

The Leukemia & Lymphoma Society is a nonprofit organization that relies on the generosity of individual, foundation and corporate contributions to advance its mission.



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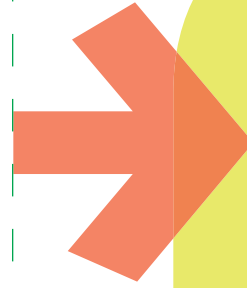
**The NEED
for SPEED**





Our MISSION

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





Our VISION

*By 2015, the vast majority of people
diagnosed with a blood cancer
will be cured or will manage their illness
with good quality of life.*

*The Leukemia & Lymphoma Society
North Star 2015 Vision*

President & Chairman's MESSAGE



John E. Walter
President and CEO

- **When The Leukemia & Lymphoma Society (LLS) conceived a world that would transform**
- **the lives of patients with blood cancer – a world that would**
- **exist as soon as 2015 – we knew the realization of this ambitious**
- **vision would require a cultural transformation. We conceived**
- **new strategies for every level of LLS to help advance our**
- **North Star 2015 Vision; in 2008, those strategies began to come**
- **to life. This year's annual report will highlight just one of the**
- **many changes to the way we do business, which will help us**
- **get more therapies to more patients, faster: our *Therapy***
- ***Acceleration Program*.**
- **The *Therapy Acceleration Program* takes a different approach**
- **to moving blood cancer research through the development**
- **process. The pharmaceutical company model for developing new**
- **cancer treatments favors research with high odds of producing**
- **blockbuster drugs and profits based on high demand. Blood**
- **cancers have a low incidence relative to solid tumors, heart disease**
- **and other widespread health issues. So under the pharma model,**
- **too many projects that might produce new treatments for blood**
- **cancer patients instead sit in the pipeline, undeveloped. And that**
- **is unacceptable, because with development, one or more of those**
- **projects could be the next major treatment advance or even**
- **cure. As you read more about the *Therapy Acceleration Program***



David Frantze

Chair

- in this report, you'll understand how the program will help
- speed discoveries from laboratories into new therapies
- for patients. We believe the *Therapy Acceleration Program*
- is a bold move in the right direction.
-
- Other positive steps this year included a revitalized sponsorship
- program that is already providing results, the continued
- strength of our major fundraising campaigns and a major
- advance for LLS into emerging technologies that will help us
- communicate more effectively with our constituents. This last
- project includes an increase in the Google grant for search-engine
- marketing, which already generates nearly half of all traffic to the
- LLS Web sites. Progress was also made in our important initiative
- to get more patients into clinical trials, including a partnership
- with the Coalition of Cancer Cooperative Groups that resulted
- in the launch of TrialCheck®, a clinical trial search tool,
- at www.LLS.org.
-
- Fiscal year 2008 was not without challenges for LLS. Change
- is rarely easy. But the organization's reaction was to "rise up
- and meet the challenges." In the end, it was an incredibly
- productive year, one in which large strides were made toward
- achieving the North Star Vision – toward cures for blood cancers.

•  David Frantze



SPEED Saves Lives

One million North Americans and their families are living with blood cancer. Approximately 135,000 more will be diagnosed in 2008. And nearly half of these newly diagnosed patients are expected to die within five years. In the face of these numbers, a successful drug can have a major impact on people's lives.

But the traditional process for drug development is not encouraging for new blood cancer discoveries. Because of their low incidence relative to solid tumors, heart disease and other widespread health issues, individual blood cancers are considered "orphan diseases." The development of blood cancer treatments is often delayed in favor of projects with higher revenue potential. New discoveries become "bottlenecked" and, as time goes by, lives that might have been saved are lost.

A research discovery first known as STI-571 tells the story well. This was a chemical in a pharmaceutical company pipeline in the 1990s, with no immediate plans for development as an anti-cancer drug. It might have stayed on the shelf indefinitely if LLS funding to researcher Brian Druker, M.D., hadn't accelerated its development. With additional research including clinical trials, STI-571 (now Gleevec®) was approved by the U.S. Food and Drug Administration (FDA) for the treatment of chronic myelogenous leukemia (CML) patients and launched by Novartis in 2001.

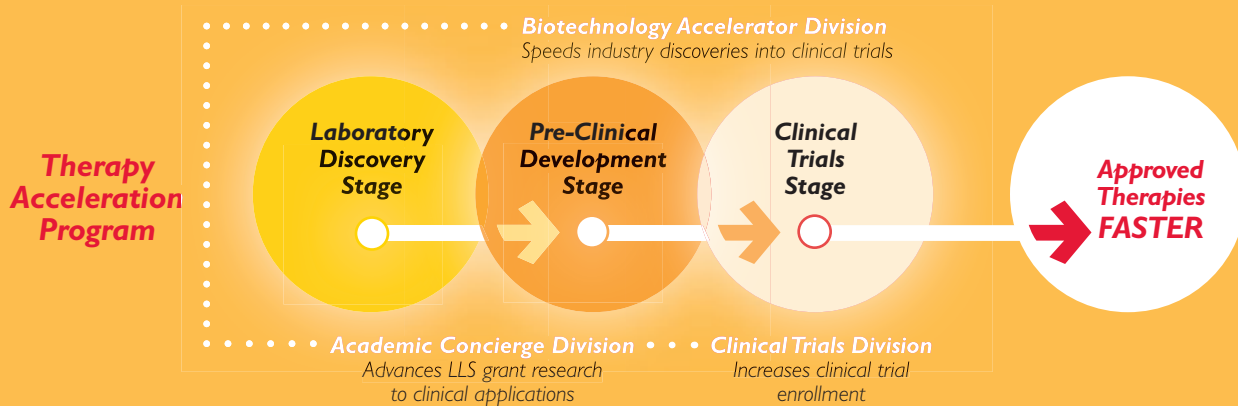
The impact of this drug is undeniable. Since its introduction, approximately 28,000 people have been diagnosed with chronic phase CML. Before Gleevec, approximately 6,600 would have died within five years; with Gleevec, that number has been reduced to approximately 980 – that's 5,620 lives saved and counting. Because the drug is available in pill form and singles out cancer cells, a patient can manage CML while living with high quality of life. Certain other cancer patients can be helped by Gleevec too.

Gleevec is just one drug. Imagine a process that would take the Gleevec example and multiply it. A process that would expand the bottleneck and accelerate the development and clinical testing of promising new discoveries, some with the ability to improve upon current blood cancer statistics. That process is LLS's *Therapy Acceleration Program*.



The Therapy Acceleration Program

LLS's *Therapy Acceleration Program*, launched in fiscal year 2007, addresses some of the hurdles associated with blood cancer drug development, with focused efforts that reduce investment risk and accelerate clinical progress. Combined with LLS's existing research grant program, funded at \$69.1 million in 2008, the *Therapy Acceleration Program* contributes to an end-to-end solution for the development of new blood cancer therapies.



Program ELEMENTS

The *Therapy Acceleration Program* comprises three innovative strategies to hasten progress: the Academic Concierge Division, the Biotechnology Accelerator Division and the Clinical Trials Division.

- The *Academic Concierge Division* identifies
- LLS-funded research projects that have near-term clinical promise and **provides the funding and support needed to advance selected projects to the product stage.**

As a result of sustained research grant investments, LLS currently has a pipeline of more than 50 projects with this near-term potential – a portfolio comparable to the pipeline of a medium-size pharmaceutical company. The *Academic Concierge Division* takes advantage of this productive investment in discovery research by assisting selected projects into and through the next stage of product development.

In this stage, generally conducted by companies called contract research organizations (CROs), scientists study a treatment's tissue distribution, stability and any toxicities associated with its use, as required by the FDA before human studies can be conducted. The *Academic Concierge Division* acts as a liaison between researchers and appropriate CROs. It provides financial support for the assembly of large amounts of formal documentation required by the FDA before clinical trials can start.

Progress to date: As of the end of fiscal year 2008, the *Academic Concierge Division* has initiated four pilot projects with three CROs.

2 Through the *Biotechnology Accelerator Division*, **LLS allies with companies to combine scientific and financial resources and accelerate the development of promising therapies** for blood cancer patients. Biotechnology companies are the focus of this program because of their reputation for innovation and successful drug development. Historically, pharmaceutical companies have resisted developing blood cancer treatments because they are perceived as having less potential for high reward due to relatively small patient populations. LLS funding will help mitigate this development barrier.

The *Biotechnology Accelerator Division* funds only projects that are close to generating data on clinical efficacy in blood cancer patients. This ensures that the company will be able to gain additional resources to complete the testing, registration and marketing of new treatments for patients.

Funding projects within companies is a new direction for LLS; however, other orphan disease-specific organizations have supported company research to advance new treatments into and through clinical trials. LLS modeled the *Therapy Acceleration Program* with an eye to the best features of those programs.

Progress to date: *At the end of fiscal year 2008, the Biotechnology Accelerator Division has contracted with five companies, and more than 20 opportunities are under review.*

3 In the *Clinical Trials Division*, LLS partners with one or more of the country's leading clinical trial centers to **build the infrastructure for broader access to blood cancer clinical trials and significantly increase enrollment** of adult cancer patients. Planned is a network of Phase I and II clinical trial sites that will use new strategies to increase patient enrollment, especially among under-represented populations.

easy access to them. In addition to travel or relocation requirements, barriers include lack of awareness, especially among minorities, and a lack of incentives for local physicians to refer patients to clinical trials. On top of all that, insurance coverage may not include some or all of the patient-care costs associated with a clinical trial.

LLS is working through advocacy and education to overcome some of the barriers. The *Clinical Trials Division* focuses on geographic barriers by **taking clinical trials to patients** with one or more community-based models that will be deployed in sites across the country. Patients will have access to clinical trials in a convenient and familiar setting.

Progress to date: *In fiscal year 2008, the Clinical Trials Division entered into a novel partnership with Cleveland Clinic Taussig Cancer Institute to create The Clinical Trial Center for Hematologic Malignancies. Six clinical trials, one underway, are planned within three years, with expected enrollment of 100-150 patients.*

The Therapy Acceleration Program and LLS's 2015 VISION

The *Therapy Acceleration Program* is emblematic of a forward-thinking LLS. The need for speed is obvious: lives hang in the balance. In the following pages of the 2008 annual report, you'll recognize the passion and dedication that have always been hallmarks of this organization. And you should also see signs that LLS is determined to realize its vision with new strategies, renewed energy and an ever-present urgency to find cures.



Fiscal Year 2008 Highlights
**SPEEDING NEW TREATMENTS
and CURES...**



...Through RESEARCH GRANTS

As of June 2008, LLS was supporting a total of 388 active research projects through grants to academic investigators in the United States, Canada and 14 other countries. These projects were selected for LLS funding by medical and scientific experts based on their probability of finding new treatments and cures for blood cancers. LLS supported progress in many critical areas this year, including **immunotherapies, targeted therapies and new diagnostics**. On the following page are a few examples of progress being made by LLS grantees.

Two LLS-funded researchers and their teams are working on a new targeted therapy for lymphoma patients:

- Margaret Shipp, M.D.,* earlier identified a molecule called SYK as essential to the survival of aggressive lymphoma cells. A drug that inhibited SYK killed most of these cells in the laboratory.
- Jonathan Friedberg, M.D.,** showed good early results of an oral form of this drug (R788) in a recent clinical trial. Nearly half of patients showed improvement. This new, twice-a-day pill may offer a new treatment option for patients with recurrent small lymphocytic lymphoma, diffuse large B-cell lymphoma and chronic lymphocytic leukemia. Because this treatment is targeted, it is likely to cause fewer side effects than standard treatments.

In the area of new diagnostics, LLS-funded researcher Vivian Oehler, M.D.,*** and her colleagues developed a method to detect, early on, a specific, common genetic mutation in chronic myelogenous leukemia (CML) cells. The mutation apparently leads to acquired resistance to targeted drugs used in CML treatments, including Gleevec, Sprycel® and Tasigna®. Because the test can find the mutation far earlier than standard diagnostics, it may give patients who are likely to relapse an opportunity to receive a more effective treatment.

Last year, LLS-funded researcher Carl June, M.D.,**** and his colleagues developed a new immunotherapy that can rebuild a patient's immune system within two months of stem cell transplantation, using re-educated immune T-cells. The new treatment has now been tested in post-transplant myeloma patients and in follicular lymphoma patients after standard drug therapy. Combined with new, targeted drugs, these new therapies may soon offer safe and effective alternatives to toxic chemotherapies.



Margaret Shipp, M.D.



Jonathan Friedberg, M.D.



Vivian Oehler, M.D.



Carl June, M.D.

* Dana-Farber Cancer Institute, Boston, MA

** James P. Wilmot Cancer Center, University of Rochester

*** Fred Hutchinson Cancer Research Center, Seattle, WA

**** University of Pennsylvania, Philadelphia, PA



Fiscal Year 2008 Highlights

SPEEDING NEW TREATMENTS and CURES...

...Through PATIENT SERVICES

LLS information and support offerings for patients, family members and caregivers continued to expand in 2008:

- The *Information Resource Center's* master's-level oncology social workers, nurses and health educators responded to 78,524 inquiries from patients, families and healthcare professionals. They provided individualized information on diseases, treatments, clinical trials and resources available from LLS and other organizations.
- An audience of 580,000 patients, family members and healthcare professionals participated in 32 national LLS teleconferences and Webcasts. Another 48,000 attended chapter-based educational programs.
- Our *Co-Pay Assistance Program*, which began in January 2007, closed out fiscal year 2008 with \$4.6 million in financial support provided to patients to help them meet co-pay obligations or health insurance premiums related to treating their blood cancers.
- *First Connection*, which links newly diagnosed patients to trained, peer volunteers who have experienced similar diagnoses, made 7,568 connections this year. Another 12,000 people participated in LLS *Family Support Groups*.

...Through ADVOCACY

This year, LLS's Office of Public Policy, in conjunction with our growing Advocates Network of 16,000, was extremely productive at the national and state levels:

- Increased access to U.S. Department of Defense research funding, with more than \$28 million secured to date
- Defeated efforts to restrict payments for radioimmunotherapy treatments for lymphoma patients
- Successfully passed the Caroline Pryce Walker Conquer Childhood Cancer Act – providing a focus and funding on childhood cancer at the National Cancer Institute
- Launched LLS's first state-centered advocacy program – focusing on insurance coverage for patients in clinical trials. This year, Ohio, Wyoming and the District of Columbia have passed new laws providing coverage – with the state total now up to 24.





Fiscal Year 2008 Highlights

SPEEDING NEW TREATMENTS and CURES...

...Through FUNDRAISING CAMPAIGNS

All of our major fundraising campaigns continued their strong contributions to advancing LLS's mission.

Team In Training® (TNT) recruited for a new, co-branded event this year – The Nation's Triathlon™, to benefit The Leukemia & Lymphoma Society, which was held in Washington, DC in September. The event enjoyed early sell-out; TNT held the enviable position as “the only way to enter.” The Nation's Triathlon joins the Nike Women's Marathon, A Race to Benefit The Leukemia & Lymphoma Society, as LLS's second co-branded event, a strategy that is helping us build the LLS brand in association with the valuable asset that is Team In Training.

Light The Night® Walk broke its own record in fiscal year 2008, raising nearly \$40 million. Twenty-one new national/regional partners were recruited this year, representing a combined \$1.6 million in revenue to help advance LLS's mission.

School & YouthSM Programs now boast participation among 21 percent of the nation's schools. The programs finished off the 2007/2008 school year with 23,000 registered schools and raised more than \$19 million, demonstrating that kids can really make a difference.

...Through DONOR DEVELOPMENT

Generous contributions from individual benefactors, foundations and corporations generated \$23.5 million, a 14 percent increase over the prior year. These funds support cutting-edge researchers at renowned institutions nationally and abroad, a wide array of community-based patient services and therapy acceleration initiatives that will bring more therapies to more patients faster.

Thanks to far-sighted individuals who remembered LLS in their estate plans, significant bequest income was received. Many friends responded to invitations to participate in our Charitable Gift Annuity Program, ensuring our ability to support research and patient services in the years ahead.

For the first time, \$10,000+ donors were able to invest in a portfolio of research projects organized around a specific blood cancer interest. Like mutual funds, the portfolios minimize risk and maximize opportunity.



➔ Research GRANTS

Specialized Center of Research

The Specialized Center of Research program encourages 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 composed of at least three independent research programs that are integrated and supported by scientific core laboratories.

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The Walter and Eliza Hall
Institute of Medical Research

Frederick Alt, PhD
CBR Institute for Biomedical
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Jon Aster, MD, PhD
Brigham and Women's Hospital

Irwin Bernstein, MD
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John Byrd, MD
The Ohio State University

Riccardo Dalla-Favera, MD²
Columbia University

Brian Druker, MD
Howard Hughes Medical Institute
Oregon Health & Science University
Cancer Institute

Carolyn Felix, MD
The Children's Hospital
of Philadelphia

Anthony Green, MD, PhD³
University of Cambridge

James Griffin, MD⁴
Dana-Farber Cancer Institute

Helen Heslop, MD^{*}
Baylor College of Medicine

Carl June, MD
University of Pennsylvania

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

Larry Kwak, MD, PhD
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M.D. Anderson Cancer Center

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Stanford University

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Northwestern University

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Stanford University

Stephen Nimer, MD⁷
Memorial Sloan-Kettering
Cancer Center

Michael Thirman, MD⁸
The University of Chicago

Cheryl L. Willman, MD
University of New Mexico

Career Development Program

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

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Jennifer Antonchuk, PhD
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¹ Dr. John Bushweller is funded in part by the Martinsville Area Community Foundation.

² Dr. Riccardo Dalla-Favera is funded in part by Jonathan Plutzik & Lesley Goldwasser Family Foundation, Joseph S. and Diane H. Steinberg, The Edward Milstein Foundation, James and Karen Finkel, Paul and Susan Friedman, The J.T. Tai Foundation, Tom Marano, Jeffrey and Katina Mayer, Michael and Elin Nierenberg and Family, Daniel and Carol Spina, Jonathan and Jeannie Lavine and Family, Deborah and Jeff Briggs, Tracy and Frank Collins, and James F. Egan.

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by Steve and Lisa Boom.

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➔ Research GRANTS (CONTINUED)

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 Christina Parkes
 Billie Sue Parris
 Andrew and Mary Passafaro*
 John Pini
 Mrs. Harry Port
 Dennis Primeaux
 Kenneth Rutt
 Norbert Sarnow*
 Stanley I. Scheller
 C. Darlene Schick
 Marion Shannon*
 Rocco Silvestri*
 Eleanor Smith*
 Fredericka Steiner*
 Michael Suchy*
 Mary Sullivan*
 Bruce and Anne Swartz*
 Eva Weissman
 Joel Woldman*

Anonymous (3)
 *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, 2008, 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 2007 consolidated financial statements and, in our report dated October 24, 2007, we expressed an unqualified opinion on those statements.

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

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the financial position of The Leukemia & Lymphoma Society, Inc. as of June 30, 2008, and the changes in its net assets and its cash flows for the year then ended in conformity with U.S. generally accepted accounting principles.

KPMG LLP

October 20, 2008
New York, NY

→ Consolidated Statement of FINANCIAL POSITION

The Leukemia & Lymphoma Society, Inc. • June 30, 2008
(with comparative amounts at June 30, 2007) (in thousands)

	<u>2008</u>	<u>2007</u>
Assets		
Cash and cash equivalents	\$ 36,180	\$ 47,770
Accounts receivable	1,360	1,686
Legacies and contributions receivable (note 2)	7,167	4,321
Prepaid expenses	4,807	4,711
Investments, at fair value (note 3)	162,978	145,717
Fixed assets, less accumulated depreciation and amortization of \$12,069 and \$10,435	<u>5,148</u>	<u>4,656</u>
Total assets	<u>\$ 217,640</u>	<u>\$ 208,861</u>
Liabilities and Net Assets		
Liabilities:		
Accounts payable and accrued expenses	\$ 20,700	\$ 19,160
Deferred revenue	17,174	15,258
Grants payable (note 4)	<u>81,670</u>	<u>77,245</u>
Total liabilities	<u>119,544</u>	<u>111,663</u>
Net assets:		
Unrestricted	83,085	85,691
Temporarily restricted (note 8)	11,932	8,634
Permanently restricted (note 8)	<u>3,079</u>	<u>2,873</u>
Total net assets	<u>98,096</u>	<u>97,198</u>
Total liabilities and net assets	<u>\$ 217,640</u>	<u>\$ 208,861</u>

See accompanying notes to consolidated financial statements.

→ Consolidated Statement of ACTIVITIES

The Leukemia & Lymphoma Society, Inc. • Year ended June 30, 2008
(with summarized totals for the year ended June 30, 2007) (in thousands)

30

	Unrestricted	Temporarily Restricted	Permanently Restricted	Total	
				2008	2007
Revenue					
Campaign contributions	\$ 282,816	\$ 21,459	\$ 142	\$ 304,417	\$ 292,036
Less direct donor benefit costs	(42,541)	–	–	(42,541)	(42,455)
Net campaign contributions	240,275	21,459	142	261,876	249,581
Legacies	6,137	–	–	6,137	4,937
Donated services (note 1)	5,740	–	–	5,740	5,051
Net interest and dividend income (note 3)	7,015	179	10	7,204	6,251
Net (decrease) increase in fair value of investments	(4,983)	90	54	(4,839)	7,478
Grant refunds	966	–	–	966	1,304
Net assets released from restrictions	18,430	(18,430)	–	–	–
Total revenue	273,580	3,298	206	277,084	274,602
Expenses (note 9)					
<i>Program Services:</i>					
Research	76,979	–	–	76,979	69,269
Patient and community service	77,686	–	–	77,686	66,844
Public health education	42,094	–	–	42,094	38,379
Professional education	8,433	–	–	8,433	7,931
Total program services	205,192	–	–	205,192	182,423
<i>Supporting Services:</i>					
Management and general	24,942	–	–	24,942	23,663
Fund raising	46,052	–	–	46,052	44,180
Total supporting services	70,994	–	–	70,994	67,843
Total expenses	276,186	–	–	276,186	250,266
Change in net assets	(2,606)	3,298	206	898	24,336
Net Assets					
Beginning of year	85,691	8,634	2,873	97,198	72,862
End of year	\$ 83,085	\$ 11,932	\$ 3,079	\$ 98,096	\$ 97,198

See accompanying notes to consolidated financial statements.

→ Consolidated Statement of CASH FLOWS

The Leukemia & Lymphoma Society, Inc. • Year ended June 30, 2008
(with comparative amounts for the year ended June 30, 2007) (in thousands)

	<u>2008</u>	<u>2007</u>
Cash flows from operating activities:		
Change in net assets	\$ 898	\$ 24,336
Adjustments to reconcile the change in net assets to net cash provided by operating activities:		
Net decrease (increase) in fair value of investments	4,839	(7,478)
Permanently restricted revenue collected	(142)	(2)
Depreciation and amortization	1,825	1,578
Changes in operating assets and liabilities:		
Accounts receivable	326	(1,037)
Legacies and contributions receivable	(2,846)	1,808
Prepaid expenses	(96)	351
Accounts payable and accrued expenses	1,540	(96)
Deferred revenue	1,916	2,455
Grants payable	<u>4,425</u>	<u>7,245</u>
Net cash provided by operating activities	<u>12,685</u>	<u>29,160</u>
Cash flows from investing activities:		
Purchases of fixed assets	(2,317)	(1,985)
Purchases of investments	(200,376)	(160,144)
Sales of investments	<u>178,276</u>	<u>130,598</u>
Net cash used in investing activities	<u>(24,417)</u>	<u>(31,531)</u>
Cash flows from financing activities:		
Permanently restricted contributions collected	<u>142</u>	<u>2</u>
Net cash provided by financing activities	<u>142</u>	<u>2</u>
Net decrease in cash and cash equivalents	(11,590)	(2,369)
Cash and cash equivalents at beginning of year	<u>47,770</u>	<u>50,139</u>
Cash and cash equivalents at end of year	<u>\$ 36,180</u>	<u>\$ 47,770</u>

See accompanying notes to consolidated financial statements.

→ Consolidated Statement of FUNCTIONAL EXPENSES

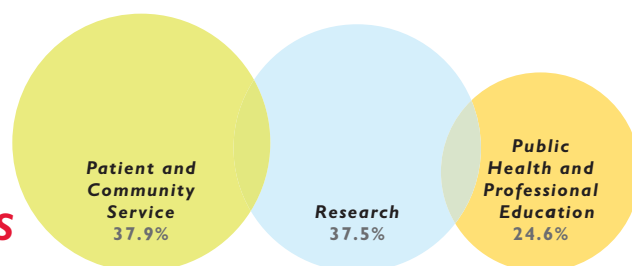
The Leukemia & Lymphoma Society, Inc. • Year ended June 30, 2008
(with comparative totals for the year ended June 30, 2007) (in thousands)

32

	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	2008	2007	2008	2007
Awards and grants	\$ 69,134	\$ –	\$ –	\$ –	\$ 69,134	\$ –	\$ –	\$ –	\$ 69,134	\$ 65,939	\$ –	\$ –
Therapy acceleration program (note 5)	3,941	–	–	–	3,941	–	–	–	3,941	601	–	–
Financial aid to patients	–	6,545	–	–	6,545	–	–	–	6,545	5,890	–	–
Co-pay assistance	–	4,560	–	–	4,560	–	–	–	4,560	113	–	–
Donated services	1,036	4,704	–	–	5,740	–	–	–	5,740	5,051	–	–
Salaries	1,327	30,689	15,359	4,418	51,793	8,623	9,947	18,570	70,363	64,331	–	–
Employee benefits and taxes (note 6)	160	7,153	4,247	1,179	12,739	2,162	3,119	5,281	18,020	16,249	–	–
Occupancy	20	3,395	2,138	618	6,171	1,147	1,409	2,556	8,727	8,127	–	–
Insurance	9	278	193	42	522	84	162	246	768	695	–	–
Telephone	29	2,613	1,153	189	3,984	372	1,359	1,731	5,715	5,110	–	–
Travel	67	1,212	742	223	2,244	432	502	934	3,178	3,135	15,183	14,605
Printing and supplies	183	2,895	6,513	381	9,972	4,166	10,170	14,336	24,308	23,530	6,201	6,536
Equipment rentals and maintenance	14	893	580	154	1,641	286	428	714	2,355	1,982	–	–
Postage and shipping	89	1,091	4,347	162	5,689	2,206	7,372	9,578	15,267	15,163	–	–
Meetings	569	2,652	1,255	305	4,781	560	662	1,222	6,003	5,660	8,914	8,875
Professional fees	372	7,868	4,840	569	13,649	4,496	10,346	14,842	28,491	26,203	5,280	6,893
Miscellaneous	10	464	278	85	837	211	198	409	1,246	909	6,963	5,546
Depreciation and amortization	19	674	449	108	1,250	197	378	575	1,825	1,578	–	–
Total expenses	\$ 76,979	\$ 77,686	\$ 42,094	\$ 8,433	\$ 205,192	\$ 24,942	\$ 46,052	\$ 70,994	\$ 276,186	\$ 250,266	\$ 42,541	\$ 42,455

See accompanying notes to consolidated financial statements.

Program Services EXPENSES



→ Notes to Consolidated FINANCIAL STATEMENTS

The Leukemia & Lymphoma Society, Inc. • June 30, 2008
(with comparative amounts as of and for the year ended June 30, 2007)

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 cancer information made to the Society’s Information Resource Center; and disseminating educational information about blood cancers in the form of publications, internet sites, conference calls and symposia sponsorship for both the medical community and the general public.

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-five chapters, The Leukemia & Lymphoma Society of Canada, Inc. (“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.

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.

Risks and Uncertainties

The Society invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market, 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 statement of financial position.

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

The Society has determined that certain of the donated services it receives meet 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.

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

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 2007 summarized or comparative information. With respect to the statement of activities, such prior year information is not presented by net asset class and, in the statement of functional expenses, 2007 expenses by object are presented in total rather than by functional category. Accordingly, such information should be read in conjunction with the Society’s 2007 consolidated financial statements from which the summarized information was derived. Certain reclassifications have been made to the 2007 comparative information to conform to the current year presentation.

Recent Accounting Standards

In June 2006, the Financial Accounting Standards Board (FASB) issued Interpretation No. 48, *Accounting for Uncertainty in Income Taxes – an interpretation of FASB Statement No. 109 (FIN 48)*, which will be effective for the Society’s fiscal year ending June 30, 2009. FIN 48 addresses the accounting for uncertainties in income taxes recognized in an organization’s financial statements and prescribes a threshold of more-likely-than-not for recognition and derecognition of tax positions taken or expected to be taken in a tax return. FIN 48 also provides related guidance on measurement, classification, interest and penalties, and disclosure. The adoption of FIN 48 is not expected to have a material effect on the Society’s financial statements.

In September 2006, the FASB issued Statement of Financial Accounting Standards (SFAS) No. 157, *Fair Value Measurements (SFAS 157)*. SFAS 157 defines fair value, establishes a framework for measuring fair value, and requires expanded disclosures about fair value measurements. SFAS 157 will be effective for the Society’s fiscal year ending June 30, 2009. The adoption of SFAS 157 is not expected to have a material impact on the Society’s financial statements; however, the adoption of SFAS 157 will require additional disclosures regarding the inputs used to develop the fair value measurements, and the impact of certain measurements on the statement of activities.

In August 2008, FASB Staff Position No. FAS 117-1, *Endowments of Not-for-Profit Organizations: Net Asset Classification of Funds Subject to an Enacted Version of the Uniform Prudent Management of Institutional Funds Act (UPMIFA) and Enhanced Disclosures for All Endowment Funds (FSP)*, was issued, and its guidance will be effective for the Society’s fiscal year ending June 30, 2009. A key component of that FSP is a requirement to classify the portion of a donor-restricted endowment fund that is not classified as permanently restricted net assets as temporarily restricted net assets until appropriated for expenditure. New York State has not yet adopted UPMIFA so the Society will not have to reclassify its net assets, if required, until such time. However, for the year ending June 30, 2009, the Society will have to adopt certain of the disclosure requirements of the FSP.

→ Notes to Consolidated FINANCIAL STATEMENTS (CONTINUED)

The Leukemia & Lymphoma Society, Inc. • June 30, 2008
(with comparative amounts as of and for the year ended June 30, 2007)

34

2. Legacies and Contributions Receivable

The Society's legacies and contributions receivable at June 30, 2008 and 2007 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):

	2008	2007
Less than one year	\$ 4,886	\$ 3,197
1 to 5 years	2,118	622
After 5 years	445	778
	<u>7,449</u>	<u>4,597</u>
Less discount to present value (discount rate – 5%)	(282)	(276)
Total	<u>\$ 7,167</u>	<u>\$ 4,321</u>

3. Investments

The following is a summary of investments at June 30, 2008 and 2007 (in thousands):

	2008		2007	
	Cost or Donated Value	Fair Value	Cost or Donated Value	Fair Value
Money market funds	\$ 939	\$ 939	\$ 1,419	\$ 1,419
Corporate notes and bonds	67,425	67,156	42,744	42,323
Common stocks and mutual funds	33,057	33,301	29,072	35,395
Government obligations	40,532	41,199	47,409	47,186
Other	22,130	20,383	17,309	19,394
Total	<u>\$164,083</u>	<u>\$ 162,978</u>	<u>\$ 137,953</u>	<u>\$ 145,717</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. Other investments at June 30, 2008 and 2007, consist principally of limited partnerships, the underlying holdings of which are principally marketable securities. Investment expenses of \$416,000 and \$436,000 have been netted against interest and dividend income for the years ended June 30, 2008 and 2007, 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 \$81,670,000 at June 30, 2008, the Society has grant commitments of \$110,077,000 that are conditioned upon future events and, accordingly, are not recorded.

5. Therapy Acceleration Program ("TAP")

TAP is the Society's new strategic initiative to speed the development of blood-cancer treatments and supportive diagnostics by creating business alliances with biotechnology and pharmaceutical companies. TAP provides funding for Investigational New Drug-enabling ("IND-enabling") studies and clinical-stage projects. TAP contracts are recognized as an expense in the year program milestones are achieved. Multiyear contracts, which are generally two to three years in length, are reviewed against milestones on a quarterly basis and may be terminated at the discretion of the Society's Board of Directors. The Society has contract commitments of \$9,500,000 at June 30, 2008 conditioned upon future events and, accordingly are not recorded.

6. 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 \$3,780,000 and \$3,133,000 for the years ended June 30, 2008 and 2007, respectively.

On July 1, 2006, the Society adopted a 457 Deferred Compensation Plan (the "457 Plan"), for its executive staff. The 457 Plan is a nonqualified deferred compensation plan subject to the provisions of the Internal Revenue Code Section 457. Expenses under this plan approximated \$134,000 and \$194,000 for the years ended June 30, 2008 and 2007, respectively. The assets and liabilities of this plan are included in investments and accounts payable in the accompanying statement of financial position and amounted to approximately \$314,000 and \$285,000 for the years ended June 30, 2008 and 2007, respectively.

7. Lease Commitments

The leases for premises which the Society's Home Office and chapters occupy expire on various dates through May 31, 2018 and provide for certain payments subject to escalation and periodic rate increases relating to real estate taxes, operating expenses and utilities. The Home Office lease has been renewed through March 2016.

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

Year ending June 30:	
2009	\$ 7,689
2010	6,814
2011	5,358
2012	4,440
2013	2,854
Thereafter	<u>5,392</u>
Total	<u>\$ 32,547</u>

8. 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, 2008 and 2007 (in thousands):

	2008		2007	
	Temporarily Restricted	Permanently Restricted	Temporarily Restricted	Permanently Restricted
Research	\$ 2,913	\$ 3,030	\$ 1,907	\$ 2,825
Patient service	8,972	–	6,662	–
Other	47	49	65	48
Total	<u>\$ 11,932</u>	<u>\$ 3,079</u>	<u>\$ 8,634</u>	<u>\$ 2,873</u>

9. Joint Costs Allocation

In 2008 and 2007, the Society incurred joint costs for informational materials and activities that included fund raising appeals as follows (in thousands):

	2008	2007
Fund raising	\$ 14,505	\$ 14,069
Patient and community service	1,161	1,038
Public health education	<u>12,243</u>	<u>11,652</u>
Total	<u>\$ 27,909</u>	<u>26,759</u>

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Human Resources

George Omiros
Acting Senior Vice President
Field Development

David Timko
Senior Vice President
Chapter Growth

The Leukemia & Lymphoma Society of Canada

Rudy Putns
Chief Executive Officer

Nancy Allen
General Manager
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