



**BEATING
CANCER
IS IN
OUR
BLOOD**

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President & Chairman's Message

Every three minutes, someone in the United States is diagnosed with a blood cancer, including leukemia, lymphoma or myeloma. Cancer is a tough opponent, but we at The Leukemia & Lymphoma Society (LLS) are tougher.

Our track record in accelerating lifesaving treatments is unparalleled, and we champion the most pioneering research to fuel our attack against cancer. We are laser-focused on cures, and we're relentless in supporting patients and their families throughout their cancer experience to ensure they have access to care. Our work is advancing breakthroughs for more than 1.3 million Americans living with or in remission from a blood cancer, and importantly, it is helping patients with other cancers and diseases.

Nearly 70 years of fighting blood cancers has led us to a game changing belief. Beating cancer is in our blood. With your support, we are transforming this powerful belief in finding cures into reality for more patients.

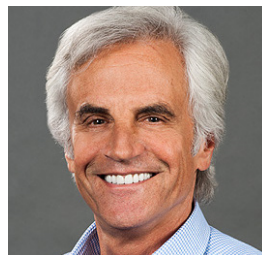
Gratefully,



Louis J. DeGennaro, Ph.D.
President & Chief Executive
Officer



Peter Brock
Chairman of the Board



OUR IMPACT AT A GLANCE

Here at LLS, we have a bold vision: a world without blood cancers. The impact that we are making on the lives of patients and their families gives us confidence that we will achieve this goal in our lifetime.

Our incredible progress this year puts us at the forefront of the fight to cure cancer. LLS achieved a record fundraising year, generating almost \$450 million in revenue that allowed us to invest even more in our mission and help more patients. Our record success is driving innovation across the cancer landscape. Revolutionary new treatments, originally discovered through blood cancer research, are now being tested in clinical trials for other cancers. Not only is the blood an important starting place to find cures for cancer, but it is in our DNA – it is what we do at LLS every day.

**That's why we are the only organization
that can say proudly**

**BEATING
CANCER
IS IN
OUR BLOOD.**

8 HIGHLIGHTS OF 2018

THANKS TO YOU, LLS HAS:

FUNDRAISING



RAISED THE BAR FOR PEER-TO-PEER FUNDRAISING

Together, participants across all of our campaigns helped us raise a record-breaking total of more than \$250 million. Our powerful Light The Night campaign is now the fifth largest peer-to-peer fundraising program in America.

ENGAGED THE NEXT GENERATION OF PHILANTHROPIC LEADERS

Through LLS's newest innovation in fundraising, Students of the Year, more than 600 motivated high school student teams raised significant funds for our mission.

RESEARCH



ADVANCED NEW TREATMENTS FOR PATIENTS WITH CANCER

LLS helped advance 34 of the 39 blood cancer treatments approved by the U.S. Food and Drug Administration (FDA) since 2017.

FUNDED THE MOST VISIONARY CANCER RESEARCH WORLDWIDE

Our \$188 million multi-year research commitment spans the most promising science across all blood cancers, including immunotherapy, genomics and personalized medicine.

SUPPORT & EDUCATION



EXPANDED CLINICAL TRIAL EDUCATION AND ENROLLMENT

LLS Information Specialists responded to nearly 20,000 inquiries from patients and caregivers, including inquiries about clinical trials. LLS Clinical Trial Support Center (CTSC) nurses provided 562 patients with in-depth clinical trial navigation and support – up 65 percent from 2017.

PROVIDED DIRECT SUPPORT TO PATIENTS IMPACTED BY NATURAL DISASTERS

We committed up to \$1 million in aid to support blood cancer patients impacted by Hurricanes Harvey, Irma and Maria and California wildfires.

POLICY & ADVOCACY



MADE OUR VOICES HEARD ON BEHALF OF CANCER PATIENTS AND SURVIVORS

More than 100,000 volunteer advocates across the country acted as a powerful voice for cancer patients and survivors to influence change at the state and federal level.

ACHIEVED A MAJOR WIN FOR DEDICATED PEDIATRIC CANCER RESEARCH

Our Office of Public Policy, along with LLS volunteer advocates, sent thousands of letters to help pass into law The Childhood Cancer Survivorship, Treatment, Access, and Research (STAR) Act, the most comprehensive federal childhood cancer legislation ever introduced.

OUR MISSION

At LLS, our mission is to cure leukemia, lymphoma, Hodgkin's disease and myeloma, and improve the quality of life of patients and their families.

As the world's largest nonprofit dedicated to fighting blood cancers, our work has helped millions impacted by cancer. Though LLS is known for funding groundbreaking research to find better treatments and cures, we do so much more. We provide free information, education and support services for those who are newly diagnosed and those living with their disease. We fight for lifesaving policy changes at the state and federal level to ensure access to quality, affordable, coordinated care.

We are committed to working tirelessly toward our mission every single day, until we find cures.



Dr. Gwen Nichols

Chief Medical Officer
The Leukemia & Lymphoma Society

RESEARCH

Contributing to nearly every advancement in blood cancer treatment in recent decades, LLS is the largest nonprofit funder of cutting-edge blood cancer research to advance cures.

In fact, we have invested more than \$1.2 billion in cancer research since we started in 1949, leading to breakthroughs in immunotherapy, genomics and personalized medicine that are improving and saving the lives of patients.



Jessica, Cancer Survivor

INVESTING IN GROUNDBREAKING CANCER RESEARCH

Our robust research portfolio supports the careers of next-generation scientists, advances research in areas of urgent, unmet medical need, and drives forward lifesaving discoveries through impactful collaborations.



Since 1949, The Leukemia & Lymphoma Society (LLS) has invested more than \$1.2 billion in cutting-edge cancer research, funding nearly all of today's most promising treatments and bringing us closer to cures. We support the most outstanding scientists and physicians around the world.

RESEARCH IN NUMBERS

In 2018, we supported more than 235 research grants and 20 Therapy Acceleration Program® (TAP) partnerships, a \$188 million multi-year commitment.

This year, LLS dedicated \$46 million to support scientific grants, including 87 new grants awarded in 2018 alone to researchers across nine countries, making us the largest nonprofit funder of blood cancer research. We invest in pioneering researchers whose work runs the gamut from basic, laboratory-based science to large-scale clinical trials, and many of our grants sustain their projects over multiple years.

Through TAP, we partner directly with biotechnology companies and renowned academic centers to help accelerate the development of promising therapies. This year, we invested \$6.4 million of our 2018 research budget in our TAP program. Now in its eleventh year, TAP is currently supporting 20 partnerships.

While incredible progress has been made, challenges remain. More than one-third of blood cancer patients still do not survive five years after their diagnosis. By funding the most innovative research, we will achieve breakthroughs faster for patients who urgently need them.

SPOTLIGHT ON TAP

In the past year, LLS's Therapy Acceleration Program® (TAP) achieved an important milestone when three therapies were approved by the U.S. Food and Drug Administration (FDA) to treat blood cancers with high unmet medical need. What's more, two of these therapies are now approved for use in the European Union – highlighting the global impact that we are making in the fight against cancer.

- **CPX-351 (Vyxeos™)**, funded by TAP since 2009, was approved for the treatment of patients with certain types of high-risk acute myeloid leukemia (AML).
- **axicabtagene ciloleucel (Yescarta®)**, funded by TAP since 2015, became the first FDA-approved CAR (chimeric antigen receptor) T-cell immunotherapy for patients with certain types of non-Hodgkin lymphoma.
- **tagraxofusp (Elzonris™)**, funded by TAP since 2013, became the first FDA-approved treatment for adults and pediatric patients age two or older with blastic plasmacytoid dendritic cell neoplasm (BPDCN), a particularly aggressive and rare disease.



WE ARE ELEVATING THE GAME CHANGING FIELD OF IMMUNOTHERAPY TO NEW HEIGHTS

Recognizing the tremendous potential of immunotherapy, LLS was an early supporter of research in the field and has played a pivotal role in driving its development.

From CAR (chimeric antigen receptor) T-cell immunotherapy and cancer vaccines to monoclonal antibodies, LLS is committed to advancing the next generation of these groundbreaking therapies to improve the lives of patients.

ERIC SMITH, MD, PHD

Eric Smith, MD, PhD, Memorial Sloan Kettering Cancer Center (MSKCC), is focused on optimizing CAR T-cell immunotherapy for myeloma. Despite recent advances, almost all patients experience relapse or treatment resistance. To address this, Dr. Smith is engineering CAR T-cells to attack a protein called BCMA (B-cell maturation antigen), found on the surface of myeloma cells. Dr. Smith is part of a larger initiative at MSKCC under the guidance of Anas Younes, MD, Michel Sadelain MD, PhD and Renier Brentjens, MD, PhD to apply the latest CAR T-cell technology across many different blood cancers.

FORTY SEVEN, INC.

Forty Seven, Inc., a Silicon Valley biotech startup in our TAP portfolio, is working on a promising experimental immunotherapy for patients with some types of lymphoma, acute myeloid leukemia (AML) and solid tumors. The therapy works by disarming a protein that emits a “don’t eat me” signal. Under normal conditions, the cancer cells would evade destruction, but in the presence of an antibody, immune cells ingest and destroy tumor cells. The program grew out of grants funded by LLS at Stanford University.

SHANNON ODA, PhD

Shannon Oda, PhD, Fred Hutchinson Cancer Research Center, is focused on enhancing T-cell immunotherapy for AML by studying how to overcome the obstacles that make some patients resistant to the treatment.

ROBERT ORLOWSKI, MD, PhD

Robert Orłowski, MD, PhD, University of Texas MD Anderson Cancer Center, is leading a world-class team of researchers to develop new immunotherapeutic and targeted approaches for the treatment of patients with high-risk subtypes of myeloma.



“I am grateful to LLS for funding my research and also providing opportunities to meet patients and hear their stories. The work done by this organization is truly inspiring and I am proud to contribute to the research toward better blood cancer therapies.”

DR. SHANNON ODA

EMILY



A groundbreaking immunotherapy saves young mother's life

Emily, a 32-year-old mother of three young children, was diagnosed with non-Hodgkin lymphoma in August 2013. After a whirlwind of intense treatments over the next two years including chemotherapy, a stem cell transplant and months of hospitalization, Emily relapsed soon after each treatment. In April 2015, Emily was given a devastating prognosis – doctors said she had six months to live. But then Emily received a glimmer of hope when doctors told her of a potential new treatment. In July 2015, Emily became the third patient in the world enrolled in Kite Pharma's clinical trial for a lifesaving treatment called CAR T-cell immunotherapy that was made possible by LLS funding. The revolutionary therapy was a success – Emily has been in remission for more than three years! Today, she enjoys spending time with her family, and has been working with LLS to raise awareness about blood cancers and raise funds for groundbreaking research so other mothers do not experience what she did.

WE ARE OUTSMARTING CANCER WITH PRECISION MEDICINE

Cancer is not a one-size-fits-all disease.

By supporting advanced genomics and molecular research, we are ushering in a new era of cancer treatment that centers on giving the right treatment to the right patient at the right time.

TIMOTHY LEY, MD

Timothy Ley, MD, Washington University School of Medicine, who led the team that sequenced the first cancer genome, is using genomic technology to identify genetic markers that can predict which patients with acute myeloid leukemia (AML) are more likely to relapse, with the goal of developing new approaches to target these mutations.

STEPHEN NIMER, MD

Stephen Nimer, MD, Sylvester Comprehensive Cancer Center, University of Miami, is driving a collaborative effort focused on advancing knowledge of the small chemical changes that regulate gene behavior. Dr. Nimer and his team are studying how to target epigenetic abnormalities to develop new therapies for AML, myelodysplastic syndromes (MDS) and myeloproliferative neoplasms (MPN).

ANDREAS STRASSER, PhD, MSc, FAA

Andreas Strasser, PhD, MSc, FAA, Walter and Eliza Hall Institute of Medical Research in Australia, is leading an ambitious project centered on apoptosis, the normal process that causes impaired cells to self-destruct. The team is testing new approaches to boost apoptosis in leukemia, lymphoma and myeloma and was instrumental in developing the first approved apoptosis-targeted therapy, called venetoclax, for use in chronic lymphocytic leukemia (CLL) and, more recently, for elderly patients with acute myeloid leukemia (AML).

CONSTANTINE MITSIADES, MD, PhD

Constantine Mitsiades, MD, PhD, Dana-Farber Cancer Institute, is applying cutting-edge CRISPR/Cas9 genome editing technology to the study of myeloma. Dr. Mitsiades and his team aim to characterize which genes play an essential role in the survival and growth of myeloma cells, with the goal of uncovering new therapeutic targets to optimize treatment.



“Our team of researchers and clinicians are grateful to The Leukemia & Lymphoma Society for their continued support. The generous and long-term funding from LLS has permitted us to pursue broad-ranging research underpinning new therapies for cancer.”

DR. ANDREAS STRASSER

WE ARE IMPROVING CARE AND CURES FOR CHILDREN WITH BLOOD CANCERS

Dedicated pediatric cancer research is needed urgently to understand these diseases, improve care and evaluate the long-term impact of treatment.

To this end, LLS is committed to accelerating the most impactful pediatric cancer research. This is just one part of our multi-pronged approach to address the unique needs of pediatric patients, which also includes education and support services for children and their families and advocacy efforts to increase pediatric cancer research funding.

BARBARA SAVOLDO, MD, PhD

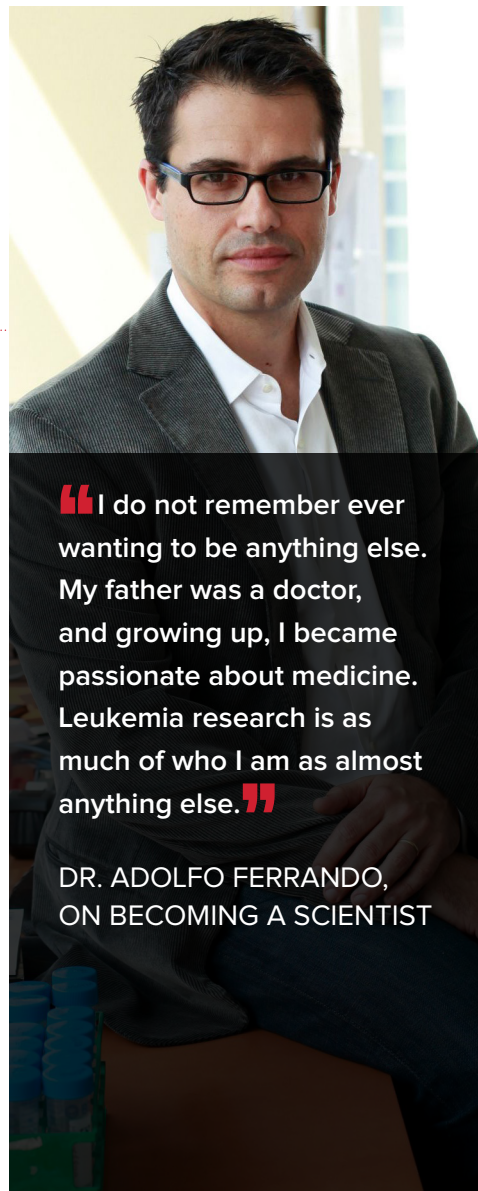
Barbara Savoldo, MD, PhD, University of North Carolina Lineberger Comprehensive Cancer Center, is developing an experimental CAR T-cell immunotherapy for acute lymphoblastic leukemia (ALL), the most common cancer in children, that would include a built-in “safety switch” to help safeguard against potential side effects of the treatment.

ADOLFO FERRANDO, MD, PhD

Adolfo Ferrando, MD, PhD, Columbia University Medical Center, is studying the genetic mutations responsible for pediatric ALL, particularly those that cause resistance to commonly used chemotherapies. For the 15-20 percent of children whose disease relapses, new treatments are desperately needed. Dr. Ferrando is advancing critical knowledge of the mechanisms of resistance, paving the way for more precisely targeted therapies.

SOHEIL MESHINCHI, MD, PhD

Soheil Meshinchi, MD, PhD, Fred Hutchinson Cancer Research Center, is working to expand knowledge of genomic characteristics that are unique to pediatric acute myeloid leukemia (AML), one of the most challenging childhood cancers to treat. His team has identified a potential biomarker for pediatric AML called mesothelin – opening the door to new targeted therapies for young patients with relapsed disease.



“I do not remember ever wanting to be anything else. My father was a doctor, and growing up, I became passionate about medicine. Leukemia research is as much of who I am as almost anything else.”

**DR. ADOLFO FERRANDO,
ON BECOMING A SCIENTIST**

KAITLYN



Diagnosed with leukemia as an infant, 8-year-old Kaitlyn is cancer free

Eight-year-old Kaitlyn has had to deal with cancer for most of her young life. In fact, she was only 18 months old when she was diagnosed with acute lymphoblastic leukemia (ALL). Throughout all of her treatments, doctors' visits and hospital stays, Kaitlyn was her brave and positive self, and continued to pursue her passion for cheerleading and dancing. "As a parent, if your child is scared, you want to be the one they reach for. You're conditioned to think that you're the brave one," says her father, James. "But, when your kid touches your hand in that moment of fear and comforts you, you realize that they are the reason you're strong." After three years, chemotherapy stopped working for Kaitlyn. That's when her doctor recommended a clinical trial for a revolutionary CAR T-cell immunotherapy, which LLS invested in for over two decades. In February 2015, Kaitlyn and her parents traveled nearly 1,500 miles from their home in Texas to Children's Hospital of Philadelphia (CHOP) in Pennsylvania, where she received the lifesaving treatment. Today, the third grader is cancer free, and back to cheerleading.

WE ARE INVESTING IN PIONEERING PREVENTION RESEARCH

Today, there are no means of preventing blood cancers, but thanks to advancements in genomics and our rapidly growing understanding of the biology of cancer, LLS plans to change this.

Early detection of cancers in people before they develop blood cancer or after they have achieved remission will lead to earlier interventions.

LUCY GODLEY, MD, PhD

Lucy Godley, MD, PhD, The University of Chicago, is working to uncover the pathways that drive disease development in cancer-prone families. Once considered extremely rare, inherited forms of leukemia and lymphoma are much more common than previously thought. Discovery of these pathways will allow researchers to devise strategies to delay cancer progression or prevent it altogether.

IRENE GHOBRIAL, MD

Irene Ghobrial, MD, Dana-Farber Cancer Institute, is focused on transforming the treatment of myeloma through the early detection of precursor blood conditions. Dr. Ghobrial has received numerous LLS grants throughout her career as well as funding through TAP to support her visionary research on treatment strategies that can prevent these conditions from progressing to more serious cancers.

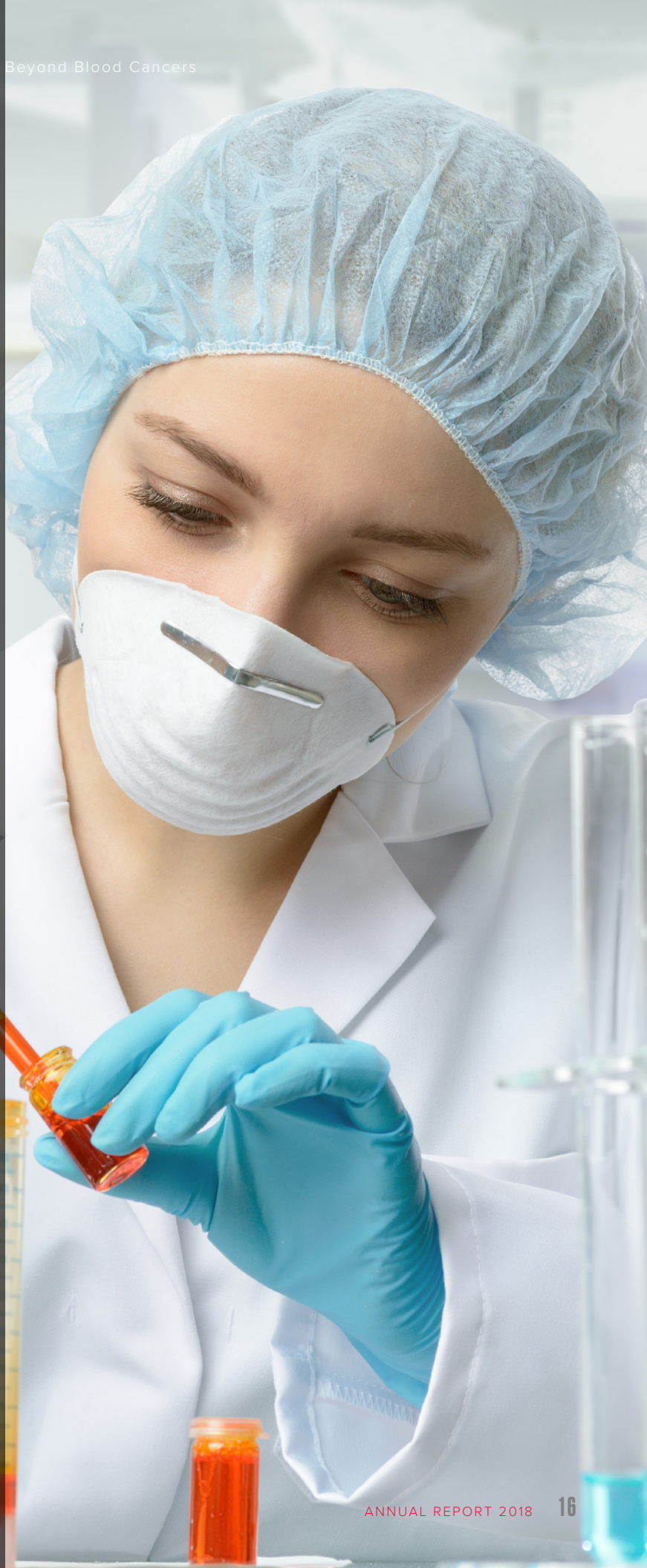


“What makes LLS so unique is that they really think about the impact of research on patient care. We work closely with LLS to develop and expand our ideas, and LLS helps bring our work from the lab to the clinic. This makes a difference for patients every day. With support from LLS, I was able to open a clinic for patients with precursor conditions of myeloma”

DR. IRENE GHOBRIAL

DRIVING IMPACT BEYOND BLOOD CANCERS

Our support of innovative blood cancer research is breaking new ground in the fight against cancer. For example, we helped pioneer CAR T-cell immunotherapy, a game changing treatment approach now being tested in more than 500 clinical trials for other cancers. The Leukemia & Lymphoma Society (LLS) is at the forefront of the fight to cure cancer.



BLOOD CANCER RESEARCH LEADS THE WAY

Lifesaving breakthroughs—from precision medicine to immunotherapies—have emerged from researching cancer cells in the blood, which are easier to access and study than those in solid tumors. Many pivotal discoveries have originated from LLS-funded research, and these game changing insights and treatment approaches are now helping patients with other cancers and diseases.



1940s - 1950s

Chemotherapy, medicine used to kill cancer cells, was established first for leukemia, and later used to treat other cancers.



1970s - 1980s

The 70s brought an early understanding of genomics, which is the study of genes and their functions, laying the groundwork for precision medicine approaches to treatment.



1990s - 2000s

The 1990s saw the first FDA approval of a revolutionary targeted therapy to treat leukemia. Imatinib (Gleevec®) was the first drug to target the kinase enzyme. Today, 40+ kinase inhibitors are approved to treat other cancers.



2000s - 2020s

LLS played an instrumental role in advancing immunotherapy. In 2017, two CAR T-cell immunotherapies were FDA approved for blood cancers. This game changing approach is now being tested in more than 500 clinical trials for other cancers.

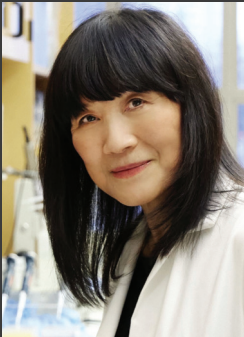
> [DOWNLOAD FULL INFOGRAPHIC HERE](#)

BREAKTHROUGHS



BENJAMIN EBERT, MD, PhD

Dana-Farber Cancer Institute, uncovered that mutations in blood cells of otherwise normal, healthy individuals are associated with a higher probability of developing blood cancers later in life. Dr. Ebert's research went even deeper: his lab was the first to demonstrate that these mutations are also associated with the development of cardiovascular disease. The discovery opens up the possibility of preventative medicine to identify people at risk of developing disease years before it occurs and ultimately, devise treatment strategies to mitigate the risk.



SELINA CHEN-KIANG, PhD

Weill Cornell Medicine, discovered an innovative treatment approach that is helping both blood and breast cancer patients. While her work is focused on myeloma and lymphoma, Dr. Chen-Kiang's discovery that a targeted therapy was effective in blocking an enzyme responsible for the division and proliferation of cancer cells, helped lead the way to that therapy, palbociclib, receiving approval from the U.S. Food and Drug Administration (FDA) in 2015 for breast cancer. With LLS support, Dr. Chen-Kiang is leading a cutting-edge research team to test palbociclib's effectiveness in treating patients with mantle cell lymphoma (MCL).



RON LEVY, MD

Stanford University, pioneered a treatment approach that uses the body's immune system to develop antibodies against invading tumor cells. His foundational work resulted in the FDA approval of the first monoclonal antibody to treat cancer, rituximab, in 1997, which is now used to treat many lymphomas and rheumatoid arthritis. Today, Dr. Levy is moving immunotherapy in a bold direction. With support from LLS's Therapy Acceleration Program (TAP), he is testing an experimental, immune-boosting vaccine among patients with lymphoma – an approach that also shows promise for breast, colon and melanoma cancers.

REVOLUTIONARY APPROACHES FOR BLOOD CANCER ARE NOW BEING TESTED IN CLINICAL TRIALS

WITH OTHER
CANCERS AND
DISEASES,
INCLUDING:

**BONE CANCER
BRAIN CANCER
BREAST CANCER
DIABETES
KIDNEY CANCER
LIVER CANCER
LUNG CANCER
LUPUS NEPHRITIS
MELANOMA
MULTIPLE SCLEROSIS
OVARIAN CANCER
PANCREATIC CANCER
PROSTATE CANCER
RHEUMATOID ARTHRITIS
STOMACH CANCER
SKIN CANCER**

VALERIE



A dedicated LLS volunteer benefits from a therapy first approved for blood cancer

Valerie was in college when her father was diagnosed with an aggressive form of chronic lymphocytic leukemia (CLL) in 2005. When Valerie learned about Team In Training® (TNT), she felt inspired to take action and raise funds, and made many new friends along the way. Sadly, her father passed away in 2009. After losing her father, Valerie became even more committed to making a difference. She continued to volunteer through LLS's Palm Beach Area Chapter and in 2010, she won Palm Beach Woman of the Year after an intense 10-week fundraising campaign. Then, five years ago, Valerie was diagnosed with multiple sclerosis. She was prescribed alemtuzumab – the same treatment that her father had taken for CLL. This targeted therapy, first approved by the FDA to treat patients with CLL in 2001, is also approved for patients with multiple sclerosis who have relapsed after previous treatment. Today, Valerie is doing well and still runs marathons. She is dedicated to helping cancer patients through her volunteer work with LLS and her career as a hematology/ oncology physician assistant.

BRINGING PRECISION MEDICINE TO AML PATIENTS

Our Beat AML® Master Clinical Trial is revolutionizing acute myeloid leukemia (AML) treatment. To date, we've enrolled more than 400 patients.



GOING ON THE OFFENSIVE AGAINST ACUTE MYELOID LEUKEMIA

Acute myeloid leukemia (AML) is one of the most lethal blood cancers that takes more than 10,000 lives in the U.S. each year.

While therapies for other blood cancers have made remarkable leaps forward, the standard of care for AML – a combination of toxic chemotherapies – has changed very little over the past four decades. Until now.

Advancements in genomics and precision medicine are fueling a renaissance in AML research.

Today, we know that AML is not a single disease, but rather a group of more than 10 subtypes and other rare mutations. Once an elusive enemy, researchers are now able to identify and target these specific subtypes, and nine new therapies – all advanced with LLS support – have been added to our arsenal in the past two years, following approval from the U.S. Food and Drug Administration (FDA).

Still, much work remains. Only about one in four AML patients survives five years after diagnosis. LLS is leading the charge against AML through the Beat AML® Master Clinical Trial, a collaborative clinical trial that aims to change the paradigm of treatment through a precision medicine approach.

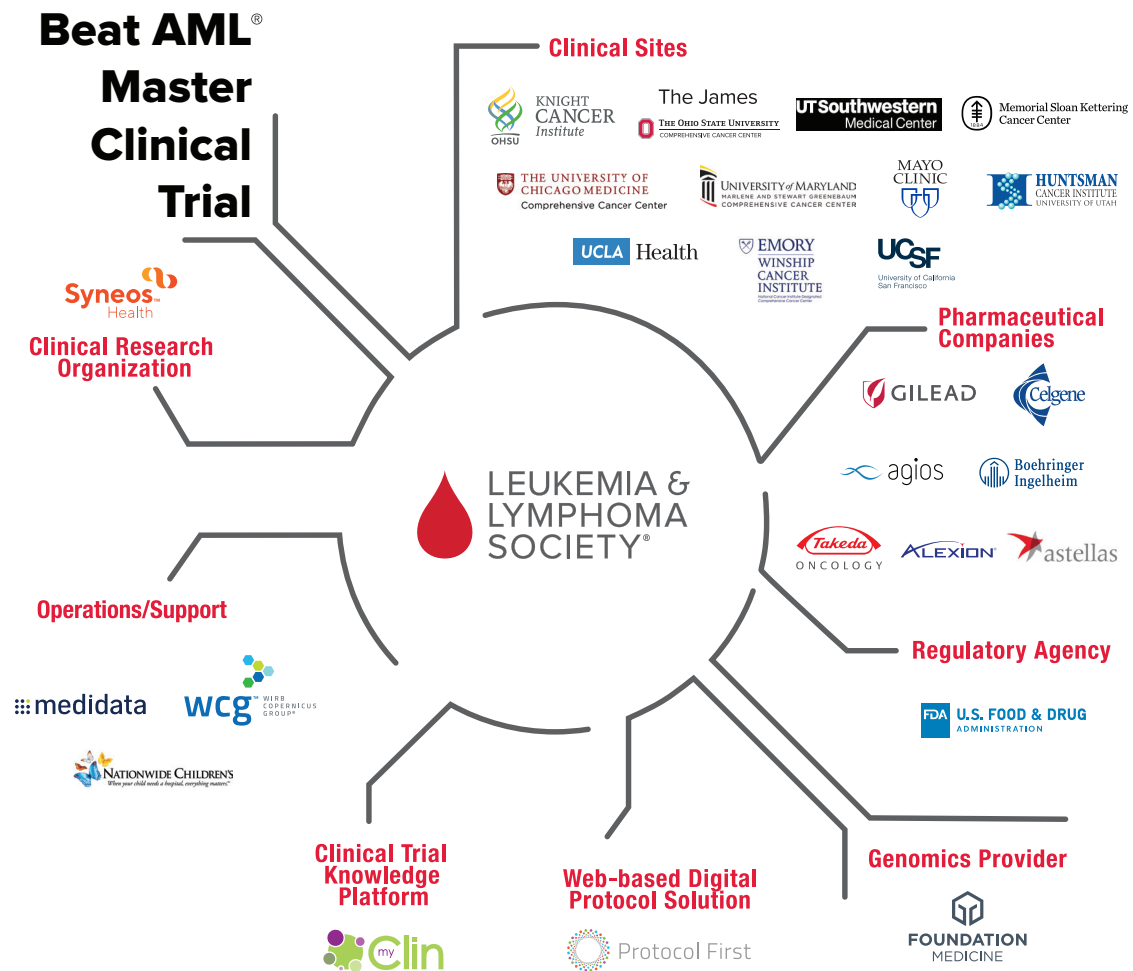
HOW IS THE BEAT AML® MASTER CLINICAL TRIAL TRANSFORMING AML TREATMENT?

The Beat AML® Master Clinical Trial is the first collaborative precision medicine clinical trial in a blood cancer. The trial uses advanced genomic technology to identify each patient's cancer-driving genetic mutations, and then matches patients to the most promising, targeted treatment. While a typical clinical trial studies one drug or one combination of drugs, we are testing multiple therapies in multiple study arms simultaneously. This Master Trial protocol—developed with guidance from the FDA—not only has the power to bring new therapies to AML patients faster, but also has the potential to stand as a model for future clinical trials for other cancers.



LLS IS LEADING THE CHARGE AGAINST AML

LLS is bringing together the best and brightest minds across the cancer ecosystem, including three world-renowned scientists who are leading the trial: Brian Druker, MD, The Knight Cancer Institute at Oregon Health & Science University; John Byrd, MD, The Ohio State University Comprehensive Cancer Center; and Ross Levine, MD, Memorial Sloan Kettering Cancer Center. Additionally, multiple pharmaceutical companies, prominent scientists at top cancer centers, several technology companies and the FDA join us in a shared commitment to bring the promise of precision medicine to AML patients.



WHY IS THE BEAT AML® MASTER CLINICAL TRIAL SO GROUNDBREAKING?

To bring new and better treatments to AML patients in urgent need, we need to think and act boldly.

A FIRST FOR LLS:

Given our leadership in AML research – one-quarter of our annual research funding is dedicated to AML – as well as our commitment to putting patients at the forefront, LLS is uniquely qualified to drive this powerful collaboration. In fact, LLS is the first nonprofit health organization to sponsor a cancer clinical trial.

A FOCUS ON NEWLY DIAGNOSED PATIENTS:

Most AML clinical trials center on patients who have relapsed or not responded to other treatments. This trial focuses on newly diagnosed, untreated patients aged 60 or older – allowing researchers to identify genetic mutations early and offering a better chance for successful treatment.

AN UNPRECEDENTED GENOMIC SCREENING TURNAROUND:

Because AML progresses so quickly, patients need to be treated based on their particular subtype right away. For this trial, advanced genomic screening is being completed within seven days, an unparalleled timeframe.

WHAT DID THE BEAT AML® MASTER CLINICAL TRIAL ACHIEVE IN 2018?

The Beat AML® Master Clinical Trial continued to exceed expectations in 2018 as more patients and collaborators joined the fold.

More than 400 patients are enrolled in over 10 study arms at more than a dozen prestigious cancer centers across the country, including UCLA Health, Huntsman Cancer Institute at the University of Utah and Winship Cancer Institute of Emory University. More than six pharmaceutical companies are providing their innovative investigational therapies. The trial continues to gain momentum, with the goal of enrolling 1,000 patients at 15-20 cancer centers.

THANKS TO OUR BEAT AML[®] SUPPORTERS

\$10 million+:

Harry T. Mangurian, Jr. Foundation

\$1 million - \$9,999,999:

Babich Family Foundation

Cynthia and Frank Gasztonyi Trust

Donald Porteous

Drenda Vijuk

\$500,000 - \$999,999:

Pamela B. Katten Memorial

Leukemia Research Foundation

Norcross Foundation

Mr. and Mrs. James F. Palmer

Clyde S. McGregor and

Leane Pedersen Pope

Team b.strong

POWERING OUR ATTACK AGAINST AML

Turning loss into action, The Harry T. Mangurian Jr. Foundation continues to fuel LLS's ambitious attack. Mr. Mangurian, a philanthropist who once owned the Boston Celtics and was a renowned horse breeder, lost his battle with AML in 2008. The Foundation, which previously donated \$9 million to support LLS's Beat AML initiatives, committed an additional \$10 million in 2018 to help LLS push its pursuit of AML cures further. "We recognize that LLS is uniquely positioned among cancer organizations to actually make a difference in AML, and we are hopeful that our support of this wonderful organization will help speed new treatments and cures for the thousands of patients battling this horrible disease. In honor of our founder, Harry T. Mangurian Jr., we must find cures," says Stephen G. Mehallis, president of the Mangurian Foundation.



JOHN



IN MEMORY

JOHN KELLENYI 1947-2017

We proudly recognize John Kellenyi, generous, longtime supporter and Beat AML Campaign co-chair, for his leadership, compassion and commitment.

ADVANCING NEW LIFESAVING THERAPIES

LLS Helped Advance 19 of the 21 Blood Cancer Treatments Approved by the U.S. Food & Drug Administration (FDA) This Year.

Our sustained research investment is helping to save and improve the lives of patients. This year, the U.S. Food and Drug Administration (FDA) approved 21 treatment options for patients who urgently needed them. What's more, LLS helped advance 19 of these advancements.

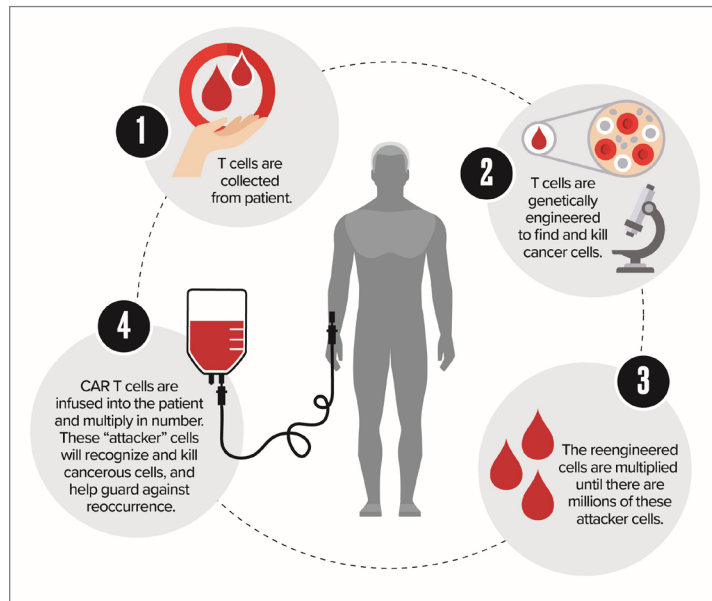
CAR T-CELL IMMUNOTHERAPY CONTINUES TO SHOW PROMISE

In 2017, we witnessed an historic victory for cancer patients when two revolutionary CAR (chimeric antigen receptor) T-cell immunotherapies were approved by the FDA, ushering in a new era in the treatment of cancer. This game changing approach involves genetically reprogramming a patient's own immune cells to find and attack cancer cells. LLS supported the development of both therapies, which mark incredible progress for patients who have otherwise run out of treatment options: tisagenlecleucel (Kymriah®) for children and young adults with acute lymphoblastic leukemia (ALL) and axicabtagene ciloleucel (Yescarta®) for adults with several types of non-Hodgkin lymphoma.

In 2018, the FDA granted tisagenlecleucel (Kymriah®) its second approval, bringing a new treatment option to patients with relapsed or refractory diffuse large B-cell lymphoma (DLBCL), a particularly aggressive disease. In fact, only about half of the 27,000 newly diagnosed patients in the U.S. each year will achieve long-lasting disease control.

Over the past two decades, LLS has invested more than \$40 million in research at multiple institutions to advance CAR T-cell therapy for blood cancer – paving the way for research applications for solid tumors, such as cancers of the lung, breast, colon and prostate.

LLS-funded research is making a global impact on the lives of patients: both CAR T-cell therapies are now approved for use in the European Union. We continue to invest in the most innovative science worldwide to make CAR T-cell therapies safer and more effective for more patients and easier to produce.



[> DOWNLOAD FULL INFOGRAPHIC HERE](#)

ADVANCEMENTS IN PRECISION MEDICINE FOR ACUTE MYELOID LEUKEMIA

Precision medicine centers on giving the right treatment to the right patient at the right time based on their genetic information and other characteristics. We are beginning to crack the code to apply precision medicine to acute myeloid leukemia (AML), one of the most daunting challenges in the blood cancers.

Each year, about 20,000 Americans are diagnosed with AML, and half of these patients are expected to have exceptionally poor outcomes. Standard treatment has typically involved intensive chemotherapy, followed by a stem cell transplant in some cases. But this approach fails most patients, the majority of whom are older adults who cannot tolerate the intensity of treatment. With more than one-quarter of our research budget invested in AML, LLS is leading the charge to address this urgent, unmet need. Our work is paying off. Researchers are now able to home in on specific genetic drivers of the disease – opening the door to a more personalized approach to treatment.

In 2018 alone, the FDA approved five new treatments for AML, and LLS helped advance all of these somewhere along their development journey:

- **ivosidenib (Tibsovo®)**, a new targeted therapy, was approved for patients with relapsed or refractory AML who have a certain genetic mutation called IDH1.
- **arsenic trioxide (Trisenox®)**, an existing drug, was approved in combination with chemotherapy for newly diagnosed adult patients with low-risk acute promyelocytic leukemia (APL).
- **glasdegib (Daurismo®)**, a new therapy, has been approved in combination with chemotherapy for the treatment of newly diagnosed adult patients with AML who are age 75 or older or who have other chronic health conditions or diseases that might preclude the use of intensive chemotherapy. The therapy targets a cell signaling pathway called Hedgehog, which is critical for the development of immature cells into cells with more specialized functions.
- **venetoclax (Venclexta®)**, an existing therapy, is now approved in combination with chemotherapy, for the treatment of newly diagnosed adult patients with AML who are age 75 or older or who have other chronic health conditions or diseases that might preclude the use of intensive chemotherapy.
- **gilteritinib (Xospata®)**, a new therapy, was approved for patients with relapsed or refractory AML, who have a genetic mutation called FLT3, which is seen in about one-third of AML patients.

Further, our groundbreaking precision medicine Beat AML® Master Clinical Trial is testing ivosidenib and gilteritinib as first-line treatments for newly diagnosed patients. We continue to fund the most promising AML research, and we provide education and support to patients and caregivers. After four decades and millions of dollars invested, we are seeing results for AML patients that give us a real reason for optimism.

DUSTIN



A cancer survivor reflects on marriage after cancer

Dustin was supposed to get married on December 3, 2016, but cancer turned his life upside down. Six days before his wedding, 31-year-old Dustin was diagnosed with acute promyelocytic leukemia (APL). Dustin and his fiancée, KT, stayed at the hospital for 33 days, where he underwent medical tests and began treatment. The couple canceled their wedding, and navigated finances and other aspects of their relationship while Dustin underwent eight months of chemotherapy. When Dustin and KT got married on May 7, 2017, their special day was even more meaningful. “Getting through a little bit of the worse together means appreciating the better even more,” they say. Today, Dustin is cancer free and credits research funded through LLS for saving his life. Because of advances in diagnosis and treatment, APL has been transformed from the most fatal to the most curable form of acute leukemia in adults.

IMPORTANT PROGRESS FOR ULTRA-RARE DISEASES

Ultra-rare diseases represent fewer than 1,000 cases in the U.S. per year. While the numbers are relatively small, the impact of these diseases is devastating for patients and their families. Many ultra-rare cancers are difficult to diagnose and remain incurable, and approved treatment options might not exist in some cases. Recent advancements in personalized medicine are driving more opportunities to bring much needed treatment breakthroughs to patients with ultra-rare diseases, including:

- **Tagraxofusp (Elzonris™)** a new treatment, was approved for adults and pediatric patients age two or older with blastic plasmacytoid dendritic cell neoplasm (BPDCN), an aggressive, deadly disease that lacked a standard of care. LLS sponsored clinical trials for this novel targeted therapy through our Therapy Acceleration Program (TAP).
- **Nilotinib (Tasigna®)**, an existing therapy, was approved to treat children with a rare type of chronic myeloid leukemia (CML) in chronic phase. CML is rare in children, accounting for only about 3.1 percent of new cases of leukemia in children and young adults younger than 20 years.
- **Mogamulizumab-kpkc (Poteligeo®)**, a new therapy, was approved for two rare types of cutaneous T-cell lymphoma: mycosis fungoides (MF) and Sézary syndrome (SS), giving MF patients a new treatment option and marking the first FDA approval of a drug specifically for SS.
- **Moxetumomab pasudotox (Lumoxiti®)**, a new, first-in-class immunotoxin, was approved for patients with relapsed or refractory hairy cell leukemia (HCL), a rare, incurable, slow-growing disease. While many patients initially respond to previously approved treatment, up to 40 percent relapse, underscoring the need for more innovative therapies.





2018 FDA APPROVALS FOR BLOOD CANCERS

LLS Helped Advance 19 of the 21 Blood Cancer Treatments Approved by the FDA in 2018

Acute Lymphoblastic Leukemia	Acute Myeloid Leukemia	Other Leukemias	Hodgkin Lymphoma	Non-Hodgkin Lymphoma	Myeloma	Other
<ul style="list-style-type: none"> calaspargase pegol-mknl* (Asparlas™) blinatumomab (Blincyto®) 	<ul style="list-style-type: none"> gilteritinib* (Xospata®) glasdegib* (Daurismo®) ivosidenib* (Tibsovo®) arsenic trioxide (Trisenox®) venetoclax (Venclexta®) 	<ul style="list-style-type: none"> duvelisib* (Copiktra™) approved for chronic lymphocytic leukemia (also approved for small cell lymphocytic lymphoma and follicular lymphoma) moxetumomab pasudotox* (Lumoxiti®) for hairy cell leukemia nilotinib (Tasigna®) for Ph+ pediatric chronic myeloid leukemia venetoclax (Venclexta®) for chronic lymphocytic leukemia (also approved for small cell lymphocytic lymphoma) 	<ul style="list-style-type: none"> brentuximab vedotin (Adcetris®) 	<ul style="list-style-type: none"> brentuximab vedotin (Adcetris®) ibrutinib (Imbruvica®) pembrolizumab (Keytruda®) tisagenlecleucel (Kymriah®) † mogamulizumab* (Poteligeo®) 	<ul style="list-style-type: none"> carfilzomib (Kyprolis®) daratumumab (Darzalex®) elotuzumab (Empliciti®) 	<ul style="list-style-type: none"> tagraxofusp* (Elzonris™) for blastic plasmacytoid dendritic cell neoplasm

🩸 Supported by The Leukemia & Lymphoma Society

* New therapy

† CAR T-cell immunotherapy

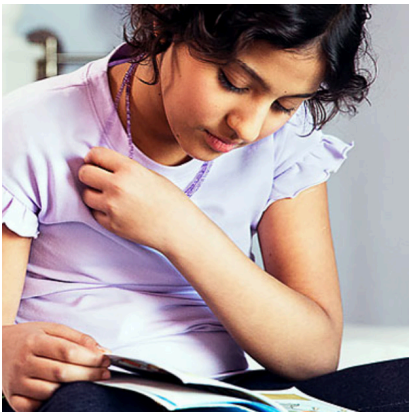
Note: all other therapies were approved as new indications, reformulations of other therapies, new dosing schedules or in combination with another therapy.

BEATING CANCER IS IN OUR BLOOD.

EDUCATION & SUPPORT

When someone experiences the fear and uncertainty of a cancer diagnosis, we provide hope, guidance, education and support.

This year alone, LLS Information Specialists responded to nearly 20,000 inquiries from patients and caregivers, guiding them to our wide array of education and support services.



Myrrah, leukemia survivor

Dealing with a cancer diagnosis, treatment or long-term survival issues can be overwhelming. Blood cancers are complex diseases, and treatment options are evolving at a faster pace than ever.

Each day, we hear from patients and their families about the unique challenges they face, from coping with side effects to determining how to cover the cost of their care.

We at LLS believe that no one should have to face cancer alone. LLS is the leading source of free blood cancer information, education and support for patients, survivors, caregivers, families and healthcare professionals. We are committed to patients and caregivers from the time of diagnosis and throughout their cancer experience, ensuring they have access to quality, affordable and coordinated care.

WE ARE REACHING MORE PATIENTS AND CAREGIVERS WHEN THEY NEED IT MOST

For more than 20 years, LLS Information Specialists have been on the front lines of helping patients and caregivers navigate their treatments and countless emotional, financial and social challenges.

This year alone, Information Specialists responded to nearly 20,000 inquiries, connecting with patients and caregivers one-on-one and guiding them to our wide array of support services that can help.

LLS Information Specialists are master's level oncology social workers, nurses and health educators who work with compassion to provide blood cancer patients and caregivers free personalized support, information and resources, tailored to their specific diagnosis and needs. They speak in-depth with caregivers and patients – many of them newly diagnosed – about their disease, clinical trials, financial resources, how to talk to their physicians and so much more. Information Specialists are ready to help by phone at **(800) 955-4572**, and live chat or email via **www.LLS.org**.



Meredith Barnhart

Director, Information Resource Center

Why is it so important to help patients and families soon after diagnosis?

A cancer diagnosis can bring a range of emotions and feel overwhelming. Patients and families are looking for answers, but might not know what questions to ask or where to start. By reaching patients and their loved ones soon after diagnosis, we can help them become active participants in their care, as they work with their healthcare teams to make the best decisions for them.

What was the most rewarding aspect of your work this year?

I'm inspired by the transformations I see, as patients who first connect with our Information Specialists evolve into "experts" who are truly part of the decision-making process with their healthcare teams. Through this transformation, many patients and family members go on to volunteer with LLS and provide hope to others.

What do you wish more people realized about LLS's efforts to help patients and families?

LLS is here for you and your loved ones throughout your cancer experience. We have so many resources that can help, and we're only a phone call away. And you can join our efforts – nearly 8,000 volunteers across the country provide direct support to patients and families in their communities, and this support makes all the difference.

WE ARE DEDICATED TO EXPANDING CLINICAL TRIAL EDUCATION AND ENROLLMENT

Survival rates for many blood cancer patients have doubled, tripled or even quadrupled since the 1960s, thanks to breakthroughs in cancer treatment that were made possible by clinical trials.

Enrolling in a clinical trial might be the best treatment option for certain patients. That's why LLS continues to expand our Clinical Trial Support Center (CTSC), in which specially trained nurses help patients find and enroll in clinical trials based on highly detailed, individualized assessments.

Together, our CTSC nurses and Information Specialists guide patients and caregivers through the clinical trial process, providing them with the information and support they need to overcome barriers to enrolling, including help with finances and lodging. This year, CTSC nurses provided 562 patients with in-depth clinical trial navigation and support – up an incredible 65 percent from 2017. Even more promising: three out of five patients who were assisted by the CTSC and medically eligible enrolled in an appropriate clinical trial.

By taking part in clinical trials, patients help advance our knowledge of cancer and pave the way for better care for future patients. Contact an Information Specialist at 800-955-4572 to learn more.



JOSH



An avid surfer returns to the board thanks to LLS's clinical trial support center

In 2010, Josh was with his wife on their honeymoon when he noticed a bean-sized lump on the back of his neck. After being misdiagnosed twice, Josh was diagnosed with follicular lymphoma (FL) at the age of 49. For several years, he was treated with an array of different therapy regimens. However, he continued to relapse and the FL ended up transforming into diffuse large B-cell lymphoma (DLBCL). With the help of LLS's Clinical Trial Support Center and his oncologist, Josh enrolled in a clinical trial for CAR T-cell immunotherapy in June 2016. Today, the 57-year-old professional photographer is cancer-free and remains an avid surfer. In addition to receiving help from LLS to enroll in this clinical trial, Josh later realized that LLS played an instrumental role in advancing his therapy, investing \$2.5 million in this innovative clinical trial. In fact, over the past two decades, LLS has provided \$40 million in funding to develop this revolutionary approach to treating cancer and history was made in 2017 when two LLS-funded CAR T-cell immunotherapies were approved by the U.S. Food and Drug Administration.

WE ARE MAKING AN IMPACT THROUGH TRUSTED EDUCATION RESOURCES AND PROGRAMS

The healthcare landscape is constantly changing. LLS recognizes that knowledge is power, so we offer a variety of educational resources and programs to help patients, caregivers and healthcare professionals stay informed and up to date. This year, LLS:

- Distributed more than 600,000 educational booklets and fact sheets about specific diseases.
- Educated over 130,000 patients, caregivers, healthcare professionals and others – a 44 percent increase over 2017 – through live web-based and local in-person programs.
- Convened 10 regional Blood Cancer Conferences with over 3,000 patients in attendance.
- Launched a new podcast, The Bloodline with LLS, which has reached more than 7,000 listeners and covered a range of topics that matter most to patients and caregivers, from cancer-related fatigue to communicating effectively with cancer care teams.

WE ARE CONNECTING PATIENTS AND FAMILIES TO CRITICAL SUPPORT

Personal connections and one-on-one support can make all the difference in the lives of cancer patients and their families.

As a voluntary, community-based health organization, we have regional and local chapters throughout the United States and Canada to reach patients and their families in every community. We also give patients and caregivers a comfortable, welcoming place to connect online through LLS Community, where they can find support, access the latest disease and treatment information and engage with trained LLS staff. LLS offers a variety of ways for patients and caregivers to find connections and support. This year, LLS:

- Connected 1,315 volunteers with patients and caregivers diagnosed with the same disease through LLS's *Patti Robinson Kaufmann First Connection Program*.
- Facilitated 113 support groups in local communities and online led by nurses and social workers.
- Reached more than 8,000 patients and caregivers through LLS Community, an online social network that provides education and support.

WE ARE BREAKING DOWN FINANCIAL BARRIERS TO CARE

We are dedicated to helping patients and families cope with the often insurmountable financial burden that cancer brings.

This year, about one-third of inquiries to LLS's Information Specialists were from patients with financial issues and questions. In addition to our advocacy efforts to fight the rising cost of cancer care, we provide programs, resources and financial assistance to help patients in need with cancer-related expenses. This year, LLS:

- Provided \$108 million in co-pay financial assistance supporting over 32,000 patients.
- Provided \$529,000 through our Susan Lang Pay-It-Forward Patient Travel Assistance Program, which provided 1,176 blood cancer patients with assistance for ground transportation, air travel, and lodging related expenses.
- Committed up to \$1 million in aid to support blood cancer patients impacted by natural disasters, including Hurricanes Harvey, Irma and Maria, as well as wild fires in California. As an organization that unapologetically puts patients at the forefront, LLS stepped in to help nearly 1,600 blood cancer patients and families in crisis, providing direct financial support for treatment-related travel, replacement medications and other needs.



BARBARA



After receiving LLS financial assistance, a cancer survivor gives back

When Barbara was diagnosed with chronic lymphocytic leukemia (CLL) at fifty years old in 1993, she faced serious financial burdens – she was unable to continue to work as a dietitian and could not afford the cost of her treatment. During that time, she reached out to LLS and received financial assistance through its Co-pay Assistance Program and Susan Lang Pay-It-Forward Patient Travel Assistance Program. After receiving immunotherapy and chemotherapy treatment, she went into remission in 2010. Today, she spends her time giving back as a longtime volunteer for LLS’s *Patti Robinson Kaufmann First Connection Program*, a peer-to-peer program that matches patients and their families with trained volunteers who have had similar experiences. Recently, she needed help again – and LLS was there for her. When Hurricane Irma hit her hometown of Orlando, Florida in 2017, she lost electricity in her apartment for several days, and the food in her fridge spoiled. She applied for LLS’s Hurricane Relief Program and received \$500 so she could re-stock her fridge with nutritious food. Barbara says she is extremely grateful that LLS has supported her many times throughout the years, and that’s why she continues to give back to LLS today.

WE ARE HELPING CANCER PATIENTS AND CAREGIVERS TAKE CARE OF THEMSELVES

Eating well during and after cancer treatment can help patients feel better, maintain their strength, avoid treatment delays and speed recovery.

Cancer changes patients' nutritional needs, and sorting through the vast amount of nutrition information online is a daunting task. To help cancer patients and caregivers find reliable nutrition advice and resources, LLS now offers free one-on-one nutrition consultations with a registered dietitian with expertise in oncology nutrition. This year, nearly 1,000 patients and caregivers received nutrition consultations.

Caregiving can be a demanding role, but is better managed with careful planning, good self-care and knowledge of available help. LLS is here to help. We offer a wide range of resources, information and support that help both patients and caregivers. If you are a caregiver, know that you are not alone – 29 percent of all inquiries to Information Specialists were from caregivers and more than 1,800 caregivers are on LLS Community to connect, share experiences and provide support, along with trained LLS staff. Whether you join a live, weekly online chat moderated by an oncology social worker, participate in an LLS Family Support Group in your community, or tune in to The Bloodline with LLS podcast, you can find the support that is right for you.



POLICY & ADVOCACY

Through our nationwide grassroots network of more than 100,000 volunteers, we advocate for policies at the state and federal level that accelerate new treatments and ensure patients have access to care, so that they can live longer, healthier lives.

This year, our efforts have helped to increase federal cancer research funds, speed the review and approval process for new therapies, and protect patient access to lifesaving treatments.



While advances in blood cancer therapies are having a dramatic impact on the way patients are treated, critical challenges remain.

At LLS, we work tirelessly to find cures, as well as to ensure patients have access to the lifesaving treatments they need. With more than 100,000 volunteer advocates across the country, we are making our voices heard on behalf of the 1.3 million blood cancer patients and survivors whom we serve. What's more, many of the policies for which we advocate at the state and federal level are beneficial for all cancer patients.

WE ARE MAKING PROGRESS TOWARD CURES

LLS works with Congress, the U.S. Food and Drug Administration (FDA) and other federal agencies to promote new medical discoveries and speed the development of new treatments and cures. This year, key highlights of our work included:

Achieving a major win for dedicated pediatric cancer research

LLS advocates sent more than 3,100 letters to members of Congress, raising their voices to make The Childhood Cancer Survivorship, Treatment, Access, and Research (STAR) Act a reality – the most comprehensive childhood cancer legislation ever introduced. After Congress unanimously passed this bill, the President signed the Childhood Cancer STAR Act into law in June. LLS actively supported this legislation, which will expand opportunities for childhood cancer research and survivorship programs and make a powerful impact on the lives of childhood cancer patients, survivors and their families.

Securing new funding for cancer research

LLS advocates sent more than 2,400 letters asking Congress to increase funding for critical cancer research at the National Institutes of Health (NIH). Thanks to this and other patient advocate groups' efforts, Congress allocated \$3 billion in new research funding, which will improve cancer patients' lives and bring us that much closer to cures.

Further, recognizing the importance of the Defense Department's innovative cancer research program, LLS took the lead in asking Congress to make blood cancer research a priority within this program. Congress listened to our request, increasing funding for this cancer research program by \$20 million—a 33 percent increase from last year—while also restoring “blood cancers” as a priority research focus in 2018.

Supporting patient-focused drug development

We continue to be a strong voice for cancer patients at the FDA, shining a light on the urgent realities they face. As cancer treatment becomes more personalized, understanding which elements of a potential treatment are most important to patients is vital. We presented the results of our National Acute Myeloid Leukemia (AML) Patient Preference Study to leadership at the FDA's Oncology Center of Excellence (OCE) to help inform the efforts of the FDA, pharmaceutical and biotech companies, and academic researchers to understand what really matters to patients as they pursue crucial drug development for AML.

MARK



A childhood cancer survivor becomes a powerful voice for patients and families

Mark was diagnosed with acute lymphoblastic leukemia when he was just two months old. As an infant, he endured intense treatment through a clinical trial and countless trips to the intensive care unit. Today, Mark is a healthy college student who is passionate about giving back and excelling at West Chester University of Pennsylvania. He openly shares his story, and visits young patients and their families in the hospital. Both Mark and his mother Jayne also volunteer with LLS through the Eastern Pennsylvania Chapter. In 2015, Mark won the coveted Student of the Year title at the chapter after raising \$62,000 for LLS in seven weeks. Most recently, in April 2018, Mark and Jayne attended the Alliance for Childhood Cancer Action Days in Washington D.C. to share the patient and caregiver perspective and advocate for important pediatric cancer issues before Congress, including the Childhood Cancer STAR Act. As a member of the Alliance for Childhood Cancer, LLS worked with Congress and community partners to advance this legislation – which was signed into law in May. The law will boost pediatric cancer research efforts, unlock new insights into childhood cancer through enhanced tracking and reporting and improve the quality of life for childhood cancer survivors like Mark.

LLS ADVOCATES TOOK ACTION

While legislators debated proposals that would roll back access to meaningful health insurance coverage, LLS advocated strongly at the state and federal level for guaranteed access to stable, quality, affordable coverage. LLS advocates took action by contacting federal and state policymakers:



WE ARE PROTECTING PATIENTS' ABILITY TO ACCESS THE TREATMENTS AND CARE THEY NEED

Cancer patients must have access to meaningful health insurance coverage. Their lives literally depend on it.

To this end, LLS advances solutions that uphold our core principles for meaningful coverage: guarantee access, promote affordability, ensure quality and encourage stability. This year, Congress and state policymakers debated proposals that would roll back access to meaningful health insurance coverage, including for low-income children and families enrolled in Medicaid. Throughout those debates, LLS advocated strongly at the state and federal level for guaranteed access to stable, quality, affordable coverage for the hundreds of thousands of blood cancer patients who would be impacted by these proposals.

ENSURING QUALITY INSURANCE COVERAGE

At LLS, we believe health insurance plans should meet minimum quality standards so that patients will have access to the care they need. Unfortunately, many plans fail to meet those standards.

Consider Sam's story. A small business owner, Sam attempted to upgrade his health insurance after seeing a chiropractor for undiagnosed back pain. He wanted to be able to better cover any potential medical care he might need. A few months later, he was diagnosed with cancer and immediately began treatment. Six months into treatment, his plan refused to cover any of these medical costs, saying that his cancer was a pre-existing condition. Sam was left to battle cancer with no meaningful insurance coverage and more than \$800,000 in medical debt.

As the federal government worked to finalize rules expanding the availability of the very type of plan Sam held – plans that lack many critical protections required by the Affordable Care Act – LLS pushed back through a multifaceted effort. On this issue alone, we generated 3,202 grassroots letters to Congress and the Centers for Medicare & Medicaid Services (CMS). We also urged governors, state legislators and insurance commissioners to take action to protect patients from the impact of these junk plans. By engaging our partners and working with LLS advocates to share their stories, LLS helped bring a bill to the governor's desk in Illinois to constrain these types of plans, establishing an important model for other states.



“I was diagnosed with stage IV non-Hodgkin lymphoma and was unaware that I had purchased a limited policy. I was left with \$800,000 in medical bills and no meaningful health insurance to pay for a potentially lifesaving transplant.”

SAM, CANCER SURVIVOR AND
LLS ADVOCATE

PLAYING A LEADING ROLE IN ADDRESSING THE RISING COST OF CANCER CARE FOR PATIENTS

The rising cost of cancer care has reached a boiling point. In fact, about one-third of inquiries to LLS's Information Specialists were from patients with financial issues and questions.

We believe every player in the healthcare system needs to take steps to address this dilemma by putting patients at the forefront.

In 2018, we did just that by continuing to advocate for policy reforms that could help lower overall costs and relieve patients' financial distress. Over the past year, a number of such reforms have been implemented or are under serious consideration. For example, the FDA has sped up the review of generic drug applications, providing potentially less costly alternatives for patients. In addition, a new law passed in February will prevent Medicare Part D patients from paying more when they switch from an expensive branded biologic drug to a cheaper "biosimilar" version – a change that saves money for patients and taxpayers.

LLS worked with other advocacy organizations and stakeholders to support these and other changes, many of which were outlined in our 2017 recommendations to help reduce the cost of cancer care. While progress has been made, much work remains ahead to remove barriers to care for patients.

WORKING TO GUARANTEE ACCESS TO CARE

This year, state policymakers proposed unprecedented changes to Medicaid that would require Medicaid recipients to prove that they're employed in order to receive coverage for their medical care.



It's estimated that these proposals will result in thousands of low-income patients losing their only source of affordable healthcare. For that reason, LLS stood united with other patient advocates in opposition to these proposals in 13 states this year.

LLS took steps not only to defend access to Medicaid coverage, but we also joined forces with advocates in three states to expand eligibility for Medicaid. LLS believes strongly that all blood cancer patients should have access to affordable coverage for the treatment they need.

LLS IS TAKING A BOLD STAND FOR PATIENTS AGAINST THE RISING COST OF CANCER CARE.

> [VIEW OUR 2018 PROGRESS REPORT.](#)

SHARON



LLS Advocate courageously shares her story—and inspires others to do the same

Sharon was diagnosed with myeloma in 2015. Her treatment included multiple courses of oral anti-cancer medication, countless injections, infusions, hospitalizations, a stem cell transplant and two spinal surgeries to repair cracked bones. She continues to be treated with oral anti-cancer therapy just to keep her cancer in remission. A one-month prescription with partial coverage costs her \$2,000 out of pocket for the first several months of every year. At one point, Sharon had to stop taking her medications for two consecutive months because she simply did not have the money. As an LLS advocate, she has courageously shared her story with the U.S. Department of Health and Human Services and members of Congress. Sharon encourages anyone going through a cancer diagnosis to get involved with opportunities to tell their story. “Being able to share my story so that I can help and inspire others has been the most fulfilling and therapeutic treatment,” she says.

VOLUNTEERS IMPACT OUR MISSION

Our volunteers are part of a diverse community of supporters who represent all walks of life and bring different experiences and passions to drive forward our mission.

Beating Cancer is in Our Blood, whether you are going through a diagnosis, caring for someone who has been impacted, or simply want to know a world without blood cancer. With countless ways to engage, from raising critical funds, driving forward policies that benefit patients, and providing support to those impacted by cancer, our volunteers are truly making a difference.

Join us at www.LLS.org/Volunteer



FUNDRAISING CAMPAIGNS

Every day, every participant brings us closer to ending blood cancers. Together, participants across all of our campaigns helped us raise a record-breaking total of more than \$250 million.

We are inspiring people across the country to run, hike, walk, sail, build teams and gain lifelong learning skills while raising funds to drive forward our mission in their own unique and powerful ways.



Through our signature fundraising campaigns, participants help us support lifesaving research, patient and healthcare provider support and education, and advocacy efforts that benefit blood cancer patients. LLS has been a pioneer in creating unique and innovative peer-to-peer fundraising campaigns, including:



TEAM IN TRAINING

Fundraising Teammates celebrated at over 25 epic endurance events annually

For over 30 years, the Team In Training campaign has supported LLS as their premier charity endurance training program—where teammates raise funds to help change the lives of those impacted by blood cancers. This campaign continues to deliver a transformative experience that inspires and supports teammates through

camaraderie, coaching and an engaging journey of personal discovery. Team In Training teammates complete events in Run/Walk, Cycle, Tri, and Hike. Teammates have also started fundraising through new cycling and climbing experiences with numerous fundraisers summiting Mount Kilimanjaro, journeying to Everest Basecamp and cycling over some of Europe's historic mountains, all while raising money and awareness for LLS. The campaign has raised more than \$1.5 billion and trained more than 650,000 teammates since 1988. In FY18, the campaign significantly exceeded its revenue goals, indicating that strategic rebranding efforts are paying off and delivering results for our mission.

Visit www.TeamInTraining.org for more information.



LIGHT THE NIGHT

More than 1 Million Participants Annually

Light The Night is a powerful campaign bringing light to the darkness of cancer. One million friends, families and co-workers gather together, carrying illuminated lanterns in 140 inspirational evening walks to celebrate, honor or remember those touched by cancer.

Coming off a record-breaking year as the Peer-to-Peer Professional Forum's Program of the Year, Light The Night continued to show growth year-over-year and moved from ninth largest peer-to-peer

fundraising program in America to fifth largest, raising \$700 million since 1999.

Through Light The Night, thousands of national partners, sponsors and corporate teams are helping LLS fund lifesaving research and support for patients battling cancer. The Light The Night campaign is the perfect platform for industry partners, as it allows them to bring their messages of support directly to blood cancer communities across the country. For 2018, The National Presenting Sponsors of Survivorship and Hope are Pharmacylics and Janssen Biotech, Inc.

In 2016, Light The Night introduced Random Acts of Light. Patients and survivors across the country have been surprised with special moments, including some with favorite athletes and celebrities. This year marked the second annual Random Acts of Light Day on June 13, and garnered significant awareness on top media outlets across the country. Visit www.LightTheNight.org for more information.



MAN & WOMAN OF THE YEAR

Over 10,000 Participants Annually

Man & Woman of the Year is a 10-week philanthropic competition for community leaders across the United States in honor of a local boy and girl with blood cancer.

By engaging influential community leaders, Man & Woman of the Year taps into the spirit of innovation and entrepreneurship that has allowed LLS to achieve great success in funding groundbreaking research to advance cancer cures. The winners receive LLS's Man and Woman of the Year titles. Every dollar raised counts as one vote, and the titles are awarded to the man and woman with the most votes at the end of ten weeks. Top local fundraisers become eligible to win national titles. Visit www.MWOY.org for more information.



STUDENTS OF THE YEAR

Over 5,000 Participants Annually

The Students of the Year campaign is a seven-week competition where high school students develop and utilize professional skills such as entrepreneurship, marketing and project management to raise funds in honor of a young local cancer patient.

For the second year in a row, high school students across the country are redefining what it means to be philanthropic in today's youth culture. Through LLS's newest innovation in fundraising, Students of the Year, hundreds of motivated high school student teams raised significant funds for LLS's cutting-edge cancer research and patient services. Visit www.StudentsOfTheYear.org for more information.



STUDENT SERIES

14.5 million+ Students & Their Families Participate

Student Series is a science-based philanthropy program for students from kindergarten to high school. The programs connect schools with local blood cancer patients, provide tangible life skills to participants and allow students to see the impact they're making in the lives of others. Participating elementary and middle schools

receive a proprietary STEM curriculum, aimed at sparking students' interest in STEM through experiential, hands-on lesson plans and presentations that cover Common Core skills.

More than 14.5 million students, families and educators in 27,000 schools across the United States participate annually. The campaign has raised \$368 million since 1993. Visit www.StudentSeries.org for more information.



LEUKEMIA CUP REGATTA

\$66 Million+ Raised Since Inception

The Leukemia Cup Regatta is a thrilling series of events that combines the joy of on-water sports with the important task of raising money to cure cancer. At events held at yacht clubs across North America, skippers register their boats and recruit friends and colleagues to help crew and raise funds. Crew members seek donations from friends, family, co-workers and employers to sponsor their boat.

More than \$66 million has been raised through the Leukemia Cup Regatta series for lifesaving research and patient services since its start more than 30 years ago. Visit www.LeukemiaCup.org for more information.



LLS LIFESTYLE

In Its Inaugural Year 20,000 Volunteers Raised Over \$3M

In October 2017, we launched LLS Lifestyle, a new way to raise funds for LLS. This new peer-to-peer fundraising platform enables LLS supporters to get creative and start their own movement. With LLS Lifestyle, every activity or passion is an opportunity to fundraise for LLS – from bake sales and birthday parties to spin class challenges and video game tournaments. The options are limitless! This year, LLS Lifestyle participants took their creativity to new heights. Among the highlights: The Bob Ross Challenge inspired anyone with a paintbrush to raise funds for LLS in honor of the beloved painter, art instructor and television host, who passed away from lymphoma. Other campaigns included multi-day mountain bike rides across South Africa, birthday fundraisers and charitable wedding registries. Visit www.LLS.org/Lifestyle for more information.

PARTNERSHIPS

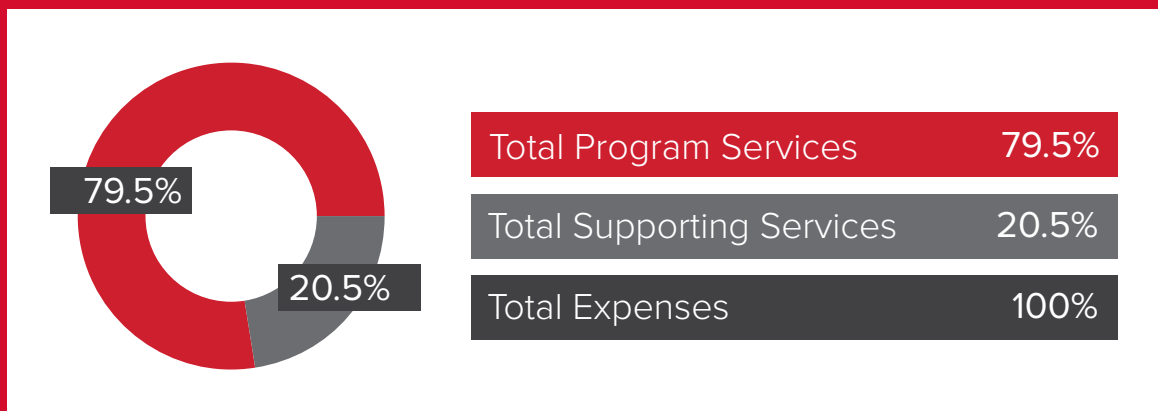
We are grateful to our partners and sponsors, who harness the power of their consumers, communities and employees to help fight blood cancers.



> [CLICK HERE TO VIEW ALL OUR SPONSORS AND PARTNERS WHO HELP ADVANCE OUR MISSION.](#)

FINANCIALS

We've always believed the most efficient way to finding cures for blood cancer is by directing as much funding as possible to the best and most innovative research, while providing patient support and education, and tirelessly advocating on behalf of patients. Your support is invested wisely.



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, 2018, 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 Consolidated 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, 2018, 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 2017 consolidated financial statements, and we expressed an unmodified audit opinion on those audited consolidated financial statements in our report dated October 27, 2017. In our opinion, the summarized comparative information presented herein as of and for the year ended June 30, 2017 is consistent, in all material respects, with the audited consolidated financial statements from which it has been derived.

KPMG LLP

November 7, 2018

Consolidated Balance Sheet

The Leukemia & Lymphoma Society, Inc. / June 30, 2018 (with comparative amounts at June 30, 2017) (In thousands)

Assets	<u>2018</u>	<u>2017</u>
Cash and cash equivalents	\$ 27,628	41,401
Prepaid expenses and other assets	2,767	3,613
Contributions and other receivables, net (note 6)	32,255	17,785
Investments (note 4)	319,662	209,421
Fixed assets, net (note 9)	<u>8,614</u>	<u>10,119</u>
Total assets	<u>\$ 390,926</u>	<u>282,339</u>
Liabilities and Net Assets		
Liabilities:		
Accounts payable and accrued expenses	\$ 21,907	21,711
Deferred revenue (note 7)	16,243	14,028
Awards and grants payable (note 2)	51,673	64,052
Co-Pay assistance payable (note 3)	54,696	20,071
Other long-term liabilities (note 10)	<u>3,835</u>	<u>3,167</u>
Total liabilities	<u>148,354</u>	<u>123,029</u>
Commitments and contingencies (notes 2, 3 and 11)		
Net assets (note 5):		
Unrestricted	149,199	126,993
Temporarily restricted	90,221	29,161
Permanently restricted	<u>3,152</u>	<u>3,156</u>
Total net assets	<u>242,572</u>	<u>159,310</u>
Total liabilities and net assets	<u>\$ 390,926</u>	<u>282,339</u>

See accompanying notes to consolidated financial statements.

Consolidated Statement of Activities

The Leukemia & Lymphoma Society, Inc. / Year ended June 30, 2018
(with summarized totals for the year ended June 30, 2017) (In thousands)

	Unrestricted	Temporarily restricted	Permanently restricted	Total	
				2018	2017
Operating revenue:					
Contributions	\$ 251,770	30,338	—	282,108	258,525
Less direct donor benefit costs	(29,198)	—	—	(29,198)	(25,955)
Net campaign contributions	222,572	30,338	—	252,910	232,570
Co-Pay contributions (note 3)	—	159,851	—	159,851	77,779
Therapy acceleration program contractual return (note 2)	3,792	63	—	3,855	29,548
Service revenue	9,230	—	—	9,230	3,847
Donated services, goods and media (note 8)	7,715	—	—	7,715	14,594
Legacies and other revenue	9,645	1,373	—	11,018	5,291
Net interest and dividend income	3,895	421	—	4,316	2,866
Net assets released from restrictions (note 3):					
Co-Pay assistance	115,797	(115,797)	—	—	—
Satisfaction of other donor restrictions	15,530	(15,530)	—	—	—
Total operating revenue	388,176	60,719	—	448,895	366,495
Operating expenses (note 8):					
Program services:					
Research	69,752	—	—	69,752	65,067
Patient and community service	165,496	—	—	165,496	125,677
Public health education	42,940	—	—	42,940	48,138
Professional education	18,388	—	—	18,388	21,698
Total program services	296,576	—	—	296,576	260,580
Supporting services:					
Management and general	31,831	—	—	31,831	29,049
Fundraising	44,468	—	—	44,468	47,656
Total supporting services	76,299	—	—	76,299	76,705
Total operating expenses	372,875	—	—	372,875	337,285
Change in net assets from operating activities	15,301	60,719	—	76,020	29,210
Foreign currency translation adjustment	267	(362)	(4)	(99)	(184)
Net increase in fair value of investments (note 4)	6,638	703	—	7,341	8,428
Change in net assets	22,206	61,060	(4)	83,262	37,454
Net Assets:					
Beginning of period	126,993	29,161	3,156	159,310	121,856
End of period	\$ 149,199	90,221	3,152	242,572	159,310

See accompanying notes to consolidated financial statements.

Consolidated Statement of Functional Expenses

The Leukemia & Lymphoma Society, Inc. / Year ended June 30, 2018 (with comparative totals for the year ended June 30, 2017) (In thousands)

	Program Services				Supporting Services			Direct donor benefit costs	
	Research	Patient and community service	Public health education	Professional education	Management and general	Fundraising	Total	Year ended	
								June 30, 2018	June 30, 2017
Awards and grants (note 2)	\$ 44,517	—	—	—	—	—	44,517	42,219	—
Therapy acceleration program (note 2)	5,834	—	—	—	—	—	5,834	4,711	—
Clinical Trial	5,899	—	—	—	—	—	5,899	2,142	—
Financial aid to patients	—	2,007	—	—	—	—	2,007	1,703	—
Co-Pay assistance (note 3)	—	108,442	—	—	—	—	108,442	72,969	—
Co-Pay processing fees	—	6,571	—	—	—	—	6,571	4,595	—
Donated services, goods and media (note 8)	645	2,636	1,510	290	417	2,217	7,715	14,594	—
Salaries and employee benefits and taxes (note 10)	6,660	27,371	22,372	10,714	19,390	21,843	108,350	101,702	—
Professional fees	3,179	4,429	4,961	2,431	3,613	4,945	8,558	22,707	3,305
Printing, advertising, and supplies	80	3,571	4,661	1,070	2,224	6,910	9,134	17,581	5,090
Occupancy, telephone and insurance (note 11)	391	3,279	2,925	1,126	1,729	2,281	4,010	11,912	—
Travel and meetings	583	1,757	1,579	1,041	1,163	1,144	2,307	7,267	16,043
Equipment rentals and maintenance	1,187	946	782	406	1,177	944	2,121	5,442	6,316
Postage and shipping	24	1,815	1,920	318	542	2,421	2,963	7,040	—
Miscellaneous	239	1,328	950	485	678	807	1,485	4,487	2,683
Impairment of fixed asset (note 9)	—	—	—	—	—	—	—	5,434	—
Depreciation and amortization	514	1,344	1,280	507	898	956	1,854	7,580	—
Total expenses	\$ 69,752	165,496	42,940	18,388	31,831	44,468	372,875	337,285	25,955

See accompanying notes to consolidated financial statements.

Consolidated Statement of Cash Flows

The Leukemia & Lymphoma Society, Inc. / Year ended June 30, 2018
(with comparative amounts for the year ended June 30, 2017) (In thousands)

	2018	2017
Cash flows from operating activities:		
Change in net assets	\$ 83,262	37,454
Adjustments to reconcile change in net assets to net cash provided by operating activities:		
Net increase in fair value of investments	(7,341)	(8,428)
Impairment of fixed asset	—	5,434
Depreciation and amortization	5,499	7,580
Provision for uncollectible accounts	(630)	188
Changes in operating assets and liabilities:		
Prepaid expenses and other assets	846	(707)
Contributions and other receivables	(13,840)	(729)
Accounts payable and accrued expenses	196	8,056
Other long-term liability	668	1,529
Deferred revenue	2,215	1,112
Awards and grants payable	(12,379)	3,601
Co-Pay assistance payable	34,625	6,602
Net cash provided by operating activities	<u>93,121</u>	<u>61,692</u>
Cash flows from investing activities:		
Purchases of fixed assets	(3,994)	(6,187)
Purchases of investments	(150,533)	(117,279)
Sales of investments	47,633	84,579
Net cash used in investing activities	<u>(106,894)</u>	<u>(38,887)</u>
Net (decrease) increase in cash and cash equivalents	(13,773)	22,805
Cash and cash equivalents at beginning of period	<u>41,401</u>	<u>18,596</u>
Cash and cash equivalents at end of period	<u>\$ 27,628</u>	<u>41,401</u>

See accompanying notes to consolidated financial statements.

Notes to Consolidated Financial Statements

The Leukemia & Lymphoma Society, Inc. / June 30, 2018 (In thousands)

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 and providing services to blood cancer patients, their families, and caregivers. 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 regarding blood cancer and education and support programs. LLS influences public policies that accelerate the development and approval of new blood cancer therapies and advocates for all blood cancer patients and their families, helping patients navigate their cancer treatments and 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) Principles of Consolidation

The accompanying consolidated financial statements include the accounts of LLS that encompass the National Office of LLS and its fifty six chapters in the United States, and LLS's not for profit affiliates, including The Leukemia & Lymphoma Society of Canada, Inc. (LLSC) and its five chapters in Canada, The Leukemia & Lymphoma Society Research Programs, Inc. (LLSRP), The Leukemia & Lymphoma Society Research Foundation (LLSRF), and PearlPoint Cancer Support, Inc. (PPCS). Effective March 28, 2016, LLS became the sole member of PPCS. As part of the assumption of control, LLS recognized a transfer of net assets of \$552 in 2016. Effective February 8, 2018, PPCS was dissolved. All significant intercompany and intra LLS accounts and transactions have been eliminated in consolidation.

c) Tax-Exempt Status

LLS, LLSRP, LLSRF, and PPCS qualify as charitable organizations as defined by Internal Revenue Code Section 501(c)(3) and, accordingly, are exempt from federal income taxes under Internal Revenue Code Section 501(a). Additionally, as these organizations are publicly supported, contributions qualify for the maximum charitable contribution deduction under the Internal Revenue Code.

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 and its related entities recognize 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 exempt purposes are subject to tax under Internal Revenue Code Section 511. There were no entities that recognized any unrelated business income tax liability for the years ended June 30, 2018 and 2017.

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 functional expenses, and valuation of donated services, goods and media. Actual results could differ from those estimates.

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Notes to Consolidated Financial Statements

The Leukemia & Lymphoma Society, Inc. / June 30, 2018 (In thousands)

e) *Risks and Uncertainties*

LLS invests in various investment securities. Investment securities are exposed to various risks, such as interest rate risks, market risk, political risks, 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 contributions by the general public. Accordingly, LLS's operations are dependent upon individual contributions that 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 2018 and 2017 was funded by six and eight donors, respectively. In addition, the Beat AML Master Trial was primarily funded by seven and five donors in 2018 and 2017, respectively.

f) *Summarized Financial Information*

The consolidated financial statements are presented with 2017 summarized for 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, 2017 expenses by natural classification are presented in total rather than by functional category. Accordingly, such information should be read in conjunction with LLS's 2017 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, 2018 through November 7, 2018, which was the date the consolidated financial statements were issued, and concluded that no additional disclosures are required.

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 for 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 is recorded as temporarily restricted net assets and is 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 5).

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 or published prices (unadjusted) in active markets for identical assets or liabilities that a reporting entity has the ability to access at the measurement date.

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Notes to Consolidated Financial Statements

The Leukemia & Lymphoma Society, Inc. / June 30, 2018 (Amounts in thousands)

Level 2	inputs other than quoted or published 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) Topic 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 (NAV) 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.

k) Contributions, Grants and Deferred Revenue

Contributions are recorded as revenue, at 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) Service Revenue

Service revenue is accounted for as an exchange transaction whereby revenue is recognized when the related expenses are incurred. Amounts received under these arrangements but not yet expended are reported as deferred revenue.

m) Donated Services and Goods

LLS has determined that certain of the donated services and goods it receives meet the criteria for recognition in the consolidated financial statements. The value of contributed goods was determined based on fair market value estimates. The value of contributed services was determined for volunteers that possess specialized skills and would otherwise need to be purchased. These goods and services are recognized as revenue and expense (note 8).

n) 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 consolidated financial statements, was estimated based on the placement, audience, and demographics of the PSAs (note 8).

o) 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.

p) Investments

Investments are stated at fair value based upon quoted or published market prices, except for the fair values of alternative investments, which are based on NAVs provided by the fund managers or general partners, based upon the underlying net assets of the funds consistent with the concepts of ASC Topic 820. These values are reviewed and evaluated by management.

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Notes to Consolidated Financial Statements

The Leukemia & Lymphoma Society, Inc. / June 30, 2018 (Amounts in thousands)

q) 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).

r) Other Long-Term Liabilities

Other long term liabilities represent LLS's liability for the Internal Revenue Code Section 457 deferred compensation plans recorded at fair market value (note 10) and straight line rent of office leases (note 11).

s) Professional Fees

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

t) New Authoritative Accounting Pronouncements

The FASB issued Accounting Standards Update (ASU) 2016 14, Presentation of Financial Statements of Not for Profit Entities, which among other things, changes how not for profit entities report net asset classes, expenses and liquidity in their financial statements. The significant requirements of the new ASU include the reduction of the number of net asset classes from three to two: with donor restrictions and without donor restrictions; the presentation of expenses by their function and their natural classification in one location; quantitative and qualitative information about the management of liquid resources and availability of financial assets to meet cash needs within one year of the date of the Consolidated Balance Sheet; and retaining the option to present operating cash flows in the Consolidated Statement of Cash Flows using either the direct or indirect method. LLS plans to adopt ASU 2016 14 for the year ending June 30, 2019.

The FASB is issuing Accounting Standards Update (ASU) 2018 08, to clarify and improve the scope and the accounting guidance for contributions received and contributions made. The amendments in this Update should assist entities in (1) evaluating whether transactions should be accounted for as contributions (nonreciprocal transactions) within the scope of Topic 958, Not for Profit Entities, or as exchange (reciprocal) transactions subject to other guidance and (2) determining whether a contribution is conditional. LLS plans to adopt ASU 2018 08 for the year ending June 30, 2020. LLS is continuing to evaluate the impact of adopting this guidance on its financial statements.

2) Research

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 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 multiyear grant commitments of \$52,216 at June 30, 2018, that are conditioned upon future events and, accordingly, are not recorded. LLS has unconditional grants payable of \$51,673 and \$64,052 at June 30, 2018 and 2017, respectively, which are anticipated to be paid in the next year. Grant refunds of approximately \$984 and \$923 as of June 30, 2018 and 2017, respectively, have been netted against awards and grants expense.

TAP: Therapy Acceleration Program (TAP) is LLS's strategic initiative to speed the development of blood cancer treatments and supportive diagnostics by creating business alliances with biotechnology, pharmaceutical companies, and universities. 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. Multiyear contracts, which are

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Notes to Consolidated Financial Statements

The Leukemia & Lymphoma Society, Inc. / June 30, 2018 (Amounts in thousands)

generally two to three years in length, are reviewed against milestones on a quarterly basis and may be terminated at the discretion of LLS. LLS has contract commitments of \$12,745 and \$9,144 at June 30, 2018 and 2017, respectively, that are conditioned upon future events and, accordingly, are not recorded. Grant refunds of approximately \$591 as of June 30, 2018 have been netted against therapy acceleration program contractual return.

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:

Year ending June 30:

2019	\$	31,328
2020		19,710
2021		11,354
2022		<u>2,569</u>
Total	\$	<u>64,961</u>

TAP Contractual Return: In January 2009, as part of its TAP, LLS entered into an agreement with Celator Pharmaceuticals, Inc. (Celator) through which LLS provided funding of approximately \$4,100 to Celator in support of the Phase 2 study of Celator's lead compound Vyxeos™ (daunorubicin and cytarabine liposome for injection) for the treatment of Acute Myeloid Leukemia (AML). From 2012 through 2016, LLS provided funding of an additional \$5,000 for the Phase 3 clinical study of Vyxeos™. LLS provisions of funding to Celator were based on clinical milestones.

As part of the agreement, Celator was obligated to make payments to LLS relative to the timing of the product commercialization and other liquidity events. In July 2016, Jazz Pharmaceuticals (Jazz) completed the purchase of Celator, triggering a payment of \$13,716 to LLS. In late 2016, Jazz terminated the agreement with LLS triggering a one time contract termination fee of \$11,612 to eliminate potential future royalty payments related to Vyxeos™. The total amount of the return to LLS from its TAP contract in Celator was \$25,328. The remaining \$4,220 of TAP contractual return for the year ended June 30, 2017 comes from various other TAP contracts.

For the year ended June 30, 2018, LLS received \$3,855 of TAP contractual returns from various TAP contracts.

3) 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. Revenue is recognized when donations are received while expenses are recognized as patient applications are approved for participation according to program criteria and on availability of funding. The Co Pay Assistance payable of \$54,696 and \$20,071 has been established based on approved patient applications received through June 30, 2018 and 2017, respectively. At June 30, 2018, temporarily restricted net assets include \$52,528 received in 2018, which are available for expenditure and are intended to be awarded in fiscal year 2019.

The following summarizes the activities of the Co-Pay Assistance program in 2018 and 2017.

	<u>2018</u>	<u>2017</u>
Beginning balance	\$ 8,148	8,960
Co-Pay contributions	159,851	77,779
Investments gains	326	—
Amount expended during the year:		
Direct assistance to patients	(108,442)	(72,969)
Other expenses incurred and reimbursed under the contract	<u>(7,355)</u>	<u>(5,622)</u>
Amounts available for expenditures in the next year	<u>\$ 52,528</u>	<u>8,148</u>

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Notes to Consolidated Financial Statements

The Leukemia & Lymphoma Society, Inc. / June 30, 2018 (Amounts in thousands)

4) Investments

The following tables present LLS's fair value hierarchy of investments measured at fair value on an annual basis as of June 30, 2018 and 2017:

	<u>2018</u>	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>
Money market funds and cash	\$ 158,371	158,371	—	—
Fixed income:				
Corporate bonds	56,758	56,758	—	—
Government securities and other	849	849	—	—
Equities:				
Large cap equity	35,644	35,644	—	—
International equity	33,437	33,437	—	—
Small/mid cap equity	22,872	22,872	—	—
Commodities	3,665	3,665	—	—
	<u>311,596</u>	<u>\$ 311,596</u>	<u>—</u>	<u>—</u>
Investments reported at net asset value:				
Multi strategy hedge funds	<u>8,066</u>			
Total investments reported at net asset value	<u>8,066</u>			
	<u>\$ 319,662</u>			

	<u>2017</u>	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>
Money market funds and cash	\$ 63,155	63,155	—	—
Fixed income:				
Corporate bonds	49,312	49,312	—	—
Government securities and other	2,098	2,098	—	—
Equities:				
Large cap equity	32,356	32,356	—	—
International equity	30,261	30,261	—	—
Small/mid cap equity	20,813	20,813	—	—
Commodities	3,566	3,566	—	—
	<u>201,561</u>	<u>\$ 201,561</u>	<u>—</u>	<u>—</u>
Investments reported at net asset value:				
Multi strategy hedge funds	<u>7,860</u>			
Total investments reported at net asset value	<u>7,860</u>			
	<u>\$ 209,421</u>			

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Notes to Consolidated Financial Statements

The Leukemia & Lymphoma Society, Inc. / June 30, 2018 (Amounts in thousands)

Investment expenses totaled \$318 and \$376 for the years ended June 30, 2018 and 2017, respectively. The unrealized gains were \$1,802 and \$4,504 for the years ended June 30, 2018 and 2017, respectively.

LLS's alternative investments strategy is 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.

The strategy creates 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 45–95 days. By contrast, all of LLS's nonalternative investments are highly liquid and can be redeemed daily without restriction. As of June 30, 2018 and 2017, the following table summarizes the redemption provisions for those investments reported at NAV:

	June 30	
	2018	2017
Redemption period:		
Quarterly	\$ 6,380	6,265
Annual	<u>1,686</u>	<u>1,595</u>
Total	<u>\$ 8,066</u>	<u>7,860</u>

As of June 30, 2018 and 2017, LLS had no unfunded commitments on its alternative investments.

5) 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, 2018 and 2017:

	2018		2017	
	Temporarily restricted	Permanently restricted	Temporarily restricted	Permanently restricted
Time restrictions	\$ 13,702	—	6,297	—
Research	13,209	3,100	7,097	3,035
Patient service	10,025	—	7,533	—
Co-Pay assistance	52,528	—	8,148	—
Other	<u>757</u>	<u>52</u>	<u>86</u>	<u>121</u>
Total	<u>\$ 90,221</u>	<u>3,152</u>	<u>29,161</u>	<u>3,156</u>

LLS follows the provisions of the New York Prudent Management of Institutional Funds Act, 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.

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Notes to Consolidated Financial Statements

The Leukemia & Lymphoma Society, Inc. / June 30, 2018 (Amounts in thousands)

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, 2018 and 2017 was 4% of ending balance at June 30, 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, 2018:

	Temporarily restricted	Permanently restricted	Total
Endowment net assets at July 1	\$ 3,126	3,156	6,282
Investment income	551	—	551
Foreign currency translation adjustment	(3)	(4)	(7)
Appropriation for expenditure	(249)	—	(249)
Endowment net assets at June 30	<u>\$ 3,425</u>	<u>3,152</u>	<u>6,577</u>

The following table presents changes in the donor-restricted endowment funds for the year ended June 30, 2017:

	Temporarily restricted	Permanently restricted	Total
Endowment net assets at July 1	\$ 2,962	3,437	6,399
Investment income	428	—	428
Foreign currency translation adjustment	335	—	335
Contributions	—	5	5
Reclassifications	(347)	(286)	(633)
Appropriation for expenditure	(252)	—	(252)
Endowment net assets at June 30	<u>\$ 3,126</u>	<u>3,156</u>	<u>6,282</u>

6) Contribution and Other Receivables

LLS's contribution and other receivables at June 30, 2018 and 2017 consist of unconditional promises to give, receivables associated with service revenue, 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 and other receivables consist of the following:

(continues »)

Notes to Consolidated Financial Statements

The Leukemia & Lymphoma Society, Inc. / June 30, 2018 (Amounts in thousands)

	<u>2018</u>	<u>2017</u>
Contributions	\$ 1,539	2,749
Co-Pay contributions	15,100	6,000
Other restricted contributions	15,266	8,080
Service revenue and other	<u>350</u>	<u>956</u>
Total	<u>\$ 32,255</u>	<u>17,785</u>

Contributions receivables are originally recorded based on discounted cash flows using a risk-adjusted discount rate. Amounts are scheduled to be received as follows:

	<u>2018</u>	<u>2017</u>
Less than one year	\$ 24,400	13,688
1 to 5 years	10,076	5,186
After 5 years	<u>—</u>	<u>25</u>
Subtotal	34,476	18,899
Less:		
Allowance for uncollectible accounts	(987)	(357)
Discount to present value (1.5% to 5.0%)	<u>(1,234)</u>	<u>(757)</u>
Total	<u>\$ 32,255</u>	<u>17,785</u>

As of June 30, 2018 and 2017, 77% and 53% of gross legacies and contributions receivable were from two funding sources, respectively.

7) Deferred Revenue

The majority of deferred revenue includes amounts received for special events that will be held subsequent to the fiscal year-end. Deferred revenue as of June 30, 2018 and 2017 consists of the following:

	<u>2018</u>	<u>2017</u>
Grants	\$ —	45
Service revenue	3,857	2,100
Special events	<u>12,386</u>	<u>11,883</u>
Total	<u>\$ 16,243</u>	<u>14,028</u>

(continues »)

Notes to Consolidated Financial Statements

The Leukemia & Lymphoma Society, Inc. / June 30, 2018 (Amounts in thousands)

8) Donated Services, Goods and Media

The value of donated goods for the Beat AML Master Trial and campaign supplies, 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:

	<u>2018</u>	<u>2017</u>
Donated goods	\$ 1,483	3,552
Donated services	2,950	2,430
Donated media	<u>3,282</u>	<u>8,612</u>
Total	<u>\$ 7,715</u>	<u>14,594</u>

9) Fixed Assets, Net

Fixed assets at June 30, 2018 and 2017 consist of the following:

	<u>2018</u>	<u>2017</u>
Leasehold improvements	\$ 2,079	1,795
Furnitures, fixtures, and other office equipment	4,154	3,547
Computer equipment and software	<u>39,231</u>	<u>36,350</u>
Total	45,464	41,692
Less accumulated depreciation and amortization	<u>(36,850)</u>	<u>(31,573)</u>
Fixed assets, net	<u>\$ 8,614</u>	<u>10,119</u>

In 2017, an impairment of fixed assets of \$5,434 was recorded for the write off of a fundraising platform that will no longer be utilized by LLS. There was no such impairment in 2018.

10) Retirement Plans

LLS has a defined contribution 403(b) plan covering all employees meeting age and service requirements. LLS contributions are based on a percentage of each eligible employee's salary and years of service. Expenses under this plan aggregated \$2,336 and \$2,149 for the years ended June 30, 2018 and 2017, respectively.

LLS has nonqualified deferred compensation plans for its executive staff subject to the provisions of the Internal Revenue Code Section 457 (the 457 Plans). There were no expenses incurred for the years ended June 30, 2018 and 2017. The assets and liabilities of the 457 Plans are included in investments and other long term liabilities in the accompanying consolidated balance sheet and amounted to approximately \$1,586 and \$1,574 at June 30, 2018 and 2017, respectively.

(continues »)

Notes to Consolidated Financial Statements

The Leukemia & Lymphoma Society, Inc. / June 30, 2018 (Amounts in thousands)

11) Lease Commitments

The leases for premises, which LLS's National Office and chapters occupy, expire on various dates through March 31, 2031 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:

Year ending June 30:		
2019	\$	7,450
2020		7,037
2021		6,632
2022		5,855
2023		4,191
Thereafter		<u>10,780</u>
Total	\$	<u><u>41,945</u></u>

12) Joint Costs Allocation

For the years ended June 30, 2018 and 2017, 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, coin boards, and media campaigns. Such costs are allocated based on applicable accounting standards and were allocated as follows:

	<u>2018</u>	<u>2017</u>
Fundraising	\$ 7,463	12,832
Patient and community services	3,496	2,666
Public health education	<u>4,884</u>	<u>5,002</u>
Total	<u><u>\$ 15,843</u></u>	<u><u>20,500</u></u>

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Research Grants

Specialized Center of Research

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

William Carroll, MD, 2013
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John Cleveland, PhD, 2019*
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Craig Jordan, PhD, 2019*
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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.

Omar Abdel-Wahab, MD, 2017
Sloan Kettering Institute for Cancer Research

Philippe Armand, MD, PhD, 2019*
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** Grantee prematurely terminated award in Fiscal Year 2018

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Yu Zhang, PhD, 2018
Boston Children's Hospital

Jiajun Zhu, PhD, 2018
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Translational Research Program

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

Ricardo Aguiar, MD, PhD, 2017
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Enrico Tiacci, MD, 2018
University of Perugia

*Dr. Enrico Tiacci is funded in
part by The Hairy Cell Leukemia
Foundation, Barbara and Gary
Freedman, Robin and Jonathan
Klein, Edith Klein, and The SASS
Foundation for Medical Research.*

Wei Tong, PhD, 2018
The Children's Hospital
of Philadelphia

Amit Verma, MD, 2019*
Albert Einstein College of
Medicine, Inc.

Y. Lynn Wang, MD, PhD, 2017
The University of Chicago

*Dr. Y. Lynn Wang is funded in
part by Imagine a Cure For
Leukemia Canada.*

George Weiner, MD, 2017
The University of Iowa

Amittha Wickrema, MD, PhD, 2017
The University of Chicago

Kirsten Williams, MD, 2019*
Children's Research Institute

*Dr. Kirsten Williams is funded in
part by The Holland C. Gregg IV
Research Fund.*

Kai Wucherpfennig, MD, PhD, 2019*
Dana-Farber Cancer Institute

Jianhua Yu, PhD, 2017
The Ohio State University

Andrew Zannettino, PhD, 2018
The University of Adelaide

Fenghuang Zhan, MD, PhD, 2018
The University of Iowa

Translational Research Program: Renewal

Leandro Cerchietti, MD, 2019*
Joan & Sanford I. Weill Medical
College of Cornell University

John Crispino, PhD, 2014
Northwestern University

*Dr. John Crispino is funded in part
by the George Shields Foundation.*

Maria Figueroa, MD, 2016
University of Miami

*Dr. Maria Figueroa is funded in
part by the LeGros Family.*

Steven Grant, MD, 2018
Virginia Commonwealth University

*Dr. Steven Grant is funded in part
by Breeden Adams Foundation.*

Mignon Loh, MD, 2019*
The Regents of the University of
California, San Francisco

Feyruz Rassool, PhD, 2019*
University of Maryland at Baltimore

James Rubenstein, MD, PhD, 2016
The Regents of the University of
California, San Francisco

*Dr. James Rubenstein is funded
in part by Leon Borchers.*

Steven Treon, MD, PhD, 2018
Dana-Farber Cancer Institute

*Dr. Steven Treon is funded in
part by the Cora and John H.
Davis Foundation and the Zegar
Family Foundation.*

Li Zhang, MD, PhD, 2018
University Health Network

Screen to Lead Program

*The Screen to Lead Program offers
drug discovery support specifically
directed toward medicinal chemistry
and/or drug target screening in
hematological malignancies.*

Adolfo Ferrando, MD, PhD, 2018
The Trustees of Columbia University
in the City of New York, Columbia
University Medical Center

Gary Reuther, PhD, 2018
H. Lee Moffitt Cancer Center
& Research Institute

New Idea Award

*A concept award that funds
innovative approaches that may
fundamentally change the
understanding, diagnosis and/or
treatment of blood cancers and
related premalignant conditions.*

Steven Chan, MD, PhD, 2019*
Princess Margaret Cancer Center,
University Health Network

Mark Cobbold, MD, PhD, 2019*
Massachusetts General Hospital

Michael Erb, PhD, 2019*
The Scripps Research Institute

Robert Kridel, MD, PhD, 2019*
University Health Network

Andrea Reboldi, PhD, 2019*
University of Massachusetts
Medical School

David Weinstock, MD, 2019*
Dana-Farber Cancer Institute

*Dr. David Weinstock is funded
in part by Sandra Abbott.*

MPN Challenge Grants

*This program is run in partnership
with the MPN Research Foundation.*

Angela Fleischman, MD, PhD, 2019*
The Regents of the University of
California, Irvine

James Griffin, MD, 2019*
Dana-Farber Cancer Institute

Vivian Oehler, MD, 2019*
Fred Hutchinson Cancer
Research Center

Stephen Oh, MD, PhD, 2019*
Washington University in St. Louis

Rebekka K. Schneider, MD, 2019*
Erasmus University Rotterdam

IWMF Grants

*This program is run in partnership
with the International Waldenström's
Macroglobulinemia Foundation
(IWMF).*

Shahrazad Jalali, PhD, 2019*
Mayo Clinic, Rochester

Zachary Hunter, PhD, 2019*
Dana-Farber Cancer Institute

Sherine Elsawa, PhD, 2019*
University of New Hampshire

* Newly awarded or renewed grants in Fiscal Year 2019

** Grantee prematurely terminated award in Fiscal Year 2018

Rising Tide Foundation for Clinical Cancer Research/LLS Patient-Focused Immunotherapy Initiative

This program is run in partnership to stimulate innovative and clinically relevant cancer research that has the highest potential for near-term patient impact in terms of clinical application, therapeutic outcomes and quality of life.

David Gottlieb, MD, 2017
The University of Sydney

Ann Leen, PhD, 2017
Baylor College of Medicine.

Ronald Levy, MD, 2017
Board of Trustees of the Leland Stanford Junior University

Dr. Ronald Levy is funded in part by Laurie and Guy Adami.

Margaret Shipp, MD, 2017
Dana-Farber Cancer Institute

Rising Tide Foundation for Clinical Cancer Research/LLS Patient-Focused Prevention Grants for Blood Cancer

This program is run in partnership to advance breakthroughs in prevention of blood cancers.

C. Ola Landgren, MD, PhD, 2019*
Sloan Kettering Institute for Cancer Research

George Vassiliou, MD, PhD 2019*
Wellcome Trust Sanger Institute

Mantle Cell Lymphoma Research Initiative

The Mantle Cell Lymphoma Research Initiative supports teams of researchers representing different disciplines and engaging in collaborative efforts to discover new approaches to treat patients with blood cancers.

Selina Chen-Kiang, PhD, 2019*
Joan & Sanford I. Weill Medical College of Cornell University

Dr. Selina Chen-Kiang is funded in part by the Sarah Cannon Fund at the HCA Foundation and Beth and Natan Vaisman.

Larry Kwak, MD, PhD 2019*
Beckman Research Institute of the City of Hope

Dr. Larry Kwak is funded in part by the Sarah Cannon Fund at the HCA Foundation and Beth and Natan Vaisman.

Special Initiatives

Peter Adamson, MD, 2019*
The Children's Hospital of Philadelphia

Dr. Peter Adamson is funded in part by Bayer.

Carma Bylund, MD, 2019*
University of Florida

Dr. Carma Bylund is funded in part by the Carolan Research Institute.

E. Anders Kolb, MD, 2019*
Nemours/Alfred I. duPont Hospital for Children

Dr. E. Anders Kolb is funded in part by Bayer.

Mignon Loh, MD, 2019*
The Regents of the University of California, San Francisco

Ari Melnick, MD, 2015, 2019*
Joan & Sanford I. Weill Medical College of Cornell University

Dr. Ari Melnick is funded in part by the Dr. Ralph and Marian Falk Medical Research Trust.

Soheil Meshinchi, MD, PhD, 2019*
Fred Hutchinson Cancer Research Center

Dr. Soheil Meshinchi is funded in part by Bayer.

Crystal Reinhart, PhD, 2019*
University of Illinois at Champaign-Urbana

David Sabatini, MD, PhD, 2019*
Whitehead Institute for Biomedical Research

David Teachey, MD, 2019*
The Children's Hospital of Philadelphia

Frits van Rhee, MD, PhD, 2019*
University of Arkansas for Medical Sciences

Dr. Frits van Rhee is funded in part by the Dr. Ralph and Marian Falk Medical Research Trust.

* Newly awarded or renewed grants in Fiscal Year 2019

Partnerships

Therapy Acceleration Program Partnerships

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Boston, MA

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Heidelberg, Germany

Ivan Borrello, MD
The Sidney Kimmel Comprehensive
Cancer Center at Johns Hopkins
University

Constellation Pharmaceuticals, Inc.
Cambridge, MA

Decoy Biosciences, Inc.
San Diego, CA

Giulio Draetta, MD, PhD
The University of Texas
MD Anderson Cancer Center

Brian Druker, MD
Oregon Health & Science University

Forty Seven, Inc.
Menlo Park, CA

ImmunGene, Inc.
Camarillo, CA

Irene Ghobrial, MD
Dana-Farber Cancer Institute

Anand Jillella, MD
Emory University

KDAC Therapeutics, Inc.
Cambridge, MA

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Amsterdam, Netherlands

Kite Pharma, Inc.
Santa Monica, CA

NexImmune, Inc.
Gaithersburg, MD

Ronald Levy, MD
The Board of Trustees of the Leland
Stanford Junior University

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Herbert Irving Comprehensive
Cancer Center at Columbia
University Medical Center

OncoPep, Inc.
North Andover, MA

Selvita SA
Krakow, Poland

Stemline Therapeutics, Inc.
New York, NY

Travera, LLC
Cambridge, MA

David Wald, MD, PhD
Case Western Reserve University

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Robert Rosen
Greyhawke Capital Advisors

2018 National Recognition & Awards Program

We are pleased to recognize the extraordinary involvement of individuals, companies, corporations and organizations for their support of LLS and its mission. Those honored give of their time, talent and treasury and have made a significant difference in the lives of so many. To find out more about our awards program, please go to <http://www.LLS.org/national-awards-nomination>

Congratulations to all the 2018 awardees!

2018 National Recognition & Awards Recipients

Robert de Villiers Spiral of Life Award

The Robert de Villiers Spiral of Life Award honors the founders, the de Villiers family. In 1944, in memory of their son Robert, Rudolph and Antoinette de Villiers started a foundation that today is known as The Leukemia & Lymphoma Society.

This award recognizes an individual who, through their leadership and tireless efforts to raise funds and influence policy, has advanced the overall mission of LLS.

- Andy Gordon
Arizona Chapter
- Charles Arnold
Illinois Chapter

- Erin Zammett Ruddy
New York City Chapter
- Sandy Allen-Bard
New York City Chapter
- Dr. James DeGregori
Rocky Mountain Chapter

Vision for Life Award

This award recognizes an individual, corporation or organization whose ability to think outside the box has helped to create a new fundraising campaign/program or enhanced an existing event with national potential.

- Subaru of America, Inc.
National Office
- Nancy Sanker
Georgia Chapter
- Heartland Blood Center
Illinois Chapter
- Chipotle
North Texas Chapter
- Nate Demercurio
North Texas Chapter
- Warrior Horses
San Diego/Hawaii Chapter
- Oliver Press, MD, PhD (posthumously)
Washington/Alaska Chapter
- Leroy Ball
Western Pennsylvania & West Virginia Chapter

Leadership Award

This award recognizes an individual who has been active in a chapter for at least three years, and has provided expertise and guidance that have helped the chapter achieve new levels of success.

- Ted Moroz
Canada National Office
- Chris Kostanecki
Greater Bay Area Chapter
- Larry Gerquest
Greater Bay Area Chapter
- Jason Cox
Kentucky & Southern Indiana Chapter
- Avi Nessim
Long Island Chapter
- Mike Davis
Long Island Chapter
- Amy Stone
Minnesota Chapter
- Patrick Paolini
National Capital Area Chapter
- Joseph DeSabia
New York City Chapter
- Don Armstrong
North Texas Chapter
- Mike Mendlik
North Texas Chapter
- Gerri Naumchreff
Oregon SW Washington Idaho Montana Chapter
- Jim Chrisman
Rocky Mountain Chapter
- Donnie Hill
Tri-State Southern Ohio Chapter
- Peoples
Western Pennsylvania & West Virginia Chapter

Quality of Life Award

This award recognizes a member of the medical community, a social worker, or a caregiver who has provided outstanding support, counsel or guidance to blood cancer patients or their families.

- Karen Hartman
Long Island Chapter

- Dr. Larry Anderson
North Texas Chapter
- Daniel A. Pollyea, MD, MS
Rocky Mountain Chapter
- Albert Schafer, MSW
San Diego/Hawaii Chapter
- Jodi Garrett, RN BSN OCN
San Diego/Hawaii Chapter
- Cheryl A Tompkins MSN, CRNP
Western Pennsylvania & West Virginia Chapter
- Froedtert & the Medical College of Wisconsin
Wisconsin Chapter

Special Recognition Award

This award recognizes an individual who is deserving of recognition for their outstanding commitment to an event or program that has resulted in increasing revenue and building public awareness of LLS.

- Marcia Banes
Georgia Chapter
- John Bacon
Greater Bay Area Chapter
- John D. Crispino, PhD
Illinois Chapter
- Bobby Menges (posthumously)
Long Island Chapter
- John Draper
National Capital Area Chapter
- Doug Dunbar
North Texas Chapter
- Jeff Gusinow
Oregon SW Washington Idaho Montana Chapter
- John Reumann
Rocky Mountain Chapter
- Cyndi Reinhardt
San Diego/Hawaii Chapter

SECTION 7: ACKNOWLEDGMENTS

Michele Makinney
San Diego/Hawaii Chapter

Brij Agarwal
Texas Gulf Coast Chapter

Dawn Nielsen
Texas Gulf Coast Chapter

Robert Dobbs (posthumously)
Tri-State Southern Ohio Chapter

Colton Matter Colton's Army
Washington/Alaska Chapter

Bryan Kocher
Western Pennsylvania & West
Virginia Chapter

Light The Night Founders
Committee
Wisconsin Chapter

Laura Petrovic
Upstate New York/Vermont Chapter

C.H. Robinson Worldwide
Wisconsin Chapter

Johnson Controls, Inc.
Wisconsin Chapter

Bronze (5+ years)

Avella
Arizona Chapter

Immucor
Georgia Chapter

Wells Fargo
Greater Bay Area Chapter

Allstate
Illinois Chapter

MB Financial Bank
Illinois Chapter

Walgreens
Kentucky & Southern Indiana
Chapter

New York Community Bancorp, Inc.
Long Island Chapter

John Leonard, MD
New York City Chapter

VKC Group
Texas Gulf Coast Chapter

Partners Against Blood Cancer Award

The Partners Against Blood Cancer Award recognizes an individual, corporation or organization that has demonstrated ongoing support and enduring commitment to LLS.

Ruby (40+ years of participation)

The Handlery Foundation
Greater Bay Area Chapter

Platinum (20+ years of participation)

Towne Properties
Tri-State Southern Ohio Chapter

Gold (15+ years of participation)

St. Joseph's/Candler
Georgia Chapter

The Milwaukee Oyster Roast
Wisconsin Chapter

The Riders of the Storm
Wisconsin Chapter

Silver (10+ years of participation)

Gila River Casinos
Arizona Chapter

Roswell High School
Georgia Chapter

Coordinated Business Systems
Minnesota Chapter

United Energy Trading
Rocky Mountain Chapter

Kolache Factory
Texas Gulf Coast Chapter

Performance Automotive Network
Tri-State Southern Ohio Chapter

2018 Media Awards Recipients

Recipients have a record of excellence in fundraising and promotional support, as well as educating and informing the public about LLS and its mission.

Digital

Jon Mosier
20th Century Fox, Home
Entertainment
California Southland Chapter

20th Century Fox, Home
Entertainment
California Southland Chapter

Rene Michel
MVP Productions
Mississippi/Louisiana Chapter

Kevin Mumhrey
MVP Productions
Mississippi/Louisiana Chapter

Anthony Keith
KKTV
Rocky Mountain Chapter

KKTV
Rocky Mountain Chapter

Print

Ashley Webster
Central California Chapter

Gordon Webster, Jr.
President & Publisher
The Business Journal
Central California Chapter

Jean Webster
Central California Chapter

Kayla Nelms
Ladue News
Gateway Chapter

Ladue News
Gateway Chapter

Trish Miller
St. Louis Business Journal
Gateway Chapter

St. Louis Business Journal
Gateway Chapter

The Modesto Bee
Greater Sacramento Area Chapter

Joe Giametta
Long Island Business News
Long Island Chapter

Long Island Business News
Long Island Chapter

SpinSheet Magazine
Maryland Chapter

Nickole Kerner Bobley
Texas Gulf Coast Chapter

Amber Elliott
Houston Chronicle Hearst Media
Texas Gulf Coast Chapter

Houston Chronicle Hearst Media
Texas Gulf Coast Chapter

Sally Steed
Utah Media Group
Utah Chapter

Milwaukee Magazine
Wisconsin Chapter

Jane Stein
Milwaukee Magazine
Wisconsin Chapter

Radio

KSJN – Modesto
Central California Chapter

KSOF Radio
Central California Chapter

La Preciosa
KFSO Radio
Central California Chapter

Teri Ann Schlessler
iHeartMedia
Central California Chapter

Victoria Mann
Sonoma Media Group
Greater Bay Area Chapter

Sonoma Media Group
Greater Bay Area Chapter

Shelley Irwin
WGVU PBS
Michigan Chapter

WGVU PBS
Michigan Chapter

WCCO-AM Radio
Minnesota Chapter

WGFY 104.5 The Zone
Tennessee Chapter

Mike Parsons
KBEE - B98.7
Utah Chapter

KBEE - B98.7
Utah Chapter

Darrin Scott Kibbey
WVCR - 88.3 FM
Upstate New York/Vermont Chapter

WVCR - 88.3 FM
Upstate New York/Vermont Chapter

Television

TBS / TNT Networks
California Southland Chapter

Alex Delgado
KSEE TV 24
Central California Chapter

KSEE TV 24
Central California Chapter

Lupita Lomeli
Univision 21
Central California Chapter

Univision 21
Central California Chapter

Good Day Sacramento
KMAX TV
Greater Sacramento Area Chapter

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WMAQ-TV
NBC 5
Illinois Chapter

Telemundo WSNS-TV
Illinois Chapter

Carmen Vega
WSNS-TV
Illinois Chapter

KARE TV
Minnesota Chapter

Juliana Mazza
WDSU
Mississippi/Louisiana Chapter

WDSU - TV 6
Mississippi/Louisiana Chapter

Sara Shookman
WKYC TV 3
Northern Ohio Chapter

WKYC TV 3
Northern Ohio Chapter

Jeff Gianola
KOIN TV
Oregon SW Washington Idaho
Montana Chapter

KOIN TV
Oregon SW Washington Idaho
Montana Chapter

WPBF 25 News
Palm Beach Area Chapter

Ginger Jeffries
KUSI-TV
San Diego/Hawaii Chapter

KUSI-TV
San Diego/Hawaii Chapter

Mark Mathis
KUSI-TV
San Diego/Hawaii Chapter

Mary King
WIS – TV
South Carolina Chapter

WIS – TV
South Carolina Chapter

Erica Collura
Local 12 WKRC Cincinnati
Tri-State Southern Ohio Chapter

Sheila Gray
Local 12 WKRC Cincinnati
Tri-State Southern Ohio Chapter

Bob Herzog
Local 12 WKRC Cincinnati
Tri-State Southern Ohio Chapter

Local 12 WKRC Cincinnati
Tri-State Southern Ohio Chapter

Katherine Amenta
WPXI-TV
Western Pennsylvania & West
Virginia Chapter

WPXI-TV
Western Pennsylvania & West
Virginia Chapter

Mike Jacques
NBC15 WMTV Madison
Wisconsin Chapter

Leigh Mills
NBC15 WMTV Madison
Wisconsin Chapter

Milaine Mills
WFRV CBS 5
Wisconsin Chapter

NBC15 WMTV Madison
Wisconsin Chapter

John Stofflet
NBC15 WMTV Madison
Wisconsin Chapter

WFRV CBS 5
Wisconsin Chapter

Dr. William Dameshek Award

This award honors the memory of Dr. William Dameshek, who was a pioneer in developing chemotherapy protocols and who founded the core hematology journal Blood and served as its editor for many, many years.

This award recognizes nationally recognized notables and celebrities who have lent their voice and image to advance the LLS mission.

Lila Javan
Founder Climb 2 Cure
California Southland Chapter

Charlie Schlatter
Acclaimed Entertainer
California Southland Chapter

John Quiñones
ABC Television Host
South Central Texas Chapter

Donors

We gratefully acknowledge the individuals, foundations and corporations that generously supported LLS's mission during this fiscal year.

Pharmaceutical Funding Legend

- PA Patient Access
- PP Public Policy
- R Research
- C Campaign

* Denotes multi-year commitment

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 Cynthia and Frank Gasztonyi*
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 Gilead Sciences Inc. PA
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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.

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† We proudly recognize John Kellenyi, generous, longtime supporter and Beat AML Campaign co-chair, for his leadership, compassion, and commitment.

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LLS Initiatives and Portfolios are groups of research projects and patient access & advocacy programs targeted toward a specific blood cancer and/or impact area. The list below includes donors that generously invested in a specific LLS Initiative or Portfolio during this fiscal year.

The Harry T. Mangurian, Jr. Beat AML Initiative is funded in part by the Altschul Foundation, AmeriHealth, The Ashton Fund, Monica and Timothy Babich, Anna and Dean Backer, Lori and Scott Baxter, Beat AML for Sarah Mattice, the Bloomhall Family, the Boldt Family Philanthropy Fund, the Cal Turner Family Foundation, the Charles Engelhard Foundation, the Charles T. Bauer Foundation, the Charter Foundation, The Circle of Service Foundation, Liz and Michael Copley, The Cora and John H. Davis Foundation, The Dick and Betsy DeVos Family Foundation, Christopher Dillard, The Dougherty Family Foundation, Karen and Jack Fish, The FM Kirby Foundation, the Family of Shirley Rocca, Samuel Freeman Charitable Trust, Cynthia and Frank Gasztonyi, Emery and Thomas Greenwood, The Grizzard Family Foundation, The Harry T. Mangurian, Jr. Foundation, Inc., Ray Haupt, The Hearst Foundation, Inc., Gayle and Jeff Helman, HFF, Inc., The Hildegarde D. Becher Foundation, Inc.,

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