someday is today
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.
is today
the leukemia & lymphoma society today
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™ (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.
**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.

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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®. 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
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®, Velcade® and Dacogen®. 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® and Tasigna® for leukemia patients for whom Gleevec wasn’t good enough.

A new targeted drug Kyprolis® — 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.

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
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!
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.
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.

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
lls advocacy today
fighting for the right to fair patient treatment

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.
Ills patient services today
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.

**LLS 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.

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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
il fundraising today
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

This year School & Youth Programs® — Pennies for Patients® and Olive Garden’s Pasta for Pennies® — 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.

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
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® (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.

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

**leukemia cup regatta**

leukemiacup.org

Held at yacht clubs and other locations across North America, the Leukemia Cup Regatta® 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 record-setting 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**

lightthenight.org

Our annual Light The Night® 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.

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 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
John Byrd, MD
The Ohio State University
Riccardo Dalla-Favera, MD
Columbia University
Brian Druker, MD
Oregon Health & Science University
Anthony Green, MD, PhD
University of Cambridge
Helen Harandi, MD
Baylor College of Medicine
Carl June, MD
University of Pennsylvania
Larry Kwak, MD, PhD
University of Texas
M.D. Anderson Cancer Center
Jonathan Licht, MD
Northwestern University
School of Medicine
Scott Lowe, PhD
Sloan-Kettering Institute for Cancer Research
Beverly Mitchell, MD
Stanford University
Mizti Arguello, PhD
University of Montreal
Scott Armstrong, MD, PhD
Children’s Hospital Boston
Laura Attardi, PhD
Stanford University
Lukas Baitisch, PhD
Dana-Farber Cancer Institute
Cynthia Barber, PhD
Brandeis University
Craig Bassing, PhD
The Children’s Hospital of Philadelphia
Cristian Bellodi, PhD
University of California, San Francisco
Anja-Katrin Bielinsky, PhD
University of Minnesota, Twin Cities
Michael Boddy, PhD
The Scripps Research Institute
Marina Bousquet, PhD
INSERM – Cancer Research Center of Toulouse
Troy Brady, PhD
University of Pennsylvania
Sarah Brennan, PhD
Ciangir Duy, PhD
Weill Medical College of Cornell University
Jennifer Brown, MD, PhD
Dana-Farber Cancer Institute
Patrick Brown, MD
Johns Hopkins University School of Medicine
Avash Alizadeh, MD, PhD
Stanford University
K Mark Ansel, PhD
University of California, San Francisco

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
Dana-Farber Cancer Institute
Cassandra Adams, PhD
University of California, San Francisco
Tahamant Ahmadi, MD, PhD
University of Pennsylvania
Colin Attkan, PhD
Johns Hopkins University School of Medicine
Arash Alizadeh, MD, PhD
Stanford University
K Mark Ansel, PhD
University of California, San Francisco
Mizti Arguello, PhD
University of Montreal
Scott Armstrong, MD, PhD
Children’s Hospital Boston
Laura Attardi, PhD
Stanford University
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Mayo Clinic and Foundation, Jacksonville
Iain Cheeseman, PhD
Whitehead Institute for Biomedical Research
Chong Chen, PhD
Memorial Sloan-Kettering Cancer Center
Jing Chen, PhD
Emory University
Mo Chen, PhD
Rockefeller University
Tao Cheng, MD
University of Pittsburgh
Uhn-Soo Cho, PhD
University of Michigan
Yuh Min Chook, PhD
University of Texas Southwest Medical Center
Christopher Cogle, MD
University of Florida
Hauke Cornils, PhD
Dana Farber Cancer Institute
Naomi Courtmanche, PhD
Yale University
Matthew Davids, MD
Johns Hopkins University School of Medicine
Michael Deininger, MD, PhD
University of Utah
David DiLillo, PhD
Rockefeller University
Chen Dong, PhD
University of Texas
M.D. Anderson Cancer Center
Yali Dou, PhD
University of Michigan
Mary Eapen, MD
Medical College of Wisconsin
Benjamin Ebert, MD, PhD
Brigham & Women’s Hospital
Anna Eiring, PhD
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Suhua Feng, PhD
University of California, Los Angeles
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University of Massachusetts Medical School
Jorge Henao-Mejia, MD, PhD
Yale University
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Columbia University
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Erin Hertlein, PhD
The Ohio State University
Jonathan Higgins, PhD
Brigham & Women’s Hospital
Andrew Holland, PhD
Ludwig Institute for Cancer Research
Kuo-Chiang Hsiia, PhD
Rockefeller University
Yun Huang, PhD
La Jolla Institute for Allergy and Immunology
Enfu Hui, PhD
University of California, San Francisco

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Matthew Warr, PhD  
University of California, San Francisco

Rei Watanabe, MD, PhD  
Brigham & Women’s Hospital

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Massachusetts Institute of Technology

Jennifer Woodard, PhD  
The University of Chicago

Jennifer Woyach, MD  
The University of Chicago

Jennifer Woodard, PhD  
The University of Chicago

Bo Zhou, PhD  
Stanford University

Yubin Zhou, PhD  
Stanford University

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.

Lee Zou, PhD  
Massachusetts General Hospital

Steven Bernstein, MD  
University of Rochester

Iannis Afantitis, PhD  
New York University

Shabbir Allahbadi, MD  
University Health Network

Stephen Ansell, MD, PhD*  
Mayo Clinic and Foundation

Cincinnati Children’s Hospital Medical Center

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Dr. Susan Rheingold is funded in part by The Critchley Family.

* Newly awarded or renewed grants in fiscal year 2013

† Partner grants with the International Waldenstroms Macroglobulinemia Foundation (IWMF)

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Paul Leinwand
The Len-Ari Foundation, Inc.
Leon S. Peters Foundation
Jack and Peggy Lewis
Steven Lieblich
Lightning Foundation, Inc.
Lindquist Family Foundation
Lisa J. Leder Family Foundation, Inc.
LIST Innovative Solutions
Joseph Littenberg
Peter and Tina Locke
Lockheed Martin Corporation
Lockheed Martin Missiles and Fire Control – Dallas
The Lois Pope Life Foundation
Albert and Suzanne Lord
Lord & Taylor
L’Oreal USA
The Lotz Family Foundation
Luby’s Fuddruckers Restaurants, LLC
Lunardi’s Supermarket, Inc.
Lundbeck, Inc.
Lukas Lundin
M&I Bank
M&T Bank
M&T Charitable Foundation
Mack Madness, Inc.
Julio Maclay
Macquarie Securities
Macy’s, Inc.
Major Hyundai
Prasanna and Shradha Malayandi
Matthew Mallgrave
The Mammel Family Foundation
Management and Training Consultants, Inc. (MTCI)
Peter and Gina Manos
Marriott International
David and Joann Mars
Marsh Supermarkets, Inc.
Bruce D. and Electra C. Martin
Rocco and Roxanne Martino
Mary & Michael Levine Charitable Fund
Mary Pillsbury Foundation
Marylou’s Coffee
Mark Mason
Maurice Careas
Maxim Group, LLC
MAXIMUS Foundation
Mayo Foundation for Medical Information and Research
Mary E. McCaul
Casey McGlynn
McKenna Long & Aldridge LLP
Meadow Gardens Ladies Club
Meadowlands Country Club
Mechanical, Inc.
Medimmune, Inc.
Megan’s Wings, Inc.
Sanjay and Sangeeta Mehrotra
MEMC Electronic Materials, Inc.
Memorial Healthcare System
Menchie’s Frozen Yogurt
William Mentlik
Mercedes-Benz USA, LLC
Jim and Carol Mercier
MERCK & Co., Inc.
Merrill Lynch Private Banking & Investment Group
Daniel Metzger
Michael Swieg Foundation
Michelle Lunn Hope Foundation
Microsoft
Midwest Cancer Care – HCA Midwest Health System
Mike Hunter’s Team
Milbank, Tweed, Hadley & McCloy LLP
Edward Miner
Mr. and Mrs. Barry Minkoff
Mr. and Mrs. Rusty Minkoff
Suzy Minkoff
Mitsubishi Power Systems, Inc.
Mizuho Corporate Bank
Patricia Moats
Modell’s Sporting Goods
Lori Mody
Momentum Jaguar-Land Rover Southwest Houston
Momentum Microsystems, Inc.
Peter Moran
Ron and Adrienne Morgan
Morgan Borszcz Consulting
Morgan, Lewis & Bockius LLP
Morgan Stanley
MorganFranklin Corporation
Morrison-Minton Family Trust
Mornistown Memorial Hospital
Mount Gay Rum
Patrick Mucci
Elizabeth Mungo
Murphy-Hoffman Company
The Najim Family Foundation
Names Family Foundation
Larry and Leslie Nance
Nartel Family Foundation
National Journal
National Philanthropic Trust
National Rural Utilities Cooperative Finance Corporation (CFC)
Dan and Martha Nealon
Jeffrey Niedelman
NetApp
The Netter Family Foundation
New York Knicks of the Grip
Nassau, Inc.
The New York Mets Foundation, Inc.
Nexen Petroleum USA, Inc.
Nicholas Family Foundation
Nidec Motor Corporation
NMMA
Guy and Linda Novhra
Gary and Amy Norcross
North Sails
Northrup Grumman Systems Corporation
Northside Hospital
NPL Construction Company
Offshore Sailing School
The Offtderging Family
The Ohio State University
James Cancer Hospital & Solove Research Institute
OHSU
Diane Oldach
Walter Oliver
OnCore Manufacturing Services, LLC
OneSource Distributors, LLC
Peighton & Co.
Ortho-Clinical Diagnostics, Inc.
Oscar, Inc.
Osprey Fund
Peter O’Sullivan
O’Sullivan Plumbing
OTG Management
Oursman Chantilly Imports, Inc.
Par For A Cause
Parents Against Leukemia
Emily Park
The Park Foundation
Park Place Motorcars Dallas
Patti Robinson Kaufmann
First Connection
Paul Hastings
Pegasus Capital Advisors, LP
Peoples Natural Gas
PEPCO Holdings, Inc.
Peraino’s Jewelers
Performance Food Group
Perry Ellis International, Inc.
Perry Homes
Sheldon and Donita Petersen
PGT Trucking, Inc.
Pharmaceutical Care Management Association
Philadelphia Multiple Myeloma Networking Group
Philip E. Fess Family Foundation
PhRMA
The Phyllis M. Coors Foundation
Piedmont Healthcare
Pillsbury Winthrop Shaw Pittman, LLP
Marie E. Pinizzotto, MD and Carol Armon
Pinnacle Capital Mortgage Corporation
Plaid Pantries, Inc.
Planned Systems International, Inc.
The PNC Financial Services Group
Polk Bros. Foundation
Popular Community Bank
The Portmann Family Charitable Fund
Poses Family Foundation
Powell Industries
Practice Fusion
Pray Family Foundation
Presbyterian Cancer Center
John and Monika Preston
Price Chopper Supermarkets
PricewaterhouseCoopers, LLP
Procter & Gamble
Prudential
PVH Foundation, Inc.
Quad/Graphics, Inc., The Quinn Law Firm
Quintanaill Management Company
Quintiles
Rahm Malting Co.
Ralph Lauren Corporation
Rapid Rehab of Illinois
Ratopia Charity Fund
Ray Catena Auto Group
Ronald Raymond
Real Estate One Foundation
Red Robin – Lehigh Valley Restaurant Group
Redman Triathlon
Redwood Regional Medical Group
Regions Bank
Dr. Faisal Rehman
Robert Reitzes
Reliable Churchill
Reliant Energy Foundation
Reliant Park
Relis
James Resnick
The Rhoda and David Chase Family Foundation
Rhuilen Rock Hill Run & Ramble
Michael Richman
Richman Asset Management, Inc.
Riemer & Braunstein, LLP
Rio Grande Cancer Foundation
RoadID, Inc.
The Robert Berne Foundation
Robert E. Gallagher Charitable Trust
The Robert I. Lappin Foundation
Robert G. C. & L. C. Lappin Trust
Robert R. Fesler
Robert E. Gallagher Charitable Trust
Robert S. & L. Ravenscroft Foundation
Robert H. & L. N. Rees Charitable Foundation
Robert D. & L. H. Rees Charitable Foundation
Roper St. Francis Healthcare
Jerry and Lois Rosenblum
RPA Advisors, LLC
RR Donnelley
RREEF
Ruby’s Diner, Inc.
Paul Russo
Jeff and Pat Sachs
Sail America
Sailing for a Cure Foundation
Sailing World
John and Lauren Salata
Sallie Mae, Inc.
Sam J. Frankino Foundation
Sam Swope Auto Group, LLC
Sam’s Club
Samuel C. Cantor Charitable Trust
The Samuel P. Mandell Foundation
San Diego Gas & Electric
San Diego State University, College of Business Administration
The San Francisco Foundation
San Par Golf Tournament
Thomas Sandell
Sanofi Aventis
SAP America, Inc.
Sparer Charitable Trust
Sasco Foundation
Savannah Chatham Imaging
Thomas and Laurie Saylak
John Scarpa
Melodie Scharf
Bradley Scher
Stephen Scherr
Michael and Susan Schuldes
Samaritan Health Services
Scharfstein Family Foundation
Scott Schneid
Scott Schweinghauser
Southern Company
Southstar Energy Services, LLC
Southwest Convenience Stores
Spangenberg Family Foundation
Richard Spadye
Spectrum Pharmaceuticals, Inc.
Stephen and Bonnie Spiegel
Mark and Carol Spisak
Sprint
SSQ Assurance Generales
SunTrust Banks, Inc.
Sunrise Senior Living
Sunflower State Enterprises, Inc.
Sunesis Pharmaceuticals, Inc.
Sprint
SPRA International
SQA Assurance Generales
ST. Joseph’s/Candler
St. Juste Management Corp.
State Street Corporation
Sterling Mets LP
Sterne Kessler Goldstein & Fox P.L.L.C.
Sunglesses, LLC
Sylvan & Ann Oestreicher Foundation, Inc.
Synopsys, Inc.
TAP Cancer Out
Target
Paul Taubman
TCDI
Toll Brothers, Inc.
Terumo BCT, Inc.
Texas Instruments, Inc.
Thaler Machine Co./James Construction
The Fan 97.1
The Moorings
Billie Thomas
Thomas & Herbert Consulting, LLC
Thomas and Agnes Carvel Foundation
Thompson Habib Denison (THD)
Tiber Creek Partners, LLC
Tuition Associates
The TJX Companies, Inc.
Andy Tod
donors (continued)

Towers Watson
TPG Capital LP
TRANSWESTERN
TRIB Total Media
The TriLink Team
Trion Group, Inc.
Troutman Sanders, LLP
TRUST
The Truland Group Inc.
Trusted Choice Independent Insurance Agents of Illinois
Tube City IMS
Turner Construction
TV Eyes, Inc.
UBS Financial Services
UCSD/Sharp BMT Program
Ultimate Software
Mark Unatin Family
Union First Market Bank
United HealthCare Services, Inc.
United First Market Bank
United Martial Arts Center Briarcliff
United States Steel Corporation
United Way Canada
University of Illinois
Alpha Tau Omega Gamma
Zeta Chapter
The University of Kansas Cancer Center
University of Mississippi
Medical Center Cancer Institute
UPMC
UPS
US Sailing
Utica Community Schools
Vaden Automotive Group
Valenti Mid-Atlantic Management, LLC
Valero Energy Corporation
Vanderbilt-Ingram Cancer Center
Kathryn C. Vecellio
Verizon Business

The Victor E. & Caroline E. Schutte Foundation – 1959
Victory Brewing Company
The Virginia Sheldon Jerome Foundation
Vitol Group
The W. O’Neil Foundation
Waddell & Reed Kansas City
Marathon with Ivy Funds
Gloria Somerville Wagner
John F. Waltz
Maura and Stephen Walsh
Ted Wang
Warne Family Charitable Foundation
WASH-FM
Washington Business Journal
Bill and Denise Watkins
Wawa, Inc.
Wawanesa Insurance
WBIG
WBNS 10TV
Web Marketing Associates
WebMD Health Foundation, Inc.
WebMD, LLC
Wechsler/Marsico Associates
Christopher Weiler
David Weinstein
Wellmark Foundation
Wells Fargo Foundation
Wendco of Central PA, Inc.
West Marine
West Penn Allegheny Health System
Westchester County Detectives Association, Inc.
Western Dental Services, Inc.
White Allen
The Whitney Foundation
John William
William E. Carter Company
The William J. Shaw Family Foundation, Inc.
Williams & Connolly, LLP
James and Judith Wilson
Bernie Winnicki
WIVB-TV
WMZQ
WTOP Radio
WUSA9
Yahoo! Employee Foundation
Mina Yanney
Yoder Industries
Eric, Tamara and Nicholas Yollick
Your Cause LLC
John and Adelaide Zabriskie
Zenobia Therapeutics
Ziolkowski Patent Solutions Group, SC
Joseph Zvesper
Anonymous (17)

Top Campaign Fundraisers

Schools that have raised more than $25,000, individuals who have raised more than $50,000 or company/teams that have raised more than $100,000 within one season to support LLS’s mission.

Patricia Abboud, MD
Amy P. Abernethy, MD
ADP
Austaco, Ltd. – Taco Bell
Kelly Bar-Or
Barclays
Beckendorff Junior High School
Benjamin’s Team
Bennett’s Buddies
Becky Berthelot
Betty’sport’s Team Ruben
Biogen Idec
Elaine Blissas
The Blackstone Group
Brad Blumenfeld
BMC
Christina Bold
Corie Boldt
Terry Boston
John Bowman
Jason Brennan
James D. Burgess
Burlington Coat Factory
CA Technologies
Joe Cagliggero
Robert “Spider” Cantley
Carter’s
Chrisy Cashman
Celgene Corporation
CenturyLink
Dave Cherry & GLC50K

Pharmaceutical Funding Legend

- Patient Services/Education
- Public Policy
- Campaign
- Research

* Denotes multi-year commitment

** dosage

Kim Heemstra
Angela Helmer
Eric J. Henry
Wayne Hogrefe
Kieran Holohan
John Park’s Champions
Jonathan Juravich & Team J
Dan Kaplan
John Kellenyi
KForce
Erin Kirkpatrick
Kiven, Kotter, Lieberman, Fox, Joffe, Goldschmidt & Keps Team
Rory Koslow
KPMG
Matt Krueger
Rick Kuper
Ryan LaFontaine
Laurie LuLu and her Entourage
Ralph Lawrence
Eric Lebenson
Brian Leech
The Lymphomaniacs
Lauryn Maes
Eileen Mannion & Team Trinity
George Mavrikis
Casey McGlynn
Lance Meyerowich
Michael C. Fina
Microsoft
The Mighty Molars
Millennium: The Takeda Oncology Company
Dr. Douglas Miller
Dave Moran
Sara Morris
Sabrina Mosseau
Daniel L. Moyer
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.

Rose Accardi*
Petrina Aguilar
Mary Albright
Joseph Arnold*
Lorae Aumack*
Lorraine Azrak*
Charles David Barton
Florence Bevan*
Betty Birk*
Roy and Barbara Bouque*
Marjorie Bundrock*
Leatrice Cane*
Tom and Chris Carleton
Michael Carter
Antoinette Chesere*
Ted Christiansen
Elise Church*
Cynthia Clark
Samuel Cohen*
Margot Cole and Seymour Falik
Marie Comodo*
Beatrice Cuneo*
VeliDag*
Helen Dao
Winfred DaVila*
Shirley Davidiner
Joanne Davis
Frederick Dibble*
Margaret DiDonato*
Nelson Doland*
Peggy and Margaret Dupaquier*
Hubert Erickson*
Alejandro Garcia
Franklin Gillespie*
Edna Gilpin*
Nathan Greenberg*
Paul and Beryl Greentin*
Rebecca Gross*
Alfred Haffner*
Sharon Hailey
Martha Harper*
Lauren Hart*
Judith Helfant*
Edward Henderson
Arlene Hynes*
Edith Ingram
Lyle Jaeger
Ivy Jerrard
Donald Johnson*
Elizabeth Johnston*
Mary Jorgenson*
Kirk Kaszak
Ruthe Katz*
Ethel Kelly*
Catherine Kinser*
Maria Kitzmiller*
Ellen Tobey Klass
Mildred Kleid
Gail Kromer
Frances Lau
Seymour Lavine*
Cheryl Lewington
Helen Lippert*
Catherine Maas*
Hertha Malz*
Brian Marsh*
Sherrill Martin
Michael Massius*
James Morris*
Carol Parker*
Margaret Patterson*
Nancy Pechar
Pasquale Petti

* National Man & Woman of the Year

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

See accompanying notes to consolidated financial statements.
### Revenue

<table>
<thead>
<tr>
<th></th>
<th>Unrestricted</th>
<th>Temporarily restricted</th>
<th>Permanently restricted</th>
<th>Total 2012</th>
<th>Total 2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Campaign contributions</td>
<td>$262,114</td>
<td>$68,041</td>
<td>$257</td>
<td>$330,412</td>
<td>$314,044</td>
</tr>
<tr>
<td>Less direct donor benefit costs</td>
<td>(39,173)</td>
<td>-</td>
<td>-</td>
<td>(39,173)</td>
<td>(38,070)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Net campaign contributions</td>
<td>222,941</td>
<td>68,041</td>
<td>257</td>
<td>291,239</td>
<td>275,974</td>
</tr>
<tr>
<td>Legacies</td>
<td>3,165</td>
<td>1,884</td>
<td>-</td>
<td>5,049</td>
<td>7,736</td>
</tr>
<tr>
<td>Donated services (note 1)</td>
<td>5,328</td>
<td>-</td>
<td>-</td>
<td>5,328</td>
<td>5,983</td>
</tr>
<tr>
<td>Net interest and dividend income (note 3)</td>
<td>2,057</td>
<td>84</td>
<td>11</td>
<td>2,152</td>
<td>2,463</td>
</tr>
<tr>
<td>Net (decrease) increase in fair value of investments (note 3)</td>
<td>(7)</td>
<td>(212)</td>
<td>64</td>
<td>(155)</td>
<td>15,283</td>
</tr>
<tr>
<td>Grant refunds</td>
<td>1,477</td>
<td>-</td>
<td>-</td>
<td>1,477</td>
<td>1,748</td>
</tr>
<tr>
<td>Net assets released from restrictions/redesignation</td>
<td>82,906</td>
<td>(82,039)</td>
<td>(867)</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td></td>
<td>317,867</td>
<td>(12,242)</td>
<td>(535)</td>
<td>305,090</td>
<td>309,187</td>
</tr>
</tbody>
</table>

### Expenses (note 10)

#### Program Services:

<table>
<thead>
<tr>
<th></th>
<th>Unrestricted</th>
<th>Temporarily restricted</th>
<th>Permanently restricted</th>
<th>Total 2012</th>
<th>Total 2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Research</td>
<td>73,512</td>
<td>-</td>
<td>-</td>
<td>73,512</td>
<td>71,985</td>
</tr>
<tr>
<td>Patient and community service</td>
<td>115,727</td>
<td>-</td>
<td>-</td>
<td>115,727</td>
<td>109,496</td>
</tr>
<tr>
<td>Public health education</td>
<td>44,772</td>
<td>-</td>
<td>-</td>
<td>44,772</td>
<td>44,197</td>
</tr>
<tr>
<td>Professional education</td>
<td>8,785</td>
<td>-</td>
<td>-</td>
<td>8,785</td>
<td>7,979</td>
</tr>
<tr>
<td>Total program services</td>
<td>242,796</td>
<td>-</td>
<td>-</td>
<td>242,796</td>
<td>233,657</td>
</tr>
</tbody>
</table>

#### Supporting Services:

<table>
<thead>
<tr>
<th></th>
<th>Unrestricted</th>
<th>Temporarily restricted</th>
<th>Permanently restricted</th>
<th>Total 2012</th>
<th>Total 2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Management and general</td>
<td>24,869</td>
<td>-</td>
<td>-</td>
<td>24,869</td>
<td>23,051</td>
</tr>
<tr>
<td>Fund raising</td>
<td>43,557</td>
<td>-</td>
<td>-</td>
<td>43,557</td>
<td>42,367</td>
</tr>
<tr>
<td>Total supporting services</td>
<td>68,426</td>
<td>-</td>
<td>-</td>
<td>68,426</td>
<td>65,418</td>
</tr>
<tr>
<td>Total expenses</td>
<td>311,222</td>
<td>-</td>
<td>-</td>
<td>311,222</td>
<td>299,075</td>
</tr>
</tbody>
</table>

### Change in net assets before foreign currency translation adjustment

<table>
<thead>
<tr>
<th></th>
<th>Unrestricted</th>
<th>Temporarily restricted</th>
<th>Permanently restricted</th>
<th>Total 2012</th>
<th>Total 2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Change in net assets</td>
<td>6,512</td>
<td>(12,242)</td>
<td>(535)</td>
<td>(6,265)</td>
<td>10,432</td>
</tr>
</tbody>
</table>

### Net Assets

<table>
<thead>
<tr>
<th></th>
<th>Unrestricted</th>
<th>Temporarily restricted</th>
<th>Permanently restricted</th>
<th>Total 2012</th>
<th>Total 2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beginning of year</td>
<td>95,108</td>
<td>24,405</td>
<td>3,892</td>
<td>123,405</td>
<td>112,973</td>
</tr>
<tr>
<td>End of year</td>
<td>$101,620</td>
<td>$12,163</td>
<td>$3,357</td>
<td>$117,140</td>
<td>$123,405</td>
</tr>
</tbody>
</table>

See accompanying notes to consolidated financial statements.
### 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

<table>
<thead>
<tr>
<th></th>
<th>Research</th>
<th>Patient and community service</th>
<th>Public health education</th>
<th>Professional education</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Awards and grants</td>
<td>$ 54,527</td>
<td>$ –</td>
<td>$ –</td>
<td>$ –</td>
<td>$ 54,527</td>
</tr>
<tr>
<td>Therapy acceleration program (note 6)</td>
<td>13,871</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>13,871</td>
</tr>
<tr>
<td>Financial aid to patients</td>
<td>–</td>
<td>3,057</td>
<td>–</td>
<td>–</td>
<td>3,057</td>
</tr>
<tr>
<td>Co-pay assistance (note 5)</td>
<td>–</td>
<td>45,961</td>
<td>–</td>
<td>–</td>
<td>45,961</td>
</tr>
<tr>
<td>Donated services</td>
<td>1,150</td>
<td>4,178</td>
<td>–</td>
<td>–</td>
<td>5,328</td>
</tr>
<tr>
<td>Salaries</td>
<td>1,972</td>
<td>28,845</td>
<td>17,498</td>
<td>4,588</td>
<td>52,903</td>
</tr>
<tr>
<td>Employee benefits and taxes (note 7)</td>
<td>276</td>
<td>7,755</td>
<td>5,195</td>
<td>1,303</td>
<td>14,529</td>
</tr>
<tr>
<td>Occupancy (note 8)</td>
<td>42</td>
<td>3,400</td>
<td>2,522</td>
<td>675</td>
<td>6,639</td>
</tr>
<tr>
<td>Insurance</td>
<td>9</td>
<td>262</td>
<td>135</td>
<td>425</td>
<td>–</td>
</tr>
<tr>
<td>Telephone</td>
<td>35</td>
<td>1,214</td>
<td>918</td>
<td>136</td>
<td>2,303</td>
</tr>
<tr>
<td>Travel</td>
<td>94</td>
<td>1,403</td>
<td>1,082</td>
<td>293</td>
<td>2,872</td>
</tr>
<tr>
<td>Printing and supplies</td>
<td>197</td>
<td>2,615</td>
<td>5,413</td>
<td>413</td>
<td>8,638</td>
</tr>
<tr>
<td>Equipment rentals and maintenance</td>
<td>19</td>
<td>1,026</td>
<td>598</td>
<td>153</td>
<td>1,796</td>
</tr>
<tr>
<td>Postage and shipping</td>
<td>9</td>
<td>921</td>
<td>3,418</td>
<td>110</td>
<td>4,458</td>
</tr>
<tr>
<td>Meetings</td>
<td>633</td>
<td>1,976</td>
<td>803</td>
<td>138</td>
<td>3,550</td>
</tr>
<tr>
<td>Professional fees</td>
<td>607</td>
<td>10,531</td>
<td>5,471</td>
<td>535</td>
<td>17,144</td>
</tr>
<tr>
<td>Miscellaneous</td>
<td>26</td>
<td>1,647</td>
<td>1,030</td>
<td>295</td>
<td>2,998</td>
</tr>
<tr>
<td>Depreciation and amortization</td>
<td>45</td>
<td>936</td>
<td>689</td>
<td>127</td>
<td>1,797</td>
</tr>
<tr>
<td><strong>Total expenses</strong></td>
<td><strong>$ 73,512</strong></td>
<td><strong>$ 115,727</strong></td>
<td><strong>$ 44,772</strong></td>
<td><strong>$ 8,785</strong></td>
<td><strong>$ 242,796</strong></td>
</tr>
</tbody>
</table>

#### Supporting Services

<table>
<thead>
<tr>
<th></th>
<th>Management and general</th>
<th>Fund raising</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Awards and grants</td>
<td>$ –</td>
<td>–</td>
<td>$ 54,527</td>
</tr>
<tr>
<td>Therapy acceleration program (note 6)</td>
<td>–</td>
<td>–</td>
<td>13,871</td>
</tr>
<tr>
<td>Financial aid to patients</td>
<td>–</td>
<td>–</td>
<td>3,057</td>
</tr>
<tr>
<td>Co-pay assistance (note 5)</td>
<td>–</td>
<td>–</td>
<td>45,961</td>
</tr>
<tr>
<td>Donated services</td>
<td>–</td>
<td>–</td>
<td>5,328</td>
</tr>
<tr>
<td>Salaries</td>
<td>8,034</td>
<td>9,903</td>
<td>17,937</td>
</tr>
<tr>
<td>Employee benefits and taxes (note 7)</td>
<td>2,433</td>
<td>3,633</td>
<td>6,066</td>
</tr>
<tr>
<td>Occupancy (note 8)</td>
<td>1,066</td>
<td>1,456</td>
<td>2,522</td>
</tr>
<tr>
<td>Insurance</td>
<td>59</td>
<td>107</td>
<td>166</td>
</tr>
<tr>
<td>Telephone</td>
<td>307</td>
<td>988</td>
<td>1,295</td>
</tr>
<tr>
<td>Travel</td>
<td>613</td>
<td>678</td>
<td>1,291</td>
</tr>
<tr>
<td>Printing and supplies</td>
<td>3,997</td>
<td>8,489</td>
<td>12,486</td>
</tr>
<tr>
<td>Equipment rentals and maintenance</td>
<td>279</td>
<td>427</td>
<td>706</td>
</tr>
<tr>
<td>Postage and shipping</td>
<td>1,604</td>
<td>29,845</td>
<td>31,449</td>
</tr>
<tr>
<td>Meetings</td>
<td>276</td>
<td>7,755</td>
<td>8,031</td>
</tr>
<tr>
<td>Professional fees</td>
<td>1,972</td>
<td>10,531</td>
<td>12,503</td>
</tr>
<tr>
<td>Miscellaneous</td>
<td>276</td>
<td>1,403</td>
<td>1,679</td>
</tr>
<tr>
<td>Depreciation and amortization</td>
<td>394</td>
<td>411</td>
<td>805</td>
</tr>
<tr>
<td><strong>Total expenses</strong></td>
<td><strong>$ 24,869</strong></td>
<td><strong>$ 43,557</strong></td>
<td><strong>$ 68,426</strong></td>
</tr>
</tbody>
</table>

#### Total Expenses

<table>
<thead>
<tr>
<th></th>
<th>2012</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Direct Donor Benefit Costs</td>
<td>$ 311,222</td>
<td>$ 299,075</td>
</tr>
</tbody>
</table>

#### Expenses

<table>
<thead>
<tr>
<th></th>
<th>2012</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Research</td>
<td>23.6%</td>
<td>22%</td>
</tr>
<tr>
<td>Patient and Community Service</td>
<td>37.2%</td>
<td>78%</td>
</tr>
<tr>
<td>Public Health Education</td>
<td>14.4%</td>
<td>14%</td>
</tr>
<tr>
<td>Professional Education</td>
<td>2.8%</td>
<td>13%</td>
</tr>
<tr>
<td>Total Program Services</td>
<td>78.0%</td>
<td>78%</td>
</tr>
<tr>
<td>Management and General</td>
<td>8.0%</td>
<td>8%</td>
</tr>
<tr>
<td>Fundraising</td>
<td>14.0%</td>
<td>14%</td>
</tr>
<tr>
<td>Total Supporting Services</td>
<td>22.0%</td>
<td>22%</td>
</tr>
<tr>
<td>Total Expenses</td>
<td>100.0%</td>
<td>100%</td>
</tr>
</tbody>
</table>

See accompanying notes to consolidated financial statements.
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)

Cash flows from operating activities:

<table>
<thead>
<tr>
<th>Description</th>
<th>2012</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Change in net assets</td>
<td>$ (6,265)</td>
<td>$ 10,432</td>
</tr>
<tr>
<td>Adjustments to reconcile change in net assets to</td>
<td></td>
<td></td>
</tr>
<tr>
<td>net cash provided by (used in) operating activities:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Net decrease (increase) in fair value of investments</td>
<td>155</td>
<td>(15,283)</td>
</tr>
<tr>
<td>Permanently restricted contributions collected</td>
<td>(257)</td>
<td>(105)</td>
</tr>
<tr>
<td>Depreciation and amortization</td>
<td>2,768</td>
<td>2,076</td>
</tr>
<tr>
<td>Increase (decrease) in allowance for uncollectible accounts</td>
<td>40</td>
<td>(426)</td>
</tr>
<tr>
<td>Changes in operating assets and liabilities:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prepaid expenses and other assets</td>
<td>(1,545)</td>
<td>(464)</td>
</tr>
<tr>
<td>Legacies and contributions receivable, net</td>
<td>14,161</td>
<td>(771)</td>
</tr>
<tr>
<td>Accounts payable and accrued expenses</td>
<td>2,481</td>
<td>1,267</td>
</tr>
<tr>
<td>Deferred revenue</td>
<td>496</td>
<td>301</td>
</tr>
<tr>
<td>Grants payable</td>
<td>2,387</td>
<td>(9,001)</td>
</tr>
<tr>
<td>Net cash provided by (used in) operating activities</td>
<td>14,421</td>
<td>(11,974)</td>
</tr>
</tbody>
</table>

Cash flows from investing activities:

<table>
<thead>
<tr>
<th>Description</th>
<th>2012</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Purchases of fixed assets</td>
<td>(4,209)</td>
<td>(2,357)</td>
</tr>
<tr>
<td>Purchases of investments</td>
<td>(94,729)</td>
<td>(49,023)</td>
</tr>
<tr>
<td>Sales of investments</td>
<td>92,366</td>
<td>59,919</td>
</tr>
<tr>
<td>Net cash (used in) provided by investing activities</td>
<td>(6,572)</td>
<td>(8,539)</td>
</tr>
</tbody>
</table>

Cash flows from financing activities:

<table>
<thead>
<tr>
<th>Description</th>
<th>2012</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Permanently restricted contributions collected</td>
<td>257</td>
<td>105</td>
</tr>
<tr>
<td>Net cash provided by financing activities</td>
<td>257</td>
<td>105</td>
</tr>
<tr>
<td>Net increase (decrease) in cash and cash equivalents</td>
<td>8,106</td>
<td>(3,330)</td>
</tr>
<tr>
<td>Cash and cash equivalents at beginning of year</td>
<td>17,866</td>
<td>21,196</td>
</tr>
<tr>
<td>Cash and cash equivalents at end of year</td>
<td>$ 25,972</td>
<td>$ 17,866</td>
</tr>
</tbody>
</table>

See accompanying notes to consolidated financial statements.
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.

Risks and Uncertainties
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.

2. Summary of Significant Accounting Policies

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.

Summary 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
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):

<table>
<thead>
<tr>
<th>Less than one year</th>
<th>2012</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>3,766</td>
<td>17,905</td>
</tr>
<tr>
<td>1 to 5 years</td>
<td>2,300</td>
<td>2,710</td>
</tr>
<tr>
<td>After 5 years</td>
<td>712</td>
<td>104</td>
</tr>
<tr>
<td><strong>Subtotal</strong></td>
<td>6,778</td>
<td>20,719</td>
</tr>
</tbody>
</table>

| 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):

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

<table>
<thead>
<tr>
<th></th>
<th>2011</th>
<th>Level 1</th>
<th>Level 2</th>
<th>Level 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fixed income (mutual funds):</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Long duration</td>
<td>57,910</td>
<td>57,910</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Short duration</td>
<td>42,826</td>
<td>42,826</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Other</td>
<td>1,039</td>
<td>1,039</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Equities and other mutual funds:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Large cap</td>
<td>16,703</td>
<td>16,703</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>International</td>
<td>6,552</td>
<td>6,552</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Small/mid cap</td>
<td>5,369</td>
<td>5,369</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Alternative investments:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Funds of hedge funds</td>
<td>35,503</td>
<td>–</td>
<td>35,503</td>
<td>–</td>
</tr>
<tr>
<td>Limited partnership equity indices</td>
<td>15,135</td>
<td>–</td>
<td>15,135</td>
<td>–</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$181,876</strong></td>
<td><strong>$131,238</strong></td>
<td><strong>$50,638</strong></td>
<td><strong>$–</strong></td>
</tr>
</tbody>
</table>

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):

<table>
<thead>
<tr>
<th>Redemption period</th>
<th>Funds of hedge funds</th>
<th>Limited partnerships</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monthly</td>
<td>$37,501</td>
<td>$5,254</td>
</tr>
<tr>
<td>Quarterly</td>
<td>34,459</td>
<td>–</td>
</tr>
<tr>
<td>Annual</td>
<td>3,042</td>
<td>–</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$37,501</strong></td>
<td><strong>$5,254</strong></td>
</tr>
</tbody>
</table>

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):

<table>
<thead>
<tr>
<th></th>
<th>2012</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Balance at July 1</td>
<td>$–</td>
<td>$15,992</td>
</tr>
<tr>
<td>Purchases</td>
<td>3,135</td>
<td>–</td>
</tr>
<tr>
<td>Investment expense</td>
<td>–</td>
<td>(211)</td>
</tr>
<tr>
<td>Net (decrease) increase in fair value</td>
<td>–</td>
<td>1,118</td>
</tr>
<tr>
<td>Transfers to Level 2 due to expiration of lock-up period</td>
<td>–</td>
<td>(16,899)</td>
</tr>
<tr>
<td><strong>Balance at June 30</strong></td>
<td><strong>$3,042</strong></td>
<td><strong>$–</strong></td>
</tr>
</tbody>
</table>

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 expended 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.
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. 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):

<table>
<thead>
<tr>
<th>Description</th>
<th>Unrestricted</th>
<th>Temporarily restricted</th>
<th>Permanently restricted</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Endowment net assets at July 1</td>
<td>$ –</td>
<td>$ 3,280</td>
<td>$ 3,892</td>
<td>$ 7,172</td>
</tr>
<tr>
<td>Investment income</td>
<td>–</td>
<td>77</td>
<td>11</td>
<td>88</td>
</tr>
<tr>
<td>Net (depreciation) appreciation</td>
<td>–</td>
<td>(202)</td>
<td>64</td>
<td>(138)</td>
</tr>
<tr>
<td>Contributions</td>
<td>–</td>
<td>–</td>
<td>257</td>
<td>257</td>
</tr>
<tr>
<td>Net assets redesignated by donor</td>
<td>–</td>
<td>–</td>
<td>(867)</td>
<td>(867)</td>
</tr>
<tr>
<td>Endowment net assets at June 30</td>
<td>$ –</td>
<td>$ 3,155</td>
<td>$ 3,357</td>
<td>$ 6,512</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Description</th>
<th>Unrestricted</th>
<th>Temporarily restricted</th>
<th>Permanently restricted</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Endowment net assets at July 1</td>
<td>$ 1,895</td>
<td>$ 362</td>
<td>$ 3,688</td>
<td>$ 5,945</td>
</tr>
<tr>
<td>Investment income</td>
<td>–</td>
<td>152</td>
<td>–</td>
<td>152</td>
</tr>
<tr>
<td>Net appreciation</td>
<td>–</td>
<td>760</td>
<td>127</td>
<td>887</td>
</tr>
<tr>
<td>Contributions</td>
<td>–</td>
<td>111</td>
<td>105</td>
<td>216</td>
</tr>
<tr>
<td>Net assets redesignated by donor</td>
<td>–</td>
<td>–</td>
<td>(28)</td>
<td>(28)</td>
</tr>
<tr>
<td>Reclassification upon enactment of NYPMIFA</td>
<td>(1,895)</td>
<td>1,895</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Endowment net assets at June 30</td>
<td>$ –</td>
<td>$ 3,280</td>
<td>$ 3,892</td>
<td>$ 7,172</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Year ending June 30</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>2013</td>
<td>$ 7,840</td>
</tr>
<tr>
<td>2014</td>
<td>6,593</td>
</tr>
<tr>
<td>2015</td>
<td>5,904</td>
</tr>
<tr>
<td>2016</td>
<td>4,059</td>
</tr>
<tr>
<td>2017</td>
<td>1,714</td>
</tr>
<tr>
<td>Thereafter</td>
<td>450</td>
</tr>
<tr>
<td>Total</td>
<td>$ 26,560</td>
</tr>
</tbody>
</table>

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):

<table>
<thead>
<tr>
<th>Description</th>
<th>Unrestricted</th>
<th>Temporarily restricted</th>
<th>Permanently restricted</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Endowment net assets at July 1</td>
<td>$ –</td>
<td>$ 3,280</td>
<td>$ 3,892</td>
<td>$ 7,172</td>
</tr>
<tr>
<td>Investment income</td>
<td>–</td>
<td>77</td>
<td>11</td>
<td>88</td>
</tr>
<tr>
<td>Net (depreciation) appreciation</td>
<td>–</td>
<td>(202)</td>
<td>64</td>
<td>(138)</td>
</tr>
<tr>
<td>Contributions</td>
<td>–</td>
<td>–</td>
<td>257</td>
<td>257</td>
</tr>
<tr>
<td>Net assets redesignated by donor</td>
<td>–</td>
<td>–</td>
<td>(867)</td>
<td>(867)</td>
</tr>
<tr>
<td>Endowment net assets at June 30</td>
<td>$ –</td>
<td>$ 3,155</td>
<td>$ 3,357</td>
<td>$ 6,512</td>
</tr>
</tbody>
</table>

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):

<table>
<thead>
<tr>
<th>Description</th>
<th>2012</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fund raising</td>
<td>$ 11,509</td>
<td>$ 12,543</td>
</tr>
<tr>
<td>Patient and community service</td>
<td>1,049</td>
<td>1,078</td>
</tr>
<tr>
<td>Public health education</td>
<td>9,522</td>
<td>10,725</td>
</tr>
<tr>
<td>Total</td>
<td>$ 22,080</td>
<td>$ 24,346</td>
</tr>
</tbody>
</table>
national leaders

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Scott Carroll
Jackson Lewis
Cincinnati, OH

Vice Chair
Timothy Durst
Baker Botts LLP
Dallas, TX

Secretary/Treasurer
Steven L. Hooker
Portland, OR

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Peter Bennett Brock
Brock Development Corp.
Palm Beach Gardens, FL

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Boston Millennia Partners
Boston, MA

Elizabeth Clark, PhD, MPH, ACSW
National Association of Social Workers
Washington, DC

Jorge Cortes, MD
The University of Texas M.D. Anderson Cancer Center
Houston, TX

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Human Genome Sciences, Inc.
Columbia, MD

Bernard H. Garil
Delray Beach, FL

D. Gary Gilliland, MD
Merck
North Wales, PA

Pamela J. Haylock
Association of Vascular Access
Herriman, UT

Raanan Horowitz
Elbit Systems of America, LLC
Fort Worth, TX

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New York, NY

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Princess Margaret Hospital
Toronto, Ontario, Canada

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Lilly USA, LLC
Washington, DC

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Pompano Beach, FL

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Honigman Miller Schwartz and Cohn
Detroit, MI

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Chicago, IL

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New York, NY

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Sugar Land, TX

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Palm Beach, FL

Louise G. Warner
Chagrin Falls, OH

Matthew E. Winter
Allstate Auto, Home & Agencies
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Louis DeGennaro, PhD
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Chief Mission Officer

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George Omiros
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Chief Campaign & Field Development Officer

Jeff Como
Chief Information Officer

Hildy Dillon
Senior Vice President

Patient Services

Philip Kozlowski
Senior Vice President

Human Resources

Jimmy Nangle
Chief Financial Officer

Michael Osso
Senior Vice President

Major Gifts

Lisa Stockmon
Senior Vice President

Marketing & Communications

David Timko
Senior Vice President

Volunteer Engagement

Mark Velleca, MD, PhD
Chief Policy & Advocacy Officer

Richard Winneker
Senior Vice President

Research

The Leukemia & Lymphoma Society of Canada

Nancy Allen
President

Canadian Operations
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 Gisinow, 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.