

LEUKEMIA

LYMPHOMA

MYELOMA



**The Leukemia &  
Lymphoma Society**  
*Fighting Blood Cancers*

2005 Annual Report

# our mission

**Cure leukemia, lymphoma, Hodgkin's disease and myeloma, and improve the quality of life of patients and their families.**

Over its history, the Society has been the recognized leader in the fight against leukemia. Our name change to The Leukemia & Lymphoma Society in 2000 was simply perception catching up to reality. The Society's objective is to find cures for *all* blood cancers, and to be the leading resource for patients battling *all* of these cancers.

This year, the Society took the first step in making access to specific information and services simpler for patients with these cancers. We developed a color-coding system for the three main categories of blood cancers: Our new signature colors are **green** for leukemia, **gold** for lymphoma and **blue** for myeloma. Any information that is relevant to all the diseases is coded **burgundy**. All print materials prepared for patients during this year reflect the new system, making access to important information and resources more efficient. You'll also see our new colors in such e-newsletters as *LeukemiaLinks*, *LymphomaLinks* and *MyelomaLinks*.

The next step will be to extend the new system to other venues, including access to information on the Society's Web site.

This year's Annual Report displays the new colors with pride. They represent the ongoing efforts to constantly improve on the ways the Society serves and supports patients and those who love and care for them.

# leadership message




We are fortunate to be able to report that fiscal year 2005 was a banner year for the Society in many ways. Let's start with revenue. The Society raised \$218.6 million through private donations, corporate gifts and our various fundraising campaigns – that's \$38 million more than we raised in fiscal 2004. Our already successful campaigns such as Team In Training® and Light The Night® Walk were even more productive in fiscal 2005 (for information on individual campaigns, please turn to pages 12 and 13 of this report). And our donor development initiatives have shown impressive growth – a 38 percent increase in revenue over last year, to more than \$25 million in fiscal 2005.

The big story of the year is not just our success as fundraisers, but also our success as prudent stewards. Since its founding in 1949, the Society has been steadfast in pursuing its mission: Cure leukemia, lymphoma, Hodgkin's disease and myeloma, and improve the quality of life of patients and their families. In fiscal 2005, we were able to strengthen our commitment, supporting four new Specialized Center of Research (SCOR) grants and renewing two others – for a total of six SCORs awarded in the fiscal year, a Society record. More money for the best research globally means more research successes; and more research successes mean greater hope for the hundreds of thousands of patients battling leukemia, lymphoma and myeloma.

Finally, The Leukemia & Lymphoma Society of Canada became part of the Society effective July 1, 2004, and this year's annual report is the first to include our Canadian operations. We are pleased to be serving the needs of patients and families in Canada as well as in the United States.

Until the day comes when we can finally say we've defeated blood cancers, the Society will be here to help guide patients and their families on the cancer journey. In fiscal year 2005, the Society had 2.5 million contacts with patients, caregivers and healthcare professionals, through our Web site, Information Resource Center, education programs and chapter-based outreach.

Yes, we made great progress in advancing our mission in fiscal 2005, thanks to the dedicated volunteers, employees, donors and researchers who helped make the year so successful. We are looking forward to doing even more in fiscal 2006!

  
**Dwayne Howell**  
President & CEO

  
**John M. Kamins**  
Chairman



# 2005 leukemia highlights

## research

In the fight against blood cancers, leukemia research has arguably led the way, with major innovations in the development and testing of targeted therapies in just the past five years. Gleevec®, the first product of this research, was only the beginning. This Society-funded breakthrough has led to additional studies that are further advancing treatment options for patients with chronic myelogenous leukemia (CML) and for those battling acute myelogenous leukemia (AML) and acute and chronic lymphocytic leukemia (ALL and CLL). They include:

- The Society funded a new Specialized Center of Research (SCOR) grant, *Targeted Inhibition of Oligomeric Translocation Products in AML, CML and ALL*, led by John Bushweller, Ph.D., the University of Virginia. The five-year project will focus on new therapies for Gleevec-resistant CML patients and AML and ALL patients who do not respond to standard therapies. This SCOR expands on current knowledge about the specific genetic defects that create malignancies in blood cells that harbor them, and on the successful application of Gleevec to many patients with CML.
- Charles Sawyers, M.D., UCLA School of Medicine, presented findings at the 46th Annual Meeting of the American Society of Hematology (ASH) for a new agent, BMS-354825. In clinical trials of this agent, 86 percent of early-stage CML patients resistant

to Gleevec experienced a complete hematological remission. Dr. Sawyers, a SCOR team leader, credited earlier Society-funded research on Gleevec resistance with his ability to move ahead with recent, highly successful clinical trials.

- Varsha Gandhi, Ph.D., The University of Texas M.D. Anderson Cancer Center, received a Translational Research Program (TRP) grant from the Society for her work, *DNA Independent Strategy to Target CLL*. Many types of leukemia are caused by increased cell proliferation and are frequently treated with drugs that target DNA. In contrast, CLL expansion is more often associated with decreases in leukemic cell death. Dr. Gandhi's research focuses on a chemotherapeutic agent called chlorinated adenosine (8-Cl-Ado), which has been shown to cause CLL cell death in laboratory models by decreasing energy stores and the production of new RNAs, both critical to cell survival. Dr. Gandhi will now study what happens when 8-Cl-Ado is introduced into fresh peripheral, (circulatory) blood cells obtained from patients with CLL. The objective is to advance this agent to clinical trials.

“We're currently testing a new agent, BMS-354825, in clinical trials among CML patients resistant to Gleevec, and it shows tremendous promise for getting patients into complete hematological remission. Earlier Society-funded research we did on Gleevec resistance enabled us to get to this point.”

Charles Sawyers, M.D., UCLA School of Medicine



## hunter's story

“On the Friday afternoon when the doctor announced that our 10-month-old son had leukemia, I was very frightened even though I wasn't 100 percent sure what leukemia was. It was a great reassurance when, by Monday afternoon, the Society had contacted our home and was helping us cope with the diagnosis. They followed up regularly and continued to supply information as my son's situation changed.”

• Lori Ruderman, mother of 6-year-old Hunter, leukemia survivor.

## patient services

In 2005, the Society offered new educational and support programs and services to meet the needs of patients battling AML, CML, ALL and CLL.

A small sample of new Society programs, services and materials follows:

- *New Approaches to CLL: The Changing Treatment Landscape*, featured world-renowned hematologist/oncologist Michael Keating, M.D., The University of Texas M.D. Anderson Cancer Center. A better understanding of how leukemia cells work and grow has led to targeted therapies for individual patients, and more refined diagnostic tests have enabled doctors to devise smarter treatment strategies for all patients. In this program, Dr. Keating discussed the latest news about CLL, as well as clinical trials that might lead to even better treatments in the future.
- *Medical Update on AML: New Treatments and Blood Stem Cell Transplantation*, was jointly presented by the Society, the National Bone Marrow Donor Program and CancerCare. The program featured Selina Luger, M.D., University of Pennsylvania Cancer Center, who presented an overview of AML; and J. Douglas Rizzo, M.D., Medical College of Wisconsin, who discussed treatment options, including marrow and blood stem cell transplantation.
- *CML: Ask the Expert*, a telephone education program, featured Stephen D. Nimer, M.D., head of the Division of Hematologic-Oncology, Memorial Sloan-Kettering Cancer Center. The entire one-hour session was devoted to Dr. Nimer fielding questions from the audience, a format of great value to participants.
- *New Discoveries in CML*: This teleconference featured two distinguished experts from M.D. Anderson: Francis J. Giles, M.B., M.D., F.R.C.P.I., F.R.C.Path, professor of medicine, Department of Leukemia; and Moshe Talpaz, M.D., professor of medicine, Department of Experimental Therapeutics. They discussed the latest information on CML therapies and the future direction of CML research, and they answered questions from the audience about CML clinical trials, newer treatments and other topics of interest.
- An updated booklet, *Acute Lymphocytic Leukemia*, provides information on this cancer, current treatments, new research directions and emotional aspects of managing the disease.



# 2005 lymphoma highlights

## research

Below are just three examples of outstanding Society-sponsored lymphoma research, including laboratory studies, clinical trials and a collaborative Specialized Center of Research (SCOR) project, all of which will help advance the search for cures.

- A SCOR grant was awarded to Tak Mak, Ph.D., Advanced Medical Discovery Institute, University of Toronto, for a five-year project, *Signaling Pathways in Lymphoma and Leukemogenesis*. These collaborative studies will increase our understanding of lymphoma and leukemia processes and direct the development of new anti-cancer agents and clinical trials. Dr. Mak and his team will identify how genetic defects in blood stem cells cause the formation of rare cancer stem cells that expand to form lymphomas and leukemias.
- A Translational Research Program (TRP) grant to Alain Rook, M.D., University of Pennsylvania, was renewed this year for his ongoing investigation into promising new therapies for patients with T-cell malignancies. Dr. Rook and his team discovered that immune system cells in patients with extensive cutaneous T-cell lymphoma (CTCL) were typically not producing a molecule called CD40L, rendering them unable to attack and kill lymphoma cells. In the laboratory, synthetic CD40L markedly improved immune cell anti-lymphoma activity. Dr. Rook's new study, *CD40 Ligand Defect in Cutaneous T-Cell Lymphoma*, will investigate the cellular and molecular reasons for the CD40L effect with a goal of administering the new drug in clinical trials to treat patients with advanced CTCL.
- Weiguo Zhang, Ph.D., Duke University Medical Center, received a Career Development Program (CDP) grant for a study titled *Adaptor Proteins in Lymphocyte Activation*. The research studies two molecules, LAT and LAB, found in certain immune cell (lymphocyte) membranes. These molecules were shown in previous studies to be essential for the lymphocyte activation and development that is needed for effective immune responses

against tumor cells. Ongoing studies in mice will determine how these proteins function in the immune system. Results will likely help in the development of a new class of molecularly targeted drugs for patients with lymphoma and leukemia.



“**Thanks to our Society SCOR grant, we’re able to develop customized lymphoma vaccines that we hope will trigger an immune response specifically against an individual’s tumor. This will make the first treatment the best treatment for that patient.**”

Ronald Levy, M.D., Stanford University School of Medicine

## vaithee’s story

“**The Society has helped us in so many ways — from financial support for expenses not covered by health insurance to tickets to baseball games to keep our spirits up. Through the First Connection program I was able to talk to someone who is living healthy and cancer free. That was a great morale booster in a dark time.**”

• Subramanian “Vaithee” Vaitheeswaran, non-Hodgkin lymphoma survivor.



## patient services

A number of new educational and support programs were developed this year to answer the needs of patients battling Hodgkin and non-Hodgkin lymphoma.

A small sample of new programs follows:

- *Information for the Newly Diagnosed: A Patient’s Guide* is part of our ongoing program, *Insights Into NHL*, a year-long series of teleconferences and newsletters for non-Hodgkin lymphoma (NHL) patients and families. This telephone education program featured Andrew Zelenetz, M.D., chief, Lymphoma Service, Memorial Sloan-Kettering Cancer Center. Dr. Zelenetz explained the importance of diagnosing the sub-type of lymphoma and determining its location(s) in the body, stage of development and other factors to ensure the best treatment. Clinical trials also were discussed, and Dr. Zelenetz answered questions from the audience.
- *Meet the Expert on Non-Hodgkin Lymphoma* was updated this year and offered at chapters across the nation to share new information on NHL with patients at the community level. This informative program featured local lymphoma experts and cancer-care professionals.
- *Emerging Therapies for Orphan Lymphomas: Cutaneous T-Cell, Peripheral T-Cell, Mantle Cell, Mucosa-Associated Lymphoid Tissue (MALT) and Waldenström’s Macroglobulinemia*, a teleconference, featured Francine Foss, M.D., Ph.D., F.A.C.P., associate professor of medicine, director, Lymphoma Service, Tufts New England Medical Center; David J. Inwards, M.D., assistant professor of medicine, practice chair, Hematology, Mayo Clinic College of Medicine; and Morie A. Gertz, M.D., professor of medicine, division chair, Hematology, Mayo Clinic College of Medicine. These “orphan” lymphomas (meaning that they affect fewer people than the more common types of this cancer) were explained along with the latest treatment advances and clinical trials.



# 2005 myeloma highlights

## research

Three new, Society-funded research programs are examples of current efforts in the search for improved therapies and cures.

- A Translational Research Program (TRP) grant was renewed this year for David Avigan, M.D., Beth Israel Deaconess Medical Center. In previous studies, whole myeloma tumor cells and normal immune cells, both taken from a patient, were fused, and these fused cells were used to stimulate (immune) T cells to recognize and kill myeloma cells from the same patient. In his new study, *Vaccination with Dendritic Cell Tumor Fusions in Conjunction with Stem Cell Transplantation as a Novel Immunotherapy for Multiple Myeloma*, Dr. Avigan will conduct clinical trials in which stem cell transplant patients with myeloma will be immunized with a customized fusion vaccine to determine whether these vaccines will improve chances for patient survival.
- Lawrence Lum, M.D., Roger Williams Medical Center, received a TRP grant for a project called *Circumventing Rituximab Resistance in Patients with B Cell Malignancies*. Dr. Lum will study the effects of a molecule he created, CD20Bi, on myeloma and lymphoma cells. The molecule links a drug used to fight these cancers, rituximab, with a patient's own T cells. Dr. Lum's new research will determine whether patients who are resistant to rituximab can benefit from multiple infusions of their own rituximab-armed immune cells, following chemotherapy and stem cell transplantation. If successful, this clinical study will improve survival and decrease relapse rates for myeloma and lymphoma patients.

- Jing Chen, Ph.D., Emory University, received a Career Development Program grant for *Molecular Therapeutic Strategies in Multiple Myeloma: Targeting FGFR3*. This study is likely to provide information about the role of the protein FGFR3 in causing multiple myeloma. The research may also provide new strategies to improve treatment outcomes, since about 15 percent of myeloma patients have a genetic abnormality that causes inappropriate FGFR3 expression.



**“Our Translational Research Program grant from the Society is helping us conduct clinical trials of patients with B cell malignancies who are resistant to rituximab. If we're successful, we'll be able to arm patients' T killer cells with the targeting antibodies and improve their survival and decrease relapse.”**

*Lawrence Lum, M.D., Roger Williams Medical Center*



## patient services

The Society provided several new myeloma resources this year. These are just a few of the Society's programs and services for myeloma patients, their families and caregivers:

- *The Latest News About Myeloma* featured renowned hematologist Seema Singhal, M.D., director, Multiple Myeloma Program, Northwestern University Medical School/Robert H. Lurie Comprehensive Cancer Center. She shared her optimism about the future of treatment for this cancer and provided updates on new therapies and combination treatments, clinical trials, genetic testing and other factors that are dramatically changing the landscape for myeloma patients.
- *Exploring Myeloma* was launched to provide patients with a new educational resource. Led by local blood cancer experts, *Exploring Myeloma* presents a thorough overview of the cancer in an easy-to-follow, one session, classroom format. The program, piloted this year in seven Society chapters, includes a one-hour slide presentation, followed by an hour-long Q&A with the experts. *Exploring Myeloma* also examines the emotional and social aspects of a myeloma diagnosis. It is being offered at all Society chapters in 2006.
- Two new educational booklets were created this year: *Myeloma* provides a comprehensive overview of the cancer, with segments on the disease, how it's detected, treatment options and what the future for this disease may hold, based on today's research. Social and emotional aspects are also explored. *Myeloma: A Guide for Patients and their Families* gives information on how to help manage this cancer from diagnosis through treatment.

## judy's story

**“I began suffering from health issues in 1999, but it took two years of specialists and complicated tests to come up with the devastating diagnosis: multiple myeloma. Thankfully, the Society was there, helping me make informed decisions about my care and making it easier for me to explain myeloma to my concerned friends and family.”**

• *Judy Dixon, myeloma survivor*



# 2005 blood cancer highlights

## research

In addition to funding research focused on specific blood cancers, the Society invests in research that holds promise for finding cures and improved therapies across the entire blood cancer spectrum. The following are examples of important studies:

- Jose Villadangos, Ph.D., Walter & Eliza Hall Institute of Medical Research, received a Career Development Program (CDP) grant to study the *Control of Antigen Presentation, Cross-Presentation and Migration in Dendritic Cells*. He is studying one way in which our immune system can fight cancer. This involves anti-cancer "killer" T cells that are recruited by other immune system cells known as dendritic cells (DC). These cells take parts of cancer cells, break them into smaller pieces and display these pieces to the killer cells, which recognize them. The killer cells then seek and destroy other, related cancer cells. However, cancer cells sometimes avoid detection by dendritic cells, and then a tumor can expand. To get around this limitation, Dr. Villadangos will obtain dendritic cells from patients and put them in the test tube with cancer cell pieces to generate "DC vaccines." The vaccines can then be re-introduced to patients to activate anti-cancer killer cells. He will learn how the dendritic cells obtain the cancer cell pieces, process them and display them on their surfaces. This knowledge is likely to improve methods for generating DC vaccines that will have broad applications in anti-cancer therapies.
- David Scadden, M.D., Massachusetts General Hospital, received a Translational Research Program grant for the study *Therapeutic Manipulation of the Stem Cell Niche*. Hematopoietic stem cells are the cells from which all normal red and white blood cells derive, and adult stem cell transplantation is an important therapy for individuals with advanced leukemia, lymphoma or myeloma. Unfortunately, transplant success depends in part on the number of stem cells that can be recovered from donors, and blood stem cells are rare. Dr. Scadden has discovered a drug, parathyroid hormone (PTH), that might increase pre-transplant

stem cell harvests. Dr. Scadden and his colleagues will test the effect of PTH on the number of adult blood stem cells in a mouse transplant model and in human patients. If PTH treatment increases the stem cell recovery rate, it could be used to improve the successful application of stem cell transplants for hematologic malignancies.

- David Weinstock, M.D., Memorial Sloan-Kettering Cancer Center, received a CDP grant to study the chromosomal breakage and exchange that results in an abnormality called a "translocation," commonly found in various types of blood cancers. The *Chromosomal Translocations after RAG-Mediated DNA Double Strand Breaks* project is aimed at understanding how chromosome breaks occur and how normal cells repair them. Using a novel system they have developed, Dr. Weinstock and his group will determine which proteins prevent and which ones facilitate translocation formation. In addition, they will study how chemotherapies for various human cancers can promote translocation formation, producing secondary blood cancers. The ultimate goal of this project is to be able to prevent chromosome translocations and block blood cancer formation.

## patient services

In addition to disease-specific information and services, the Society provides resources of relevance and interest to all blood cancer patients. This is a small sample of programs and materials made available this year:

- *Breaking Through the Age Barrier: Getting the Best Cancer Treatment*, is a series of chapter-based educational workshops launched this year. More than half of all cancers occur in people older than 65, and these patients may need special attention when it comes to cancer treatment. The program helps deter the outdated notion that people in this age group are "too old" to benefit from therapies that are standard for younger segments of the population. The workshops familiarize older blood cancer patients and their caregivers with information on treatments



The Society's free information programs and services for blood cancer patients, their families and caregivers are accessible in a variety of user-friendly venues:

- Call (800) 955-4572 or email ([infocenter@LLS.org](mailto:infocenter@LLS.org)) an information specialist at our Information Resource Center
- Visit our Web site at [www.LLS.org](http://www.LLS.org)
- Learn the latest about any of the blood cancers through our online education workshops and teleconferences, archived on our Web site
- Visit or contact any of our 66 chapters in the United States and Canada, providing information and support services at the community level

to help them communicate more effectively with healthcare professionals. The Comprehensive Geriatric Assessment, a checklist to help oncologists evaluate older patients' capacity to undergo treatment and side effects, was introduced as part of this program.

- Also published this year is *A Toolkit for Older Adults with Cancer and Their Caregivers*, which includes booklets on choosing a healthcare team, understanding treatment options, clinical trials and financial matters; and a guide to help caregivers understand the ins and outs of their important role.
- *Cognitive and Late Effects Related to Childhood Cancer* is a teleconference education program featuring Daniel Armstrong, Ph.D., University of Miami School of Medicine. In this program, Dr. Armstrong discusses new research on the potential long-term effects of cancer treatment on a child's ability to learn and, eventually, to work and participate in social relationships. The potential effects of chemotherapy and radiation therapy were discussed, along with some of the educational and pharmaceutical measures being used to address cognitive problems that can result from cancer treatment. The special needs of these children with respect to individualized education plans were also addressed.

## advocacy

Advocates for blood cancer patients faced many legislative challenges in 2005, but the Society was ready, scoring some notable successes for cancer research and education.

Our advocacy efforts strengthened in March during the annual Mission Day in Washington, D.C. More than 250 Society supporters lobbied legislators to increase funding for various medical programs important to cancer patients.

Their efforts paid off. Despite significant federal budget cuts, the Society was able to secure an additional \$5 million for blood cancer research at the U.S. Department of Defense, and an additional \$5 million for blood cancer education provided by the Centers for Disease Control and Prevention.



# 2005 fundraising highlights

## light the night

Light The Night Walk continued its impressive growth as a leading national charity walk. Launched in 1998, Light The Night is held every fall in communities across the United States and Canada, celebrating and commemorating lives touched by cancer. In fiscal year 2005, nearly 175,000 people participated — the most ever — raising \$25 million to help advance the Society's mission — a 36 percent increase over the previous year. The Society also welcomed Ray Everham, NASCAR great and long-time Society friend, as national Light The Night chairperson. Everham's popularity and prestige in the sport helped promote Light The Night to the huge NASCAR audience.



## team in training

Team In Training (TNT), the world's largest endurance sports training program, enjoyed its best year ever. More than 35,000 purple-clad TNT runners, walkers, cyclists and triathletes participated in over 60 events around the country, raising nearly \$98 million to help advance the Society's mission. A milestone was reached last October when 9,000 runners and walkers raised \$10 million at The Nike 26.2, A Marathon for Women to Benefit The Leukemia & Lymphoma Society. The inaugural event, since renamed the Nike Women's Marathon, achieved two important "firsts": the first marathon dedicated to a single charity and the first marathon in which all participants had the opportunity to raise funds to help the Society find cures for cancer.

## school and youth

School & Youth<sup>SM</sup> Programs offer children hands-on experiences that cultivate caring, respect and the value of helping others while raising much-needed funds to help advance our mission. In 2005, 18 percent of all schools nationwide (kindergarten through 12th grade) — the most ever — signed up to participate in School & Youth's Pennies for Patients<sup>®</sup>, Pasta for Patients and HOP for Leukemia & Lymphoma<sup>SM</sup>. Soccer Kicks for Cancer<sup>SM</sup>, the newest School & Youth addition, geared toward young soccer players, continued its national expansion.



## donor development

The Society's dynamic research programs depend on the contributions of generous donors. Fiscal year 2005 was no exception. Donor development revenue increased to more than \$25 million — a 38 percent increase in a single year. The gifts contributed to funding such Society research initiatives as the Specialized Center of Research, Translational Research Program and Career Development grants, as well as chapter and Home Office-based patient service programs.





# research grants\*

## Specialized Center of Research<sup>1</sup>

**Jerry Adams, PhD • 2002<sup>2</sup>**  
Walter & Eliza Hall Institute  
of Medical Research

**Irwin D. Bernstein, MD • 2003<sup>3</sup>**  
Fred Hutchinson Cancer  
Research Center

**John Bushweller, PhD • 2005<sup>4</sup>**  
University of Virginia

**John C. Byrd, MD • 2006<sup>5</sup>**  
The Ohio State University

**Selina Chen-Kiang, PhD • 2001**  
Weill Medical College  
of Cornell University

**Riccardo Dalla-Favera, MD • 2004<sup>6</sup>**  
Columbia University

**Brian J. Druker, MD • 2006<sup>7</sup>**  
Howard Hughes Medical Institute  
Oregon Health & Science University  
Cancer Institute

**James Griffin, MD • 2006<sup>8</sup>**  
Dana-Farber Cancer Institute

**Helen Heslop, MD • 2004**  
Baylor College of Medicine

**Carl June, MD • 2002<sup>9</sup>**  
University of Pennsylvania

**Thomas J. Kipps, MD, PhD • 2006**  
University of California, San Diego

**Ronald Levy, MD • 2006**  
Stanford University School of Medicine

**Scott Lowe, PhD • 2004<sup>10</sup>**  
Cold Spring Harbor Laboratory

**Tak Mak, PhD • 2005**  
Advanced Medical Discovery Institute  
University of Toronto, Canada

**Stephen Nimer, MD • 2002<sup>11</sup>**  
Memorial Sloan-Kettering Cancer Center

**Cheryl L. Willman, MD • 2006**  
University of New Mexico  
Health Sciences Center

## Career Development Program: Scholars

**Peter Adams, PhD • 2004**  
Fox Chase Cancer Center

**David Allman, PhD • 2005**  
University of Pennsylvania

**Francisco Asturias, PhD • 2002**  
Scripps Research Institute

**Susan Biggins, PhD • 2006**  
Fred Hutchinson Cancer  
Research Center

**Katherine Borden, PhD • 2001**  
University of Montreal, Canada

**James Bowie, PhD • 2002**  
University of California, Los Angeles

**Randy Brutkiewicz, PhD • 2004**  
Indiana University School of Medicine

**Anthony Capobianco, PhD • 2002**  
Wistar Institute

**J. Don Chen, PhD • 2001**  
University of Medicine and Dentistry  
of New Jersey

**Zhijian Chen, PhD • 2003<sup>12</sup>**  
University of Texas

**Genhong Cheng, PhD • 2001**  
University of California, Los Angeles

**Karlene Cimprich, PhD • 2005**  
Stanford University School of Medicine

**Pamela Correll, PhD • 2003**  
Pennsylvania State University

**Patricia Cortes, PhD • 2002**  
Mount Sinai School of Medicine

**Chris Counter, PhD • 2003**  
Duke University Medical Center

**John Crispino, PhD • 2006**  
University of Chicago

**Blossom Damania, PhD • 2006**  
University of North Carolina  
at Chapel Hill

**James DeGregori, PhD • 2001**  
University of Colorado  
Health Sciences Center

**Wei Du, PhD • 2004**  
University of Chicago

**Michael Eck, MD, PhD • 2003**  
Dana-Farber Cancer Institute

**Christine Eischen, PhD • 2005**  
University of Nebraska Medical Center

**Xin-Hua Feng, PhD • 2004**  
Baylor College of Medicine

**Margaret Goodell, PhD • 2002<sup>13</sup>**  
Baylor College of Medicine

**Jonathan Graff, MD, PhD • 2002<sup>14</sup>**  
University of Texas

**H. Leighton Grimes, PhD • 2006**  
University of Louisville

**Wei Gu, PhD • 2002<sup>15</sup>**  
Columbia University

**Xi He, PhD • 2006**  
Children's Hospital Boston

**Theodore Jardetzky, PhD • 2002<sup>16</sup>**  
Northwestern University

**Jin Jiang, PhD • 2004**  
University of Texas

**Dong-Yan Jin, MD, PhD • 2002**  
University of Hong Kong

**Craig Jordan, PhD • 2004**  
University of Rochester

**Jae Jung, PhD • 2001**  
New England Regional Primate  
Research Center

**Scott Keeney, PhD • 2006**  
Memorial Sloan-Kettering Cancer Center

**Michelle Kelliher, PhD • 2004<sup>17</sup>**  
University of Massachusetts  
Medical School

**William Kerr, PhD • 2003<sup>18</sup>**  
University of South Florida

**Nigel Killeen, PhD • 2001**  
University of California, San Francisco

**Scott Kogan, MD • 2005<sup>19</sup>**  
University of California, San Francisco

**Anthony Koleske, PhD • 2003**  
Yale University

**Kerry Kornfeld, MD, PhD • 2002<sup>20</sup>**  
Washington University

**Stephen Kron, MD, PhD • 2003<sup>21</sup>**  
University of Chicago

**Matthew Krummel, PhD • 2006**  
University of California, San Francisco

**Gustavo Leone, PhD • 2005**  
The Ohio State University

**Daniel Lew, PhD • 2001**  
Duke University Medical Center

**Xin Lin, PhD • 2005**  
University of Texas

**Hsiou-Chi Liou, PhD • 2001**  
Weill Medical College  
of Cornell University

**Fenyong Liu, PhD • 2002<sup>22</sup>**  
University of California, Berkeley

**Clifford Lowell, MD, PhD • 2002**  
University of California, San Francisco

**Hiten Madhani, MD, PhD • 2006**  
University of California, San Francisco

**Andreas Matouschek, PhD • 2003**  
Northwestern University

**Danesh Moazed, PhD • 2004**  
Harvard Medical School

**George Mosialos, PhD • 2005**  
Biomedical Sciences Research Center

**Matthew O'Connell, PhD • 2001**  
Mount Sinai School of Medicine

**David Pellman, MD • 2001**  
Dana-Farber Cancer Institute

**Christoph Plass, PhD • 2003**  
The Ohio State University

**Ishwar Radhakrishnan, PhD • 2005**  
Northwestern University

**Linda Resar, MD • 2006**  
Johns Hopkins University  
School of Medicine

**Theodora Ross, MD, PhD • 2006**  
University of Michigan Medical Center

**Guy Sauvageau, MD, PhD • 2003**  
University of Montreal, Canada

**Stephen Schoenberger, PhD • 2006**  
La Jolla Institute for Allergy  
and Immunology

**Ralph Scully, MD, PhD • 2006**  
Beth Israel Deaconess Medical Center

**David Seldin, MD, PhD • 2001**  
Boston Medical Center

**David Sharp, PhD • 2005**  
Albert Einstein College of Medicine

**Ali Shilatifard, PhD • 2002<sup>23</sup>**  
Saint Louis University  
School of Medicine

**Ramesh Shivdasani, MD,  
PhD • 2001**  
Dana-Farber Cancer Institute

**Peter Sicinski, MD, PhD • 2006**  
Dana-Farber Cancer Institute

**Tomasz Skorski, MD, PhD • 2001**  
Temple University

**Reshma Taneja, PhD • 2003**  
Mount Sinai School of Medicine

**William Tansey, PhD • 2002**  
Cold Spring Harbor Laboratory

\* The year displayed after each grant represents the first year of grant activity.

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<sup>2</sup> Dr. Jerry Adams is funded in part by Eli Lilly and Company.

<sup>3</sup> Dr. Irwin Bernstein is funded by an anonymous donor.

<sup>4</sup> Dr. John Bushweller is funded in part by the Peter Berg Memorial Research Fund.

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Dresser Flow Solutions	Hazmet Environmental	Millennium Pharmaceuticals, Inc.	Protiviti
Duffy Mechanical Corporation	Hewitt Associates	Mills Limited Partnership	Pulse EFT Association
Duquesne Light	Hewlett Packard	MK Real Estate Group, Inc.	PVS Chemicals, Inc.
E*TRADE Financial	Highmark, Inc.	Mr. and Mrs. Alfred T. Mockett	Dr. and Mrs. Richard Raizman
Easterns Automotive Group	HITT Contracting, Inc.	Mohegan Sun	RBC Foundation
EDS	Howard Capital Management, Inc. an E*Trade Co.	Mondavi	Realty Capital Partners or Herndon LLC
EFW, Inc.	Howard County General Hospital	Morris Levine Key Food Stores Foundation, Inc.	Mr. Allen B. Rector
James L. Eichberg Foundation	Hy-Vee, Inc.	Motorola	RE/MAX Harbor Realty
Eli Lilly & Company	Ilex Oncology	Mount Gay Rum	Reliable Churchill LLP
El Paso Corporate Foundation	Independence Air	Munger, Tolles & Olsen	Mr. and Mrs. Bruce Rendina
Employees of FBR	Indianapolis Power & Light	Mylan Charitable Foundation	Riverside Health System Foundation
Enterprise Rent-A-Car	Industrial Alliance Pacific	National Commercial Flooring	Robert E. Torray & Company
Epsilon	Insulators Health Hazard Fund	National Cooperative Services Corporation	Royal Bank of Scotland
Equifax, Inc.	The International Society	National Rural Utilities Cooperative Finance Corporation	Rural Telephone Finance Cooperative
Ernst & Young LLP	Jackson Lewis LLP	National Trade Productions	Safeway
Ernst & Young LLP Transaction Advisory Services	JFK Medical Center	Neiman Marcus	San Francisco Bay Area Labor
ESP-Pharma	Jim Koon's Automotive Companies	NeuStar, Inc.	SAP
Esprit Events, Inc.	JP Morgan Chase & Co.	NewMarket Corporation	Satterfield & Pontikes
FedEx Corporation	Kaelin Family Captain's Cup	New Quest Properties	SBC Communications, Inc.
Fidelity National Title Agency	Kaiser Permanente	Niello Company	Scheer Partners, Inc.
Figg Engineering Group	Mr. and Mrs. Alexander L. Karakozoff	Northrop Grumman	Schumacher Family Foundation, Inc.
First Niagara Bank	K-Designers	Novartis Oncology	Scotia Capital
Fisher Investments	Kekst & Company, Inc.	Novartis Pharma Canada, Inc.	Sewell Cadillac
FishHawk Ranch	KPMG LLP	NVR, Inc.	Joseph Sheairs Associates, Inc.
Foodland Supermarkets	Kroger	Octagon	Siemens
Samuel J. and Connie M. Frankino Charitable Foundation	KST Data, Inc.	Oncology Therapeutics Network	Silicon Valley Bank
Fried, Frank, Harris, Shriver & Jacobson	Lakefront Communications, Inc.	Oracle Corporation	Simpson Thacher & Bartlett LLP
Mr. Emanuel J. Friedman	LaSalle Bank	Ortho-Biotech	SK Worldwide
Friedman French Foundation	Lehman Brothers, Inc.	Owen Pharma	Skyy Spirits LLC
Future Tech Enterprises, Inc.	L.E.K. Consulting LLC	Panera Bread of Central Illinois	Slawson Cunningham & Whalen PL
Gary Martin Hays and Associates, PC	Linebarger, Goggan, Blair, Pena & Sampson LLP	Parade	Slumberland
	Lockton Companies	Paymentech	Smart Choice Settlements
	M&T Bank		Smith Barney Citigroup
			Sony DADC

# promotion partnerships

Southern California Edison  
Mr. and Mrs. Mark Spisak  
Sprint  
St. Joseph's/Candler  
SteelFab  
Stock Development LLC  
Kilpatrick Stockton  
StructureTone, Inc.  
Sun Microsystems, Inc.  
Sun Trust Banks, Inc.  
Sun Trust Marine Lending  
Systems Connection of Maryland  
Target  
Tech Village Partners LLC  
Thelan, Reid & Priest LLP  
Thompson, Habib & Denison  
ThoughtWorks  
Edgar A. Thronson Foundation, Inc.  
Title, Inc.  
Robert E. Torray & Company  
Toyota  
Turner Construction Company  
Turner Interiors  
UBS Investment Bank  
UF & Shand's Cancer Center  
UNISYS  
United Jewish Endowment Fund  
University Hospital  
University Hospitals Health System  
Ireland Cancer Center  
University of Pittsburgh Medical  
Center  
Versailles Ohio Poultry Days  
Ultimate Frisbee Tournament  
Virginia Mason Medical Center  
Volvo of Savannah  
Wachovia Corporation (First Union)  
Wachovia Securities  
Washington Building & Construction  
Trades Council  
Washington Express  
Washington Gas  
Washington Nationals  
Washington Redskins Leadership  
Council  
Waste Management  
Waterfront Properties, Inc.  
Watson Wyatt Worldwide  
WCI Communities  
The Harry & Jeanette Weinberg  
Foundation Incorporated

Weitz & Luxenberg PC  
Wells Fargo  
Westin Santa Clara  
Wheeler Family Foundation  
Mr. and Mrs. Stuart Williams  
Williams & Connolly LLP  
Wilmer, Cutler & Pickering Hale  
and Dorr LLP  
WIN WIN Strategies Foundation  
WIVB-TV, Channel 4  
Yellow Corporation  
XM Satellite Radio

*Promotions are individuals or  
institutions that organize an event  
and donate proceeds to the Society.*

**\$1,000,000 and above**

KGO Newstalk AM 810

**\$500,000 – \$999,999**

DialAmerica Marketing, Inc.

Verizon

**\$100,000 – \$499,999**

A&P/Super Fresh Supermarkets

ABC 7

Burlington Coat Factory

Computer Associates International,  
Inc.

Cub Foods East

Equifax

The Olive Garden Italian Restaurant

Radio Disney AM 1110

Ruth's Chris Steak House – Baltimore

Sports Radio 1130 WDFN

St. Valentine's Day Luncheon and  
Style Show

Team Friends of Allie – Honoring  
Sam Eisenberg and Allie Scott

Windward Homes

WYAY EAGLE 106.7

**\$50,000 – \$99,999**

BIG 100.3

Booz Allen Hamilton

Clear Channel

CompUSA

Great American Insurance Company

**\$10,000 – \$49,999**

Airdrie Optimist Club

Arby's

Austaco – Taco Bell

Bergstrom Automotive

Bowne & Co., Inc.

Luc and Maria Boisclair  
– In Memory of Alex

Charter One Bank  
The Classic Catering People  
Coinstar  
CWP Asset Corp. DBA Mister  
Car Wash  
Department 56  
DEX  
Dominos  
Father Serra C.S.  
Fox 5/UPN20  
Freedom Valu Centers  
Jack Moore Memorial Golf  
Tournament  
KTWV 94.7 The Wave  
The McCormick Tribune Foundation  
Media/Professional Insurance  
Members 1st F.C.U.  
Menkes Ltd. Developments  
Mrs. Fields Cookies  
Option One Mortgage  
Randstad, North America  
RBC Dominion Securities Inc.  
The Regence Group  
Ride of Dreams  
S & T Enterprises, Inc.  
San Par Leukemia Benefit  
Sheraton Gateway  
Shula's, Inc.  
The Susquehanna Ski  
and Snowboard Club  
Vibro-Acoustics  
Volvo of Mississauga  
Waddell & Reed  
Washington Business Journal  
WIVB-TV, Channel 4  
Wisconsin Public Service

## National Man & Woman of the Year

Jim Morrison  
Lizzy Walker Conroy



# the legacy circle

*The Legacy Circle honors those who have included the Society in an estate plan.*

Hugh Albora	Pasquale R. Cheche	David Frantze	Dwayne Howell
Peter Alexas	Thomas Cheek	Jon Freitag	Barbara Hufford
Bruce Allen	David E. Cherry	Paul N. Frimmer	Heather Hunt
Fay Allen	Christina Clapham	Roberta Fuhr	Dr. Brian Hurley
Margaret H. Anderson	Sylvia Clemetson	Albert and Gladys Gardner	William Ianniello
Marjorie Anderson	Paul and Nancy Clendening	Marian Genarro	Charles F. Inglefield
Debra Andrade	Denise Coats	Anna Maria Gentile	Deborah Jaskulski
Mr. and Mrs. David Andrews	Wayne Cope	John A. Geoghegan	Mrs. Lily Marie Jeffreys
James and Eileen Andrews	Michael and Liz Copley	Richard and Jacqueline Geswell	Anne K. Johnson
Kristi Anys	Michelle Cromwell	Patricia Ghiglieri	Harry and Donna Johnson III
Estate of Louise K. Archer	Katherine Wageman-Cook	Douglas Gilbert	Kristen Johnson
Lucy Attner	Dr. Anthony Cortese	Noreen L. Giese	Mrs. Darden Jones
Lorae P. Aumack	Marianne Cotter	Heather Girard	Dan and Leslie Jordanger
Minnie Austin	Raymond Cox	Wade Goehring	John and Judith Kamins
Mr. and Mrs. Jay Barrows	Steve R. Craig and Susan Laine	Jacob and Sara Gold	Patricia Kay
John Bashta	Marilyn J. Crohan	Richard Goldberg	Nathan and Ruthie T. Katz
Mr. and Mrs. Edwin J. Beckley, Jr.	Lydia D'Agosto	Wilma Gottlieb	Michael E. Keefe
Angelo Bardi	Edmund D'Allesio	Miss Barbara Grace	Mr. and Mrs. Christopher J. Kearns
Ruth Bartlett	Judy Davis	Rebecca Ann Grajewski	John B. Kelly
Claudia and Stephen Barto, Jr.	Robert D. Dean	Ruth Granat *	Michael Kerper
Margaret Beers	Dr. and Mrs. Michael L. Dean	Carol Grandaw	Frances Keating
Dennis Beardsley	Carolyn Dee	Mr. and Mrs. Forrest Grosvenor	Annabelle King, MD
Ryan Beagin	David and Connie Dimling	Dan and LaDonna Gubitiz	Sue Kinney-Wieland
Steven R. Bender	Kathy Dirckx	Carter K. D. Guice, Jr.	T. Corey Kipp
Ami Berkowitz	Dorothy Dootson	John Haluck	Monica Klapper
Clyde S. and Rosie Billman	Joel Drake	Mr. and Mrs. Ken Haller	Susan Kobrel
Alexandra Mayes Birnbaum	Harry and Barbara Dunlap	Liliana Hamilton	Karl Koepke
The Stephen Birnbaum Foundation	John Dunn	Keith P. Harenda	Jeff and Teresa Kopietz
Margaret Black	Timothy S. Durst	Joan Haratani	Carmella Kramer
Richard Blond	Agnes Dury	Alice Hatch	Mark and Christine Kraemer
Christopher Blum *	George F. and Evelyn Eckhardt, Jr.	Pat Hauer	Leslie Elliot Krause, Esq.
Lori Blum	Clif Edwards	Kathleen Hays, RN, MSN	Marjo Kremko
Sally Blume	J. Stephen Eickert	Donald P. Heim	R. Scott Krizek
Robert H. and Janet Bohannon	Greg Elfers	Tom and Wendy Henry	Mr. and Mrs. Greg Kulm
James Bolton	Mr. and Mrs. Jeffrey Ellena	Dr. Saul Highman	Janna LaCock
Mart Bort	Judith Erickson	Catherine E. Hildreth	Janet LaVere
William Boyd	Dr. George A. Farber, Sr.	Leila Hittinger	John Lamb, Jr.
Irvin B. Braverman, MD	Lynne E. Fazzi	C. Brooks Hoffman	Lucy Lang
Wilburn Brewer, Jr. *	Arnold Feldman	William Hoffman	Alan P. Laskin
Judith Arner Brown	Harold Fennell	Carol Hogan	William S. Lear
Richard Cahill	Harvey Fernbach, MD	Fay Holzman	Diana Lynn Lee
Scott A. Carroll	Richard Fess	Courtney and Robin Hollar	Gail M. Lee
Jennifer Caves	Helen F. Fisher *	Mr. and Mrs. Steven Hooker	Joseph Lee
Mary Carver	Deidre Fitzpatrick	Jacqueline Hood	Kelli Leffingwell
Colon B. Carter	Thomas L. Fitzpatrick	Jeanie Hoover *	Lon Leneve
Robert Charon	The Honorable Ronald A. Fonseca	Lynn C. Hoover	Paul L. Lewis
	Charles and Evelyn Foster	Beth Hoth	Robert Lindsey
	Mr. and Mrs. James T. Fox	John Harrison Hough	Harvey and Linda Litofsky
	Leo Frank	Roy Hovinen	Geoffrey Lombard

# the legacy circle *continued*

Mr. and Mrs. F. F. Michael Lynch	Edward D. O'Malley	Lorraine Seidel	Dr. Vicque L. Walton-Kimmel
Eric and Becky Mahlum	Mrs. Harry O'Toole	David A. Schick	Beverly G. Warner
Ida Malena	Margaret Olmazu	Maya B. Shenoy	Louise Warner
Georgia Davidis Malone	George Omiros	Norman and Katrine Shorb	Philip F. Warner
Maria Maramag	Rosemary Opbroek	Frank T. Short	Paul Weiden, MD
Dr. and Mrs. Stanley N. Marks	Mary J. Oyer	Frank Sidwell	Phyllis Weil
Greg Martin	Jacqueline Anne Palmenberg	Norbert J. Sieber	Deborah Weinstein
William Martin	Frederic and Wannelle Parvey	Jay and Elaine Silver	James A. Weinberg
Mark E. Mason	Rosa Pena	Linda Sims	Paul and Annie Weiss
Joan Maves	Stephen M. Peters	Tena Simmons	W. Russell Welsh
Robert and Marnee Maylone	Mr. and Mrs. David L. Pfeifle	Irene Skomro	Mr. and Mrs. John Wempe
Rita Meek, MD	Leslea S. Pidgeon	Rose Slotsky	Steven Wescoatt
Rhonda Meeks	William Pike	Mary-Gail Smith	Larry and Kathleen Wheaton
Timothy and Susan Metzger	Lisa Pirrung	Mr. and Mrs. Robert Smith	Dr. and Mrs. Stanley A. White
John and Patty McDonald	Ginette Poitevent	Russell D. Smith	Carl and Hillary Whitley
Thomas and Olive McDonald	George Pooley *	Nicoma Sobolewski	Don Wier
Dorothy McCann	Mr. and Mrs. Chris Post	Jeffrey and Angela Solomonson	Stephen and Terri Williams
Marilyn McFadden	Leila Elizabeth Presniak	John C. Sorrell	Anthony and Michelle Wong
Sylvia McGovern	Mr. and Mrs. Michael Price	Elda Spano	Clara Wood
Carolyn E. McKown	Larry Pyles	James E. Sparkes	Laura B. Worsham
Mr. and Mrs. Clayton McPhail	David B. and Toni Quinty	Barbara A. Spiegel	Mr. and Mrs. Douglas Young
Anthony McPherson	Marty Rauch	Thomas and Joanne Spink	Joseph Yurfest
Lisa A. Mihalik	Diane Raymond	Mark and Carol Spisak	Ed Yurowksi
Paul Hart Miller	Richard and Kathy Reader	Darrin Sprilczuk *	Violet Yurowski *
Tina Marie Milligan	Helen Doss Reed	Carole Stadfield	Thomas and Anne Zak
Suzy Minkoff	Larry E. Reinart	Inez Star	Mr. and Mrs. Scott Zeilinger
Joshua Mitchell, MD	Ernestine Reinert	Richard Steffen	Katherine Zell-Cherry
Ted Mociun	James Relkin	Fred and Simone Stella	Mrs. Ruth Zyskowski
Michael and Tammy Moley	David Rice *	Paula and Phillip Stone	
Dennis F. Moore, MD	Marilyn Richardson	Brian J. Stumm	
Joann Moran	Joseph Russell	Marcie Summerlin	
Mr. and Mrs. Thaddee F. Moreau	Donald G. Rigoni	Dolores Swirin	
Dennis Morris	Ernest Riise	Merideth Tall	
James Morton	Gary and Becky Roberts	Stewart Teichman	
Robert J. Moyle	Judith A. Ross	Gracie Thompson	
Frank Mungo	Mrs. Cyril Rubin	Patricia Trosclair	
Suzanne J. Muntzing	Seth and Carolyn Rudnick	Joe and Lorraine Tumolo	
Oscar Muskopf	Kevin R. Ryan	Heather Turnbull	
Rodman N. Myers	Victor and Jacqueline Sacco	Paul and Debra Vaughn	
Robert J. Myette	William H. Sachs	Joseph and Karen Verdirame	
The Honorable Robert H. Newman	Robert M. Sanders	Bert Vignes	
Tracy Newman	Dee Sanfilippo	Laura Walker	
Robert C. Niles	Thomas J. Scanlon	Mr. and Mrs. Rubin Wallach	
Regina Nizzoli	David and Barbara Schaefer	Michael Walrath *	
Edward Nofer III	Karl Schaeffer	Michael E. Walsh	
Jason North	Ken Scherzer	Dr. Robin Walsh	
Richard F. Nourie	Patrick Schmidt	John E. Walter	
Jeanne Null	Eugene Schmitt *	Kimberly Walton	
Carolyn and Jerry O'Hara	Deborah Scott-Ensley	Phyllis J. Walton	

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*Anonymous (224)*

*Members as of June 30, 2005*

*\* Deceased*

# independent auditors' report

The Board of Directors

The Leukemia & Lymphoma Society, Inc.:

We have audited the accompanying consolidated statement of financial position of The Leukemia & Lymphoma Society, Inc. (the Society) as of June 30, 2005, and the related consolidated statements of activities, cash flows, and functional expenses for the year then ended. These consolidated financial statements are the responsibility of the Society's management. Our responsibility is to express an opinion on these consolidated financial statements based on our audit. The prior year summarized comparative information has been derived from the Society's 2004 consolidated financial statements and, in our report dated October 1, 2004, we expressed an unqualified opinion on those statements.

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

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the financial position of The Leukemia & Lymphoma Society, Inc. as of June 30, 2005, and the changes in its net assets and its cash flows for the year then ended in conformity with accounting principles generally accepted in the United States of America.

**KPMG LLP**

September 30, 2005

New York, NY



# consolidated statement of financial position

The Leukemia & Lymphoma Society, Inc.  
 June 30, 2005  
 (with comparative amounts at June 30, 2004)  
 (in thousands)

	<u>2005</u>	<u>2004</u>
<b>Assets</b>		
Cash and cash equivalents	\$ 6,116	\$ 22,703
Accounts receivable	672	555
Legacies and contributions receivable (note 2)	5,026	5,347
Prepaid expenses	4,246	4,024
Investments, at fair value (note 3)	131,770	83,653
Fixed assets, less accumulated depreciation and amortization of \$7,594 and \$6,289	<u>4,098</u>	<u>3,624</u>
<b>Total assets</b>	<b><u>\$ 151,928</u></b>	<b><u>\$ 119,906</u></b>
<b>Liabilities and Net Assets</b>		
<b>Liabilities:</b>		
Accounts payable and accrued expenses	\$ 17,667	\$ 13,039
Deferred revenue	10,755	6,795
Grants payable (note 4)	<u>56,774</u>	<u>46,613</u>
<b>Total liabilities</b>	<b><u>85,196</u></b>	<b><u>66,447</u></b>
<b>Net assets:</b>		
Unrestricted	59,574	46,674
Temporarily restricted (note 7)	4,495	4,465
Permanently restricted (note 7)	<u>2,663</u>	<u>2,320</u>
<b>Total net assets</b>	<b><u>66,732</u></b>	<b><u>53,459</u></b>
<b>Total liabilities and net assets</b>	<b><u>\$ 151,928</u></b>	<b><u>\$ 119,906</u></b>

See accompanying notes to consolidated financial statements.

# consolidated statement of activities

The Leukemia & Lymphoma Society, Inc.

Year ended June 30, 2005

(with summarized totals for the year ended June 30, 2004)

(in thousands)

	Unrestricted	Temporarily Restricted	Permanently Restricted	Total	
				2005	2004
<b>Revenue</b>					
Campaign contributions	\$ 225,380	\$ 10,782	\$ –	\$ 236,162	\$ 201,104
Less direct donor benefit costs	(32,620)	–	–	(32,620)	(28,394)
Net campaign contributions	192,760	10,782	–	203,542	172,710
Legacies	4,599	72	89	4,760	2,462
Donated services (note 1)	4,205	–	–	4,205	–
Net interest and dividend income (note 3)	2,632	65	–	2,697	841
Net increase (decrease) in fair value of investments	2,711	(18)	15	2,708	3,256
Grant refunds	653	–	–	653	881
Net assets released from restrictions	10,999	(10,999)	–	–	–
<b>Total revenue</b>	<b>218,559</b>	<b>(98)</b>	<b>104</b>	<b>218,565</b>	<b>180,150</b>
<b>Expenses (note 8)</b>					
<i>Program Services:</i>					
Research	54,037	–	–	54,037	42,899
Patient and community service	58,821	–	–	58,821	46,603
Public health education	32,598	–	–	32,598	28,540
Professional education	9,846	–	–	9,846	9,071
Total program services	155,302	–	–	155,302	127,113
<i>Supporting Services:</i>					
Management and general	16,225	–	–	16,225	14,048
Fund raising	35,161	–	–	35,161	30,508
Total supporting services	51,386	–	–	51,386	44,556
<b>Total expenses</b>	<b>206,688</b>	<b>–</b>	<b>–</b>	<b>206,688</b>	<b>171,669</b>
Excess (deficiency) of revenue over expenses	11,871	(98)	104	11,877	8,481
The Leukemia & Lymphoma Society of Canada ("LLSC") net assets as of July 1, 2004 (note 1)	1,029	128	239	1,396	–
<b>Change in net assets</b>	<b>12,900</b>	<b>30</b>	<b>343</b>	<b>13,273</b>	<b>8,481</b>
<b>Net Assets</b>					
Beginning of year	46,674	4,465	2,320	53,459	44,978
End of year	\$ 59,574	\$ 4,495	\$ 2,663	\$ 66,732	\$ 53,459

# consolidated statement of cash flows

The Leukemia & Lymphoma Society, Inc.

Year ended June 30, 2005

(with comparative amounts for the year ended June 30, 2004)

(in thousands)

	2005	2004
<b>Cash flows from operating activities:</b>		
Change in net assets	\$ 13,273	\$ 8,481
Adjustments to reconcile change in net assets to net cash provided by operating activities:		
Net assets of LLSC at merger	(1,396)	-
Net increase in fair value of investments	(2,708)	(3,256)
Permanently restricted revenue collected	(89)	(928)
Depreciation and amortization	1,186	1,209
Changes in assets and liabilities:		
Increase in accounts receivable	(78)	(173)
Decrease in legacies and contributions receivable	321	1,726
Increase in prepaid expenses	(197)	(587)
Increase (decrease) in accounts payable and accrued expenses	4,520	(251)
Increase in deferred revenue	3,848	1,504
Increase in grants payable	9,325	2,911
<b>Net cash provided by operating activities</b>	<u>28,005</u>	<u>10,636</u>
<b>Cash flows from investing activities:</b>		
Purchases of fixed asstes	(1,244)	(937)
Purchases of investments	(202,996)	(70,733)
Sales of investments	158,310	51,115
<b>Net cash used in investing activities</b>	<u>(45,930)</u>	<u>(20,555)</u>
<b>Cash flows from financing activities:</b>		
LLSC cash at merger	1,249	-
Permanently restricted revenue collected	89	928
<b>Net cash provided by financing activities</b>	<u>1,338</u>	<u>928</u>
Net decrease in cash and cash equivalents	(16,587)	(8,991)
Cash and cash equivalents at beginning of year	22,703	31,694
<b>Cash and cash equivalents at end of year</b>	<u>\$ 6,116</u>	<u>\$ 22,703</u>

See accompanying notes to consolidated financial statements.



# consolidated statement of functional expenses

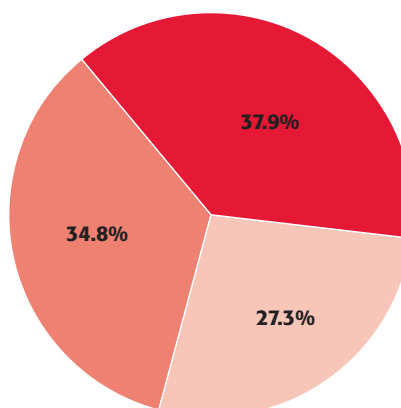
The Leukemia & Lymphoma Society, Inc.  
 Year ended June 30, 2005  
 (with comparative totals for the year ended June 30, 2004)  
 (in thousands)

	Program Services					Supporting Services			Total		Direct donor benefit costs	
	Research	Patient and community service	Public health education	Professional education	Total	Management and general	Fund raising	Total	2005	2004	2005	2004
	Awards and grants	\$51,310	\$ -	\$ -	\$ -	\$51,310	\$ -	\$ -	\$ -	\$51,310	\$41,084	\$ -
Financial aid to patients	-	4,505	-	-	4,505	-	-	-	4,505	4,020	-	-
Donated services	533	3,672	-	-	4,205	-	-	-	4,205	-	-	-
Salaries	557	23,277	10,749	4,396	38,979	5,964	7,881	13,845	52,824	43,612	-	-
Employee benefits and taxes (note 5)	99	4,903	2,660	1,057	8,719	1,345	2,132	3,477	12,196	10,583	-	-
Occupancy	22	2,684	1,524	638	4,868	793	1,117	1,910	6,778	6,423	-	-
Insurance	10	243	167	52	472	73	162	235	707	650	-	-
Telephone	17	1,059	745	167	1,988	232	1,144	1,376	3,364	3,079	-	-
Travel	26	1,052	574	243	1,895	332	413	745	2,640	2,100	11,760	10,859
Printing and supplies	196	4,345	5,835	877	11,253	2,523	7,704	10,227	21,480	20,428	5,758	5,070
Equipment rentals and maintenance	14	811	474	188	1,487	239	387	626	2,113	1,841	-	-
Postage and shipping	75	2,336	3,756	541	6,708	1,218	5,578	6,796	13,504	11,993	-	-
Meetings	591	1,762	852	323	3,528	408	531	939	4,467	3,492	7,331	5,906
Professional fees	560	7,316	4,750	1,166	13,792	2,798	7,683	10,481	24,273	19,978	3,608	2,945
Miscellaneous	12	441	234	107	794	174	168	342	1,136	1,177	4,163	3,614
Depreciation and amortization	15	415	278	91	799	126	261	387	1,186	1,209	-	-
<b>Total expenses</b>	<b>\$ 54,037</b>	<b>\$ 58,821</b>	<b>\$ 32,598</b>	<b>\$ 9,846</b>	<b>\$155,302</b>	<b>\$ 16,225</b>	<b>\$ 35,161</b>	<b>\$ 51,386</b>	<b>\$206,688</b>	<b>\$171,669</b>	<b>\$ 32,620</b>	<b>\$ 28,394</b>

See accompanying notes to consolidated financial statements.

## program services expenses

Research	34.8%
Patient and Community Service	37.9%
Public Health and Professional Education	27.3%



# notes to consolidated financial statements

The Leukemia & Lymphoma Society, Inc.

Year ended June 30, 2005

(with comparative amounts as of and for the year ended June 30, 2004)

## 1. Organization and Significant Accounting Policies

### Organization

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

The Society entered into a merger agreement with Leukemia Research Fund of Canada ("LRFC"), effective July 1, 2004, under which the Society has approval rights over all LRFC resolutions. As part of this agreement, the name of LRFC was changed to The Leukemia & Lymphoma Society of Canada, Inc. ("LLSC"). The merger was accounted for in accordance with purchase method concepts whereby a contribution of LLSC's net assets (at fair value) was recorded by the Society.

### Tax-Exempt Status

The Society qualifies as a charitable organization as defined by Internal Revenue Code Section 501(c)(3) and, accordingly, is exempt from federal income taxes under Internal Revenue Code Section 501(a). Additionally, since the Society is publicly-supported, contributions to the Society 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.

### Principles of Consolidation

The accompanying consolidated financial statements include the accounts of the Society, which encompasses the Home Office of the Society and its sixty three chapters, LLSC, and the Society's not-for-profit affiliates, The Leukemia & Lymphoma Society Research Programs, Inc. and The Leukemia & Lymphoma Society Research Foundation. All significant inter-company and intra-Society accounts and transactions have been eliminated in consolidation.

### Net Asset Classifications

To ensure observance of limitations and restrictions placed on the use of resources available to the Society, 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 the Board of Directors, for the Society to utilize in any of its programs or supporting services.

*Temporarily restricted net assets:* Consist of funds that are restricted by donors for a specific time period or purpose, as well as amounts relating to term endowment or deferred giving arrangements in which the funds must be maintained intact over the lifetimes of the donors.

*Permanently restricted net assets:* Consist of funds that contain donor-imposed restrictions requiring that the principal be invested in perpetuity and that only the income be used. Income earned on these funds may be unrestricted or temporarily restricted, depending upon the donor-imposed restrictions.

### Contributions and Deferred Revenue

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

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

### Donated Services

In 2005, the Society determined that certain of the donated services it received met the criteria for recognition in the financial statements. Specifically, the donated services of family support group facilitators and research grant reviewers have been valued and are reported as both revenue and expense in 2005. Since there is no impact on the reported change in net assets, the Society has not retroactively recorded these donated services in 2004. Society management believes the value of donated services in 2004 was comparable to that in 2005.

### Cash Equivalents

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

### Fixed Assets and Depreciation

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

### Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires the Society's management to make estimates and assumptions that affect the amounts reported in the financial statements and accompanying notes. Actual results could differ from those estimates.

### Summarized Financial Information

The financial statements are presented with 2004 summarized or comparative information. With respect to the statement of activities, such prior year information is not presented by net assets class and, in the statement of functional expenses, 2004 expenses by object are presented in total rather than by functional category. Accordingly, such information should be read in conjunction with the Society's 2004 consolidated financial statements from which the summarized information was derived.

# notes to consolidated financial statements

## 2. Legacies and Contributions Receivable

The Society's legacies and contributions receivable at June 30, 2005 and 2004 consist of unconditional promises to give and legacies for which the underlying wills have been declared valid by the probate court and no other conditions are required to be met. Amounts are scheduled to be received as follows (in thousands):

	2005	2004
Less than one year	\$ 4,795	\$ 5,020
1 to 5 years	256	351
	<u>5,051</u>	<u>5,371</u>
Less discount to present value (discount rate – 5%)	<u>(25)</u>	<u>(24)</u>
Total	<u>\$ 5,026</u>	<u>\$ 5,347</u>

## 3. Investments

The following is a summary of investments at June 30, 2005 and 2004 (in thousands):

	2005		2004	
	Cost or Donated Value	Fair Value	Cost or Donated Value	Fair Value
Money market funds	\$ 48,876	\$ 48,876	\$ 24,874	\$ 24,874
Corporate notes and bonds	19,421	19,466	12,999	13,027
Common stocks and mutual funds	28,251	30,779	26,853	28,310
U.S. Government obligations	27,605	27,698	17,383	17,384
Other	4,771	4,951	58	58
Total	<u>\$128,924</u>	<u>\$131,770</u>	<u>\$82,167</u>	<u>\$83,653</u>

Debt and equity securities are recorded at fair value as determined by quoted market prices. Mutual funds are recorded at fair value using published unit values. Investment expenses of \$284,000 and \$281,000 have been netted against interest and dividend income for the years ended June 30, 2005 and 2004, respectively.

## 4. Awards and Grants

Awards and grants for research are recognized as expense in the year approved by the Society's Board of Directors. Multi-year grants, which are generally two to five years in length, are approved on an annual basis and may be terminated at the discretion of the Society's Board of Directors. In addition to unconditional grants payable of \$56,774,000 at June 30, 2005, the Society has grant commitments of \$90,345,000 that are conditioned upon future events and, accordingly, are not recorded.

## 5. Pension Plan

The Society has a noncontributory, defined contribution 403(b) pension plan covering all employees meeting age and service requirements. Contributions are based on a percentage of each eligible employee's salary and years of service. Expense under this plan aggregated \$2,327,000 and \$2,194,000 for the years ended June 30, 2005 and 2004, respectively.

## 6. Lease Commitments

The leases for premises which the Society's Home Office and chapters occupy expire on various dates through December 31, 2012 and provide for certain payments subject to escalation and periodic rate increases relating to real estate taxes, operating expenses and utilities.

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

Year ended June 30:	
2006	\$ 6,146
2007	5,722
2008	5,122
2009	4,427
2010	4,527
Thereafter	1,535
Total	<u>\$27,479</u>

## 7. 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, 2005 and 2004 (in thousands):

	2005		2004	
	Temporarily Restricted	Permanently Restricted	Temporarily Restricted	Permanently Restricted
Research program	\$ 2,810	\$ 2,616	\$ 3,578	\$ 2,273
Patient service and bone marrow donor programs	255	–	215	–
Professional education program	24	47	23	47
Other programs	1,406	–	649	–
Total	<u>\$ 4,495</u>	<u>\$ 2,663</u>	<u>\$ 4,465</u>	<u>\$ 2,320</u>

## 8. Joint Costs Allocation

In 2005 and 2004, the Society incurred joint costs for informational materials and activities that included fund raising appeals as follows (in thousands):

	2005	2004
Fund raising	\$ 14,166	\$ 12,225
Patient and community service	1,612	1,446
Public health education	8,616	7,675
Total	<u>\$ 24,394</u>	<u>\$ 21,346</u>



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# the leukemia & lymphoma society research foundation

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