INITIATIVES

Ari Melnick, MD 2015³⁵ Weill Cornell Medical College

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John Crispino, PhD 2016* Northwestern University

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Akiko Shimamura, MD, PhD 2016* Boston Children's Hospital LLS Research Portfolios are groups of research projects organized around a specific blood cancer interest. The list below includes donors that generously invested in a specific LLS research portfolio during this fiscal year.

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Acute Lymphoblastic Leukemia Research Portfolio is funded in part by Samantha and Timothy Durst and Anonymous.

Acute Myeloid Leukemia and Myelodysplastic Syndromes Research Portfolio is funded in part by The Hildegarde D. Becher Foundation, Inc.

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Aggressive Non-Hodgkin Lymphoma Research Portfolio is funded in part by Douglas Baughman, Lisa and Craig Hawkins, and Debbie and Danny McQuary.

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³³ Dr. Stephen Ansell is funded in part by The Adami-Robertson Family.

³⁴Dr. John Byrd is funded in part by Bill Cress/Felice Shapiro.

³⁵ Dr. Ari Melnick is funded in part by the Paul E. Singer Foundation Innovation Grant in DLBCL. * Newly awarded or renewed grants in fiscal year 2016 † This program is run in partnership with the

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Legacy Circle honors those who designate LLS as a beneficiary of their will, trust, retirement 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.

LEGACY CIRCLE

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Anonymous (7) * Deceased

INDEPENDENT AUDITORS' REPORT

The Board of Directors

The Leukemia & Lymphoma Society, Inc.:

We have audited the accompanying consolidated financial statements of The Leukemia & Lymphoma Society, Inc. (LLS), which comprise the consolidated balance sheet as of June 30, 2015, and the related consolidated statements of activities, functional expenses and cash flows for the year then ended, and the related notes to the consolidated financial statements.

MANAGEMENT'S RESPONSIBILITY FOR THE FINANCIAL STATEMENTS Management is responsible for the preparation and fair presentation of these consolidated financial statements in accordance with U.S. generally accepted accounting principles; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of consolidated financial statements that are free from material misstatement, whether due to fraud or error.

AUDITORS' RESPONSIBILITY Our responsibility is to express an opinion on these consolidated financial statements based on our audit. 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 consolidated financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the consolidated financial statements. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the consolidated financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the organization's preparation and fair presentation of the consolidated financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the organization's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the consolidated financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

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, 2015, and the changes in its net assets and its cash flows for the year then ended in accordance with U.S. generally accepted accounting principles.

REPORT ON SUMMARIZED COMPARATIVE INFORMATION We have previously audited LLS's consolidated financial statements, and we expressed an unmodified opinion on those audited consolidated financial statements in our report dated October 15, 2014. In our opinion, the summarized comparative information presented herein as of and for the year ended June 30, 2014 is consistent, in all material respects, with the audited consolidated financial statements.

PMG LLP

October 21, 2015

CONSOLIDATED BALANCE SHEET

The Leukemia & Lymphoma Society, Inc. / June 30, 2015 (with comparative amounts at June 30, 2014) (In thousands)

	2015		2014	
Assets				
Cash and cash equivalents (note 3)	\$	52,897	28,771	
Prepaid expenses and other assets		6,049	5,362	
Legacies and contributions receivable, net (note 5)		8,989	9,113	
Investments (note 3)		137,941	188,885	
Fixed assets, net (note 7)		14,826	16,604	
Total assets	\$	220,702	248,735	
Liabilities and Net Assets				
Liabilities:				
Accounts payable and accrued expenses	\$	18,416	20,685	
Deferred revenue (note 6)		17,802	26,745	
Awards and grants payable (note 2)		69,335	84,201	
Co-Pay assistance payable (note 2)		14,465	16,698	
Total liabilities		120,018	148,329	
Commitments and contingencies (notes 2 and 9)				
Net assets (note 4):				
Unrestricted		72,848	68,842	
Temporarily restricted		24,146	27,989	
Permanently restricted		3,690	3,575	
Total net assets		100,684	100,406	
Total liabilities and net assets	\$	220,702	248,735	

See accompanying notes to consolidated financial statements.

CONSOLIDATED STATEMENT OF ACTIVITIES

The Leukemia & Lymphoma Society, Inc. / June 30, 2015 (with summarized totals for the year ended June 30, 2014) (In thousands)

			Temporarily	Permanently _	Total		
	U	Inrestricted	restricted	restricted	2015	2014	
Operating Revenue							
Campaign contributions	\$	236,171	23,258		259,429	271,087	
Less direct donor benefit costs		(24,606)			(24,606)	(28,784)	
Net campaign contributions		211,565	23,258	_	234,823	242,303	
Co-pay contributions		_	43,000	—	43,000	67,100	
Legacies		9,998	159	_	10,157	5,555	
Donated services and media (note 6)		9,864	—	—	9,864	10,985	
Net interest and dividend income		1,802	59	43	1,904	1,488	
Net assets released from restrictions (note 2):							
Co-pay assistance		41,804	(41,804)	—	—	—	
Satisfaction of other donor restrictions		28,755	(28,755)				
Total operating revenue		303,788	(4,083)	43	299,748	327,431	
Operating Expenses (note 10)							
Program services:							
Research		71,540	_	_	71,540	84,967	
Patient and community service		95,526	_	_	95,526	107,578	
Public health education		36,249	_	_	36,249	46,837	
Professional education		16,829			16,829	19,327	
Total program services		220,144			220,144	258,709	
Supporting services:							
Management and general		31,006	_	_	31,006	29,723	
Fund raising		46,205	—	_	46,205	51,100	
Total supporting services		77,211		_	77,211	80,823	
Total operating expenses		297,355			297,355	339,532	
Change in net assets from operating activities		6,433	(4,083)	43	2,393	(12,101)	
Write-off of contribution receivable (note 5)		_	_	_	_	(3,507)	
Foreign currency translation adjustment		(530)	_	_	(530)	(153)	
Net (decrease) increase in fair value							
of investments (note 3)		(1,897)	240	72	(1,585)	12,402	
Change in net assets		4,006	(3,843)	115	278	(3,359)	
Net Assets							
Beginning of year		68,842	27,989	3,575	100,406	103,765	
End of year	\$	72,848	24,146	3,690	100,684	100,406	

See accompanying notes to consolidated financial statements.

CONSOLIDATED STATEMENT OF FUNCTIONAL EXPENSES

The Leukemia & Lymphoma Society, Inc. / June 30, 2015 (with comparative totals for the year ended June 30, 2014) (In thousands)

	Program Services			Supporting Services					Divid			
		Patient and community	Public health	Professional		Management and	Fund		Tot	al	Direct Benefit	
	Research	service	education	education	Total	general	raising	Total	2015	2014	2015	2014
Awards and grants (note 2)	\$ 53,717	_	_	_	53,717	_	_	_	53,717	63,716	_	_
Therapy acceleration program (note 2)	13,503	_	_	_	13,503	_	_	_	13,503	16,107	_	_
Financial aid to patients	_	430	_	_	430	_	_	_	430	2,524	_	_
Co-pay assistance (note 2)	_	41,804	_	_	41,804	_	_	_	41,804	49,246	_	_
Co-pay processing fees	_	4,581	_	_	4,581	_	_	_	4,581	4,567	_	_
Donated services and media (note 6)	556	3,912	540	—	5,008	—	4,856	4,856	9,864	10,985		—
Salaries	2,457	20,103	16,184	9,094	47,838	12,055	13,084	25,139	72,977	77,557		—
Employee benefits and taxes (note 8)	160	4,390	3,473	1,380	9,403	3,986	3130	7,116	16,519	21,135		—
Temporary services	114	1,754	1,453	596	3,917	1,156	1,149	2,305	6,222	6,568		—
Occupancy (note 9)	26	2,793	2,347	747	5,913	1,822	1,831	3,653	9,566	9,104		—
Insurance	3	199	90	—	292	244	129	373	665	674		—
Telephone	7	720	339	257	1,323	416	537	953	2,276	3,285		—
Travel	129	1,419	1,328	622	3,498	753	963	1,716	5,214	5,479	2,630	4,432
Printing, advertising, and supplies	41	3,454	2,960	1,132	7,587	2,202	7,657	9,859	17,446	22,215	4,181	5,017
Equipment rentals and maintenance	3	1,136	613	434	2,186	724	670	1,394	3,580	3,276	—	
Postage and shipping	1	1,438	1,260	166	2,865	285	4,261	4,546	7,411	8,665		_
Meetings	537	459	712	415	2,123	277	240	517	2,640	4,116	11,135	11,179
Professional fees	282	4,696	3,593	1,760	10,331	3,889	6,024	9,913	20,244	23,109	1,299	1,741
Miscellaneous	1	893	622	207	1,723	716	477	1,193	2,916	3,215	5,361	6,415
Depreciation and amortization	3	1,345	735	19	2,102	2,481	1,197	3,678	5,780	3,989		
Total expenses	\$ 71,540	95,526	36,249	16,829	220,144	31,006	46,205	77,211	297,355	339,532	24,606	28,784

See accompanying notes to consolidated financial statements.

EXPENSES

Research	24.0%
Patient and Community Service	32.1%
Public Health Education	12.2%
Professional Education	5.7%
Total Program Services	74.0%
Management and General	10.4%
Fund raising	15.6%
Total Supporting Services	26.0%
TOTAL EXPENSES	100.0%



CONSOLIDATED STATEMENT OF CASH FLOWS

The Leukemia & Lymphoma Society, Inc. / June 30, 2015 (with comparative amounts for the year ended June 30, 2014) (In thousands)

	2015		2014	
Cash flows from operating activities:				
Change in net assets	\$	278	(3,359)	
Adjustments to reconcile change in net assets				
to net cash used in operating activities:				
Net decrease (increase) in fair value of investments		1,585	(12,402)	
Depreciation and amortization		5,780	3,989	
Provision for uncollectible accounts		126	(304)	
Changes in operating assets and liabilities:				
Prepaid expenses and other assets		(687)	193	
Legacies and contributions receivable		(2)	(783)	
Accounts payable and accrued expenses		(2,269)	(703)	
Deferred revenue		(8,943)	(8,329)	
Awards and grants payable		(14,866)	9,376	
Co-Pay assistance payable		(2,233)	9,461	
Net cash used in operating activities		(21,231)	(2,861)	
Cash flows from investing activities:				
Purchases of fixed assets		(4,002)	(9,740)	
Purchases of investments		(36,640)	(77,132)	
Sales of investments		85,999	91,204	
Net cash provided by investing activities		45,357	4,332	
Net increase in cash and cash equivalents		24,126	1,471	
Cash and cash equivalents at beginning of year		28,771	27,300	
Cash and cash equivalents at end of year	\$	52,897	28,771	

See accompanying notes to consolidated financial statements.

The Leukemia & Lymphoma Society, Inc. / June 30, 2015 (with comparative amounts as of and for the year ended June 30, 2014)

1] Organization and Summary of Significant Accounting Policies

A] ORGANIZATION

The Leukemia & Lymphoma Society, Inc. (LLS) is the world's largest voluntary health agency dedicated to finding cures for blood cancers. LLS's mission is to cure leukemia, lymphoma, Hodgkin's disease, and myeloma and improve the quality of life of patients and their families. LLS research grants have funded many of today's most promising advances for the treatment of blood cancer patients, including targeted therapies and immunotherapies. LLS is a leading source of publicly available information for blood cancer, education and support, and influences policies that accelerate the development and approval of new blood cancer therapies. LLS advocates for blood cancer patients and their families, helping patients navigate their cancer treatments and ensuring they have access to quality, affordable and coordinated care. LLS is dedicated to removing barriers to care by representing the healthcare and medical research interests of patients and families to policy makers at all levels of government.

B] 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, 2015 and 2014.

C] PRINCIPLES OF CONSOLIDATION

The accompanying consolidated financial statements include the accounts of LLS, which encompasses the National Office of LLS and its fifty-four chapters in the United States, and LLS's not-for-profit affiliates, LLSC and its five chapters in Canada, 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.

D] 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, allowance for uncollectible accounts, allocation of expenses, and valuation of donated services and media. Actual results could differ from those estimates.

E] RISKS AND UNCERTAINTIES

LLS invests in various investment securities. Investment securities are exposed to various risks such as interest rate risks, fluctuations in market 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 balance sheet.

LLS's principal source of revenue is amounts contributed by the general public. Accordingly, LLS's operations are affected by individual contributions, which are affected by general economic conditions, employment levels, and other factors over which LLS has little or no control. By contrast to the granularity of the general public donations, the co-pay program in 2015 and 2014 was funded by eight and six donors, respectively.

F] SUMMARIZED FINANCIAL INFORMATION

The consolidated financial statements are presented with 2014 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, 2014 expenses by object are presented in total rather than by functional category. Accordingly, such information should be read in conjunction with LLS's 2014 consolidated financial statements from which the summarized information was derived.

G] SUBSEQUENT EVENTS

LLS evaluated subsequent events after the balance sheet date of June 30, 2015 through October 21, 2015, which was the date the consolidated financial statements were issued, and noted one additional required disclosure.

On September 15, 2015, LLS entered into a 15 year lease for 41,868 square feet of space for its National Office beginning no earlier than April 1, 2016. The lease terms provide for one year of rent abatement. Future minimum rental lease commitments under the lease are approximately \$1,005,000 annually for the next five years.

H] 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. 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 4).

I] FOREIGN CURRENCY TRANSLATION

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

J] 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.

The Leukemia & Lymphoma Society, Inc. / June 30, 2015 (with comparative amounts as of and for the year ended June 30, 2014)

LLS follows the provisions of Accounting Standards Codification (ASC) 820, *Fair Value Measurement*, for its alternative investments that do not have readily determinable fair values, including hedge funds, limited partnerships, and other funds. This guidance 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. The classification of investments in the fair value hierarchy is not necessarily an indication of the risks, liquidity, or degree of difficulty in estimating the fair value of each investment's underlying assets and liabilities.

The carrying value of cash and cash equivalents, accounts payable and accrued expenses, and grants payable approximates fair value because of their short term nature.

In 2015, LLS early adopted the provisions of Accounting Standards Update No. 2015-07, *Disclosures for Investments in Certain Entities That Calculate Net Asset Value per Share* (*or Its Equivalent*), which removes the requirement to categorize within the fair value hierarchy all investments for which fair value is measured using the net asset value per share practical expedient and removes the requirement to make certain disclosures for all investments that are eligible to be measured at fair value using the net asset value per share practical expedient. LLS applied the provision of the update retrospectively to 2014.

K] CONTRIBUTIONS, GRANTS 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 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. Certain grants are accounted for as exchange transactions whereby revenue is recognized when the related expenses are incurred. Amounts received under these arrangements but not yet expended are reported as deferred revenue.

L] DONATED SERVICES

LLS has determined that certain of the donated services it receives meet the criteria for recognition in the consolidated financial statements. The value of contributed services was determined for volunteers that possess specialized skills, and would otherwise need to be purchased. These services are recognized as revenue and expense.

M] DONATED MEDIA

LLS has conducted national public service announcements (PSA) media campaigns and benefited from donated media time that was aired on television and radio. The value of contributed media, which is recognized in the financial statements, was estimated based on the placement, audience, and demographics of the PSAs.

N] 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 in investments.

O] INVESTMENTS

Investments are stated at fair value based upon quoted market prices, except for the fair values of alternative investments which are based on 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.

P] FIXED ASSETS AND DEPRECIATION

Fixed assets, which consist principally of equipment, software, and leasehold improvements, are recorded at cost, 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, ranging 2 to 10 years (leasehold improvements 7 years; furniture, fixtures, and office equipment 7 to 10 years, and computer equipment and software 2 to 5 years).

Q] PROFESSIONAL FEES

Professional fees included in the consolidated financial statements principally include professional fund-raising fees, contracted software development, and legal and auditing fees.

R] RECLASSIFICATIONS

Certain reclassifications of 2014 amounts have been made to conform to the 2015 presentation.

2] Research and Co-Pay Assistance Program

LLS has various activities that are utilized to carry out its mission as presented below:

RESEARCH

Awards and Grants: Awards and grants for research are approved by LLS's Board of Directors and are recognized as expense when contractual conditions have been satisfied. The budgets for multi-year 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 multi-year grant commitments of \$51,612,000 at June 30, 2015 which are conditioned upon future events and, accordingly, are not recorded. LLS has unconditional grants payable of \$69,335,000 and \$84,201,000 at June 30, 2015 and 2014, respectively, which are anticipated to be paid in the next year. Grant refunds of approximately \$3,104,000 and \$821,000 as of June 30, 2015 and 2014, respectively, have been netted against awards and grants expense.

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 contracts are recognized as an expense in the year program milestones are achieved. Multi-year 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. LLS has contract commitments of \$20,842,000 and \$28,575,000 at June 30, 2015 and 2014, respectively, that are conditioned upon future events and, accordingly, are not recorded.

Commitments for the awards and grants and TAP programs are contingent upon the satisfactory completion of milestones and/or other conditions in the grant and contract agreements. If such conditions are satisfied, the amounts are estimated to be paid as follows (in thousands):

Year ending June 30:	
2016	\$ 40,749
2017	22,279
2018 and therafter	9,426
Total	\$ 72,454

The Leukemia & Lymphoma Society, Inc. / June 30, 2015 (with comparative amounts as of and for the year ended June 30, 2014)

CO-PAY ASSISTANCE PROGRAM

Co-Pay Assistance Program: The Co-Pay Assistance program offers financial assistance to patients in meeting their insurance co-pay obligations for prescription medications 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. Revenue is recognized when the grants are received while expenses are recognized as patients are approved for participation according to program criteria. Accordingly, LLS has recognized \$7,254,000 and \$11,707,000 in temporarily restricted revenue as of June 30, 2015 and 2014, respectively, for which the corresponding expense is not recognized until the subsequent fiscal year as patients are approved in the program. The Co-Pay Assistance payable of \$14,465,000 and \$16,698,000 has been established based on approved patient applications received through June 30, 2015 and 2014, respectively. At June 30, 2015, temporarily restricted net assets include \$7,254,000 received in 2015 which are available for expenditure and are intended to be awarded in fiscal 2016.

The following summarizes the activities of the Co-Pay Assistance program in 2015 and 2014.

	2015	2014
Beginning balance	\$ 11,707	-
Grant commitments	43,000	67,100
Amount expended during the year:		
Direct assistance to patients	(41,804)	(49,246)
Other expenses incurred and reimbursed under the contract	(5,649)	(6,147)
Amounts available for expenditures in the next year	<u>\$ 7,254</u>	11,707

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, 2015 and 2014 (in thousands):

	2015	Level 1	Level 2	Level 3
Money market funds and cash	\$ 18,544	18,544	-	-
Fixed income:				
Long duration fixed income				
(mutual fund)	27,599	27,599	-	-
Short duration fixed income				
(mutual fund)	30,222	30,222	-	-
Government securites and other	958	958	-	-
Equities:				
Large cap equity	7,577	7,577	-	-
International equity	5,355	5,355	-	-
Small/mid cap equity	223	233		
	\$ 90,478	90,478		
Investments report at net asset value:				
U.S. Treasury Inflation-Protected Security fund	1,327			
Multistrategy hedge funds	38,075			
Long/short equities	2,423			
Real assets	5,638			
Total investments report at net asset value	47,463			
	\$137,941			

	2014	Level 1	Level 2	Level 3
	\$ 25,633	25,633	-	-
Money market funds and cash				
Fixed income: Long duration fixed income	55,513	55,513	-	-
(mutual fund) Short duration fixed income (mutual fund)	33,923	33,923	-	-
Government securites	1,057	1,057	-	-
Equities: Large cap equity International equity Small/mid cap equity	5,594 6,905 <u>1,717</u> \$130,342	5,594 6,905 <u>1,717</u> <u>130,342</u>	-	-
Investments report at net asset value: U.S. Treasury Inflation-Protected Security fund Multistrategy hedge funds Long/short equities Real assets Limited partnership equity indices Total investments report at net asset value	2,374 40,769 3,705 8,826 2,869 <u>58,543</u> \$188,885			

In 2015, LLS liquidated approximately \$50,000,000 of its investment portfolio in anticipation of funding grant commitments in fiscal 2016 as discussed in note 2. Such amount is included in cash and cash equivalents at June 30, 2015.

Investment expenses of \$866,000 and \$1,338,000 have been netted against the net (decrease) increase in fair value of investments for the years ended June 30, 2015 and 2014, respectively. The unrealized (losses) gains were \$(4,851,000) and \$6,573,000 for the years ended June 30, 2015 and 2014, respectively.

LLS's alternative investments are diversified across four investment strategies, as follows:

- Multi strategy hedge funds represent investments in a broad range of investment strategies that seek to exploit opportunities as they occur in the markets due to temporary dislocations or structural inefficiencies and include event driven strategies, distressed debt, merger and other arbitrage, and value investing.
- Long/short equities primarily investments in funds that, in turn, invest in liquid, marketable securities, attempting to realize gains through the identification of mispriced securities.
- 3. *Real asset strategy* passively managed real asset portfolios comprise Real Estate Investment Trust Index, commodities, and global natural resource stocks.
- 4. *Limited partnership equity indices* the underlying holdings of the limited partnership equity indices are principally domestic and international marketable securities.

The Leukemia & Lymphoma Society, Inc. / June 30, 2015 (with comparative amounts as of and for the year ended June 30, 2014)

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.

LLS's alternative investments contain various redemption restrictions with required written notice ranging from 1 to 90 days. By contrast, all of LLS's nonalternative investments are highly liquid and can be redeemed daily without restriction. As of June 30, 2015 and 2014, the following table summarizes the composition of such alternative investments at fair value by the various redemption provisions (in thousands):

Redemption period	2015	2014
Daily	\$ 6,965	11,200
Monthly	-	2,869
Quarterly	38,075	40,769
Annual	2,423	3,705
Total	\$ 47,463	58,543

As of June 30, 2015 and 2014, LLS has no unfunded commitments on its alternative investments.

4] 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, 2015 and 2014 (in thousands):

		20	15		2014			
	Temporarily Permanently restricted restricted			mporarily estricted	Permanently restricted			
Time restrictions	\$	607	-	\$	1,295	_		
Research	1	1,738	3,543		10,724	3,270		
Patient service		4,432	-		2,802	_		
Co-pay assistance		7,254	-		11,707	_		
Other		115	147	_	1,461	305		
Total	\$ 2	4,146	3,690	\$	27,989	3,575		

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 assets that attempt to provide a predictable stream of funding to programs supported by its endowment funds while seeking to protect the original value of the gift. The spending rate policy at June 30, 2015 and 2014 was 4%, plus any additional amounts advised by donors. 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, 2015 (in thousands):

	2015							
		mporarily stricted	Total					
Endowment net assets at July 1	\$	3,164	3,575	6,739				
Investment income		61	43	104				
Net appreciation		82	72	154				
Appropriation for expenditure	_	(221)		(221)				
Endowment net assets at June 30	\$	3,086	3,690	6,776				

The following table presents changes in the donor restricted endowment funds for the year ended June 30, 2014 (in thousands):

	2014				
		mporarily estricted	Permanently restricted	Total	
Endowment net assets at July 1	\$	3,122	3,443	6,565	
Investment income		44	79	123	
Net appreciation		213	53	266	
Appropriation for expenditure		(215)		(215)	
Endowment net assets at June 30	\$	3,164	3,575	6,739	

5] Legacies and Contributions Receivable

LLS's legacies and contributions receivable at June 30, 2015 and 2014 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. Contributions receivables are originally recorded based on discounted cash flows using a risk adjusted discount rate which is considered a Level 3 input in the fair value hierarchy. Amounts are scheduled to be received as follows (in thousands):

	2015	2014
Less than one year	\$ 7,111	5,301
1 to 5 years	2,413	4,137
After 5 years	575	650
Subtotal	10,099	10,088
Less: Allowance for uncollectible accounts Discount to present value (1.5% to 5.0%)	(614)	(488) (487)
Total	\$ 8,989	9,113

In 2014, a foundation notified LLS that it intended to cancel a grant commitment that was made in the previous year due to a change in the foundation's objectives. Accordingly, LLS wrote off the balance of the contribution receivable in the amount of \$3,507,000.

The Leukemia & Lymphoma Society, Inc. / June 30, 2015 (with comparative amounts as of and for the year ended June 30, 2014)

6] Deferred Revenue, Donated Services and Media

During 2013, LLS received a \$20,000,000 grant with the contractual agreement to be utilized on research which is jointly identified by the grantor and LLS. At June 30, 2015 and 2014, the unexpended balance of the grant of \$4,504,000 and \$13,700,000, respectively, are included in deferred revenue. Revenue under this grant is expected to be recognized over the next year, as expenses are incurred. The remaining balance of deferred revenue includes amounts received for special events that will be held subsequent to the fiscal year end.

The value of donated services for family support group facilitators and research grant reviewers, as well as donated media are included in both revenue and expense as shown below (in thousands):

	 2015		2014	
Donated services	\$ 4,468	\$	4,985	
Donated media	 5,396	_	6,000	
Total	\$ 9,864	\$	10,985	

7] Fixed Assets, Net

Fixed assets at June 30, 2015 and 2014 consist of the following (in thousands):

	2015	2014	
Leasehold improvements	\$ 1,109	1,135	
Furniture, fixtures, and other office equipment	2,629	2,646	
Computer equipment and software	31,829	27,913	
Total	\$ 35,567	31,694	
Less accumulated depreciation and amoritization	(20,741)	(15,090)	
Fixed assets, net	\$ 14,826	16,604	

8] Retirement Plans

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 \$1,858,000 and \$4,214,000 for the years ended June 30, 2015 and 2014, respectively.

LLS has 457 deferred compensation plans (the 457 Plans) for its executive staff. The 457 Plans are nonqualified deferred compensation plans subject to the provisions of the Internal Revenue Code Section 457. Expenses under the 457 Plans approximated \$10,000 and \$296,000 for the years ended June 30, 2015 and 2014, respectively. The assets and liabilities of the 457 Plans are included in investments and accounts payable and accrued expenses in the accompanying consolidated balance sheet and amounted to approximately \$1,380,000 and \$1,589,000 at June 30, 2015 and 2014, respectively.

9] Lease Commitments

The leases for premises, which LLS's National Office and chapters occupy, expire on various dates through September 30, 2023 and provide for certain payments subject to escalation and periodic rate increases relating to real estate taxes, operating expenses, and utilities.

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

Year ending June 30:		
2016	\$	7,483
2017		5,047
2018		3,625
2019		2,567
2020		2,064
Therafter		4,321
Total	\$	25,107

10] Joint Costs Allocation

For the years ended June 30, 2015 and 2014, LLS incurred expenses to conduct activities that had both fundraising appeals as well as mission program and management and general components (joint activities). Those joint activities included direct mail, coinboards, and media campaigns. Such costs are allocated based on applicable accounting standards and were allocated as follows (in thousands):

	2015	2014
Fund raising	\$ 15,294	12,645
Patient and community service	1,152	1,513
Public health education	3,179	8,456
Total	<u>\$ 19,625</u>	22,614

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