8

Assets

#### ' Return of Organization Exempt From Income Tax

OMB No 1545 0047 2001 Under section 501(c) 527 or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) Open to Public Department of the Treasury The organization may have to use a copy of this return to satisfy state reporting requirements Inspection Internal Revenue Service 6/30/2002 A For the 2001 calendar year, OR tax year beginning 7/1/2001 , and ending C Name of organization D Employer identification number B Check if applicable Please use IRS label or print or type See Specific Address change The Leukemia & Lymphoma Society, Inc. 13-5644916 Number and street (or P. O. box if mail is not delivered to street address) Room/suite Telephone number Name change Initial return 1311 Mamaroneck Avenue (914) 821-8840 Instruc-City or town 7IP + 4 Final return State or country Accounting method Cash X Accrual Amended return Other (specify) 10605 White Plains NY Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedulo A (Form 990 or 990-EZ) H and I are not applicable to section 527 organizations Application pending Is this a group return for affiliates? G Web site www leukernia-lymphoma org H(b) If "Yes " enter number of affiliates H(c) Are all affiliates included? X 501(c) ( 3 ) (insert no ) 4947(a)(1) or J Organization type (check only one) (If "No," attach a list. See instructions.) Is this a separate return filed by an organi Yes X zation covered by a group ruling? if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS but if the organization received a Form 990 Package in the mail it should file a return without financial data. Some states require a complete return Enter 4-digit GEN Check X if the organization is not required L. Gross receipts. Add lines 6b. 8b. 9b. and 10b to line 12 190.399.610 to attach Sch. B (Form 990, 990-EZ, or 990-PF) Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions on page 16) Contributions, gifts, grants, and similar amounts received Direct public support 147,193,288 а 1a 3,449,170 b Indirect public support 1b Government contributions (grants) c 1c 150,642,458 noncash d Total (add lines 1a through 1c) (cash \$ \$ 1d 150,642,458 Program service revenue including government fees and contracts (from Part VII, line 93) 2 2 3 Membership dues and assessments 3 2,307,846 4 Interest on savings and temporary cash investments 4 5 Dividends and interest from securities 5 3,012 4,537 **Gross rents** 6a Less rental expenses 6Ь ь Net rental income or (loss) (subtract line 6b from line 6a) 6с 4,537 Other investment income (describe 7 Gross amount from sales of assets other (A) Securities (B) Other than inventory 7,985,388 8a cost or other basis and sales expenses or (loss) (attach schedule) 9,007,134 8ь **FECE!V** -1,021,746 Bc 0 Net gair (loss) (combine line 8c, columns (A) and (B))
Special Cents and activities (attach schedule) 8d -1,021,746 FEB 19 2503s revenue (not including 126,435,390 of contr<u>ib</u>ս**⊈**ons reported on line 1a) 27,747,030 9a OGDĖŅ, tresp direct expenses other than fundraising expenses
Net income or (loss) from special events (subtract line 9b from line 9a) 9b 27,747,030 0 90 Gross sales of inventory, less returns and allowances 10a 10a Less cost of goods sold 10b b Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a) 10c C 1,709,339 Other revenue (from Part VII, line 103) 11 11 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11) 12 153,645,446 12 Program services (from line 44, column (B)) 117,106,532 13 13 Management and general (from line 44, column (C)) 10,594,387 Ex-14 27,778,227 Fundraising (from line 44, column (D)) 15 pen-15 Payments to affiliates (attach schedule) 16 16 Total expenses (add lines 16 and 44, column (A)) 155,479,146 17 17 Excess or (deficit) for the year (subtract line 17 from line 12) -1,833,700 18 42,508,138 Net Net assets or fund balances at beginning of year (from line 73, column (A)) 19 19

For Paperwork Reduction Act Notice, see the separate instructions

Other changes in net assets or fund balances (attach explanation)

Net assets or fund balances at end of year (combine lines 18, 19, and 20)

(HTA)

38,842,399 Form 990 (2001)

-1,832,039

20

The Leukemia & Lymphoma Society, Inc. 13-5644916 Form 990 (2001) Page 2 Part II Statement of All organizations must complete column (A). Columns (B), (C) and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See Specific Instructions on page 21.) Functional Expenses Do not include amounts reported on line (B) Program (C) Management (A) Total (D) Fundraising 6b, 8b, 9b, 10b, or 16 of Part I services and general 22 Grants and allocations (attach schedule) 37,648,000 noncash \$ 37,648,000 37,648,000 (cash 23 Specific assistance to individuals (attach schedule) 3,405,377 3,405,377 23 Benefits paid to or for members (attach schedule) 24 Compensation of officers, directors, etc 25 482,592 354,404 49.513 78,675 25 26 Other salaries and wages 26 39,320,355 28,883,857 4,031,118 6,405,380 27 Pension plan contributions 27 2.784.854 1,980,838 284,503 519,513 28 Other employee benefits 3,258,754 2,317,918 332,917 28 607,919 2,879,721 29 Payroll taxes 29 2,048,316 294, 195 537.210 30 Professional fundraising fees 30 0 357,003 203,315 33.459 31 Accounting fees 31 120,229 615,960 350,792 57,728 207,440 32 Legal fees 32 2,725,137 1,620,661 233,733 870,743 Supplies 33 33 231,183 Telephone 3,280,629 1,980,297 1,069,149 34 34 Postage and shipping 10,336,783 5,919,624 547,318 3,869,841 35 35 36 Occupancy 36 5,399,418 3,888,892 583,467 927,059 Equipment rental and maintenance 1,646,427 1,179,570 177,933 288,924 37 37 Printing and publications 38 14,464,193 8,601,970 1,240,585 4,621,638 39 Travel 39 2,140,783 1,533,629 229,366 377.788 2,892,030 2,250,851 244.524 Conferences, conventions, and meetings 40 396,655 40 41 305,114 231,276 20.748 53,090 41 Interest 1,713,989 1,150,904 162,172 400,913 Depreciation, depletion, etc. (attach schedule) 42 42 411,872 274,615 38,423 Insurance 43a 98,834 43 Other expenses not covered above (itemize) 3,354,015 1,994,659 287,672 1,071,684 Visual Aids 43b Ь Professional Fees and contract services 14,806,839 8,432,550 1,387,705 4,986,584 43c C Dues & Subscriptions 419,253 249,333 35,959 133,961 43d 604,884 Miscellaneous 830,048 90,166 134,998 43e 43f 0 0 Ō 0 Total functional expenses (add lines 22 through 43) Organizations completing columns (B) - (D), carry these totals to lines 13 - 15 44 155,479,146 117,106,532 10,594,387 27,778,227 Joint Costs Check X if you are following SOP 98-2 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? XYes 21,308,436 , (ii) the amount allocated to Program services 9,322,140 If "Yes," enter (i) the aggregate amount of these joint costs 11,986,296 (iii) the amount allocated to Management and general and (iv) the amount allocated to Fundraising Statement of Program Service Accomplishments Part III Program Service (See Specific Instructions on page 24) What is the organization's primary exempt purpose? Cure leukemia & blood related cancers Expenses All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number (Required for 501(c)(3) of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) and (4) orgs and organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and 4947(a)(1) trusts but allocations to others) optional for others ) Research (Grants and allocations \$ 37,648,000 39,248,738 Patient and Community Service (Grants and allocations \$ 41,929,263 Public Health Education 28,607,872 (Grants and allocations \$ Professional Education 7,320,659 (Grants and allocations \$ Other program services (attach schedule) (Grants and allocations \$

Total of Program Service Expenses (should equal line 44, column (B), Program services)

Part	IV <sup>1</sup> Balance Sheets	(See Specific Instructions of	n page 24)				
Note	Where required, attached s	chedules and amounts wit	hin the description		(A)		(B)
	column should be for end-o	f-year amounts only	·		Beginning of year	<u> </u>	End of year
		Assets					
45	Cash - non-interest-bearing					45	
46	Savings and temporary cash inve	estments			7,933,850	46	9,627,764
47a	Accounts receivable		47a	848,882			
b	Less allowance for doubtful acc	ounts	47b		1,135,104	47c	848,882
48a	Pledges receivable		48a	4,440,291			
b	Less allowance for doubtful acc	counts	48b	,,	4,153,420	48c	4,440,291
49	Grants receivable		[400]		1,100,120	49	4,440,201
50	Receivables from officers, director	ors, trustees, and key emp	lovees	ì	<del></del>		
	(attach schedule)	,,,	,			50	
51a	Other notes and loans receivable	e (attach schedule)	51 a	l			
ь	Less allowance for doubtful acc	ounts	51b			51c	0
52	Inventories for sale or use					52	<u>-</u> <u>-</u>
53	Prepaid expenses and deferred of	charges			2,474,610	53	3,536,977
54	Investments - securities (attach s	schedule) Co	ost XFMV	[	74,224,170	54	72,136,417
55a	Investments - land, buildings, and	d equipment		[			
	basis		55a	42,001			
ь	Less accumulated depreciation	(attach					
	schedule)		55b		42,001		42,001
56	Investments - other (attach sched	-	1 1		16,000	56	16,000
57a	Land, buildings, and equipment		57a	8,526,464			== ==.
Þ	Less accumulated depreciation	(attach schedule)	57b	4,069,540	4,449,031	$\overline{}$	4,456,924
58	Other assets (describe	<del> </del>		···········'	0	58	0
59	Total assets (add lines 45 throug	h 58) (must equal line 74)			94,428,186	59	95,105,256
	, ,	Liabilities		İ	· ,		
60	Accounts payable and accrued e	xpenses			9,712,409	60	11,347,149
61	Grants payable				38,733,025	$\overline{}$	40,261,284
62	Deferred revenue				3,474,614	62	4,654,424
63	Loans from officers, directors, tru		(attach schedule)			63	
64a	Tax-exempt bond liabilities (attac					64a	
Ь	Mortgages and other notes paya	ble (attach schedule)				64b	<del></del>
65	Other Irabilities (describe		<del></del>	)	0	65	0
66	Total liabilities (add lines 60 throu	ıgh 65)			51,920,048	66	56,262,857
	Net A	ssets or Fund Balances					
Orga	nizations that follow SFAS 117,	check here X an	id complete lines				
	67 through 69 and lines 73 and 7	<b>'4</b>					
67	Unrestricted				38,489,414	67	34,903,205
68	Temporarily restricted			_	2,928,028		2,818,277
69	Permanently restricted				1,090,696	69	1,120,917
Orga	nizations that do not follow SFA	S 117, check here	and				
_	complete lines 70 through 74						
70	Capital stock, trust principal, or ci					70	
71	Paid-in or capital surplus, or land				· <del></del>	71	<del></del>
72 72	Retained earnings, endowment, a Total net assets or fund balances			}		72	
73	70 through 72,	, fear mies of mitandii oa i	O17 111162				
	column (A) must equal line 19, co	olumn (B) must equal line ?	21)		42,508,138	73	38,842,399
74	Total liabilities and net assets/fun			į	94,428,186		95,105,256

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

_	n 990 (2001)			_	mphoma Society,		13-5644916		Page 4
Par	t IV-A Reconciliation of Revenue p			Par	IV-B Reconcilia	•	-		
	Financial Statements with Re		•			Financial Stater	nents with		
	Return (See Specific Instruc	tions	, page 26 )		<u>-</u>	в per Return		vinin	
а	Total revenue, gains, and other support			а	Total expenses a		udited		
	per audited financial statements	а	151,508,293		financial stateme	ents		а	155,174,032
b	Amounts included on line a but			ь	Amounts include	d on line a but n	ot on		
	not on line 12, Form 990				line 17, Form 990	0			
(1)	Net unrealized gains on			(1)	Donated services	s and			
	investments \$ -1,832,039				use of facilities		\$		
(2)	Donated services and			(2)	Prior year adjusti	ments reported			
	use of facilities \$				on line 20, Form	990	\$		
(3)	Recoveries of prior			(3)	Losses reported	on line 20,			
• •	year grants \$				Form 990		\$		
(4)	Other (specify)			(4)	Other (specify)	•			
( ' '				( , ,	- ····· <b>(-/</b> - <b>/</b> -· <b>/</b> /				
							\$		
	Add amounts on lines (1) thru (4)	<i>b</i>	-1,832,039		Add amounts on	lines (1) thru (4)		ь	
	Line a minus line b	<u> </u>	153,340,332	С	Line a minus line			c	155,174,032
٦	Amounts included on line 12,		(100,040,002	_	Amounts include	_		WW.	
u	Form 990 but not on line a				Form 990 but no				
/43	Investment expenses not included on			(4)	Investment expens				
(1)				(1)	•		\$ 305.114		
(0)	line 6b, Form 990 \$ 305,114			(2)	included on line 6b	, Form 990	\$ 305,114		
(2)	Other (specify)			(2)	Other (specify)				
							_		
	\$ 7/1				A.1.1		\$		
	Add amounts on lines (1) and (2)	d	305,114		Add amounts on			<u>d</u>	305,114
0	Total revenue per line 12,		450 045 440		Total expenses p			i i	
_	Form 990 (line c plus line d)	0	153,645,446		Form 990 (line c	•		9	155,479,146
Par	t V List of Officers, Directors, Tr	uste	es, and Key Ei	mpl	oyees	(List each one ev	en if not		
	compensated see Specific Instruction	s on	page 26 )						
				(B)	Title and average	(C) Compen-	(D) Contributions to	1	(E) Expense
	(A) Name and address				hours per week	sation (If not	employee benefit plans &	ac	count and other
				d	voted to position	paid, enter -0- )	deferred compensation		allowances
See	attached Schedule for detail							l	
						482,592	70,094	N/A	
	<del></del>			· · -		ļ	·	-	
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						<del>                                     </del>		<del> </del>	
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			j						

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? If "Yes," attach schedule - see Specific Instructions on page 27

Υe

Form	n 990 (2001) The Leukemia & Lymphoma Society, Inc 13-5644916		Page 5
	t VI , Other Information (See Specific Instructions on page 27 )		Yes or No
	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76	No
	Were any changes made in the organizing or governing documents but not reported to the IRS?	77	No
	If "Yes," attach a conformed copy of the changes		
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered		
	by this return?	78a	No
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b	N/A
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes,"		
	attach a statement	79	No
80a	Is the organization related (other than by association with a statewide or nationwide organization)		
	through common membership, governing bodies, trustees, officers, etc., to any other exempt or		
	nonexempt organization?	80a	Yes
b	If "Yes," enter the name of the organization  LS Research Programs, Inc		
	LSA Research Foundations, Inc and check whether it is X exempt OR nonexempt		
81a	Enter direct or indirect political expenditures. See line 81 instructions.  81a 0		
ь	Did the organization file Form 1120-POL for this year?	81b	No No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at		
_	no charge or at substantially less than fair rental value?	82a	Yes
Ь	If "Yes," you may indicate the value of these items here. Do not include this amount		
	as revenue in Part I or as an expense in Part II (See instructions in Part III)  Big Indeterminable  Big Indeterminable  Big Indeterminable  Big Indeterminable  Big Indeterminable	1	//////////////////////////////////////
b b	Did the organization comply with the disclosure requirements relating to guid pro quo contributions?	83a 83b	Yes
	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	No
b	If "Yes," did the organization include with every solicitation an express statement that such		
	contributions or gifts were not tax deductible?	84b	N/A
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?	85a	N/A
ь	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b	N/A
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization		
	received a waiver for proxy tax owed for the prior year		
С	Dues, assessments, and similar amounts from members 85c N/A		
d	Section 162(e) lobbying and political expenditures  85d N/A		
0	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices  85e N/A		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)  85f N/A		
9	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	N/A
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its		
	reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax	_ <b>_</b> .	A1/4
	year?	85h	N/A
86	501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12 86a N/A		
h			
b 87	Gross receipts, included on line 12 for public use of club facilities  501(c)(12) orgs. Enter a Gross income from members or shareholders  86b N/A  87a N/A		
b b	Gross income from other sources (Do not net amounts due or paid to other		
	sources against amounts due or received from them )		
88	At any time during the year did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity		
	disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Part IX	88	No
89a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under		
	section 4911 0 section 4912 0 , section 4955 0		
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did		
	it become aware of an excess benefit transaction from a prior year? If 'Yes," attach a statement explaining each transaction	89b	No
C	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under		
	sections 4912 4955, and 4958	A	0
d	Enter Amount of tax on line 89c, above, reimbursed by the organization	N/A	
90a	List the states with which a copy of this return is filed See Attached		<del></del>
b	Number of employees employed in the pay period that includes March 12, 2001 (See instructions )	L	956
91	The books are in care of Executive Vice President & CFO Telephone no (914) 82	1-882	2
	Located at 1311 Mamaroneck Avenue, White Plains, NY ZIP + 4 10605		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here	1	
	and enter the amount of tax-exempt interest received or accrued during the tax year 92	N/A	
		For	m 990 (2001)

The Leukemia & Lymphoma Society, Inc 13-5644916 Page 6

(See Specific Instructions on page 32)

Unrelated business income Excluded by section 512, 513, or 514 (E)

	Enter gross a	mounts unless otherwise	Unrelated bus	iness income	Excluded by section	512, 513, or 514	(E)
ındıc	ated		(A)	(B)	(C)	(D)	Related or exempt
93	Program sen	vice revenue	Business code	Amount	Exclusion code	Amount	function income
а							<u> </u>
b							<del>-</del>
C							
d							
Θ							
f	Medicare/Me	dicaid payments					
g	Fees and cont	racts from government agencies					
94	Membership	dues and assessments			•		
95	Interest on sav	rings and temporary cash investments			14	2,307,846	
96	Dividends an	id interest from securities			14	3,012	
97	Net rental ind	come or (loss) from real estate					
а	debt-finance						
þ	not debt-fina	nced property			16	4,537	
98		me or (loss) from personal property					
99							
100	. ,	from sales of assets other than inventory			18	-1,021,746	<u> </u>
101		or (loss) from special events				<del>                                     </del>	
	•	or (loss) from sales of inventory	<u>-</u>				
		e a Grant Refunds				100.050	1,606,680
Ь	Miscellaneou	is income		<u> </u>	01	102,659	
c							<del></del>
ď							
9	Cubinial (ada	d cols (B), (D), and (E))				1,396,308	1 606 600
	•	e 104, columns (B), (D), and (E))				1,390,300	1,606,680 3,002,988
		us line 1d, Part I, should equal the amo	ount on line 12.	Dart I		-	3,002,988
		ionship of Activities to the Accor					
		Explain how each activity for which income		<del></del>			uctions on page 32 )
	<b>I</b>	·			· · · · · · · · · · · · · · · · · · ·	y to the	
			_= /_=		- frada far arrab arras	\	
103		accomplishment of the organization's exem		than by providing	g funds for such purpos	ses)	
103		accomplishment of the organization's exem Refunds from Grantees for unused po		than by providing	g funds for such purpos	ses)	
103				than by providing	g funds for such purpos	ses) 	
103				than by providing	g funds for such purpos	ses)	
	a I	Refunds from Grantees for unused po	rtion of Grants				relione on page 23.)
103	a I	Refunds from Grantees for unused po	rtion of Grants	egarded Enti	lies	(See Specific Instru	uctions on page 33 )
	t IX Inform	Refunds from Grantees for unused policy policy action Regarding Taxable Subsidition (A)	rtion of Grants	egarded Entil	ties (C)	(See Specific Instru	(E)
	t IX Inform	Refunds from Grantees for unused polarised polarised polarised in the second section Regarding Taxable Subsidition (A)  Name, address and EIN of corporation,	rtion of Grants	egarded Entil (B) Percentage of	lies	(See Specific Instru	(E) End-of-year
Par	t IX Inform	Refunds from Grantees for unused policy policy action Regarding Taxable Subsidition (A)	rtion of Grants	egarded Entil (B) Percentage of ownership interest	ties (C)	(See Specific Instru	(E)
	t IX Inform	Refunds from Grantees for unused polarised polarised polarised in the second section Regarding Taxable Subsidition (A)  Name, address and EIN of corporation,	rtion of Grants	egarded Entil (B) Percentage of ownership interest %	ties (C)	(See Specific Instru	(E) End-of-year
Par	t IX Inform	Refunds from Grantees for unused polarised polarised polarised in the second section Regarding Taxable Subsidition (A)  Name, address and EIN of corporation,	rtion of Grants	egarded Entil (B) Percentage of ownership interest %	ties (C)	(See Specific Instru	(E) End-of-year
Par	t IX Inform	Refunds from Grantees for unused polarised polarised polarised in the second section Regarding Taxable Subsidition (A)  Name, address and EIN of corporation,	rtion of Grants	egarded Entil (B) Percentage of ownership interest %	ties (C)	(See Specific Instru	(E) End-of-year
Par N/A	t IX Inform	Refunds from Grantees for unused pol lation Regarding Taxable Subsidi (A) Name, address and EIN of corporation, partnership, or disregarded entity	rtion of Grants	egarded Entile (B) Percentage of ownership interest % % % %	ties (C) Nature of activities	(See Specific Instru (D) Total Income	(E) End-of-year assets
Par N/A	t IX Inform	Refunds from Grantees for unused polation Regarding Taxable Subsidi (A)  Name, address and EIN of corporation, partnership, or disregarded entity	rtion of Grants  aries and Disr	egarded Entil (B) Percentage of ownership interest % % % % % sonal Benefit	ties (C) Nature of activities	(See Specific Instru	(E) End-of-year assets  uctions on page 33 )
Par N/A	t IX Inform	Refunds from Grantees for unused polarion Regarding Taxable Subsidi (A)  Name, address and EIN of corporation, partnership, or disregarded entity  nation Regarding Transfers Association during the year receive any funds of	rtion of Grants  aries and Disr  ciated with Per	egarded Entile (B) Percentage of ownership interest % % % % sonal Benefit	ties (C) Nature of activities t Contracts s on a personal benefit	(See Specific Instru	(E) End-of-year assets
Par N/A Par (a)	t IX Inform  t X Inform  Did the organiz	Refunds from Grantees for unused polation Regarding Taxable Subsidi (A)  Name, address and EIN of corporation, partnership, or disregarded entity  action Regarding Transfers Association during the year receive any funds of cation during the year, pay premiums directly	ciated with Per	egarded Entile (B) Percentage of ownership interest % % % % sonal Benefit	ties (C) Nature of activities t Contracts s on a personal benefit	(See Specific Instru	(E) End-of-year assets  uctions on page 33 )
Par N/A Par (a)	t IX Inform  t X Inform  Did the organiz	Refunds from Grantees for unused polation Regarding Taxable Subsidi (A)  Name, address and EIN of corporation, partnership, or disregarded entity  action Regarding Transfers Association during the year receive any funds of cation during the year, pay premiums direct file Form 8870 and Form 4720 (see instructions)	ciated with Perdirectly or indirectly, or citions)	egarded Entil (B) Percentage of ownership interest % % % % rsonal Benefit v, to pay premium	ties (C) Nature of activities t Contracts s on a personal benefit	(See Specific Instru (D) Total income (See Specific Instru	(E) End-of-year assets  uctions on page 33 ) Yes X No
Par N/A Par (a)	t IX Inform  t X Inform  Did the organiz	Refunds from Grantees for unused policy action Regarding Taxable Subsidia (A)  Name, address and EIN of corporation, partnership, or disregarded entity  action Regarding Transfers Association during the year receive any funds of action during the year, pay premiums directly file Form 8870 and Form 4720 (see instruction of the content	ciated with Perdirectly or indirectly or indirectly, or ctions)	egarded Entre (B) Percentage of ownership interest % % % % sonal Benefit v, to pay premium n a personal bene	ties (C) Nature of activities t Contracts s on a personal benefit	(See Specific Instru	(E) End-of-year assets  actions on page 33 ) Yes X No Yes X No
Par  N/A  Par  (a) (b) Note	t IX Inform  t X Inform  Did the organia  If "Yes" to (b),	Refunds from Grantees for unused policy action Regarding Taxable Subsidia (A)  Name, address and EIN of corporation, partnership, or disregarded entity  action Regarding Transfers Association during the year receive any funds of action during the year, pay premiums directly file Form 8870 and Form 4720 (see instruction of the content	ciated with Perdirectly or indirectly or indirectly, or ctions)	egarded Entre (B) Percentage of ownership interest % % % % sonal Benefit v, to pay premium n a personal bene	(C) Nature of activities  Contracts s on a personal benefit fit contract?	(See Specific Instru	(E) End-of-year assets  actions on page 33 ) Yes X No Yes X No
Par (a) (b) Note	t IX Inform  Inform  Did the organize If "Yes" to (b),  ase	Refunds from Grantees for unused policy action Regarding Taxable Subsidition (A)  Name, address and EIN of corporation, partnership, or disregarded entity  Lation Regarding Transfers Association during the year receive any funds of cation during the year receive any funds of cation during the year pay premiums directly file Form 8870 and Form 4720 (see instructions of paying 1 declare that I have and belief the transfer of paying 1 declare that I have and belief the transfer of paying 1 declare that I have and belief the transfer of paying 1 declare that I have and belief the transfer of paying 1 declare that I have and belief the transfer of paying 1 declare that I have and belief the transfer of paying 1 declare that I have and belief the transfer of paying 1 declare that I have and belief the transfer of paying 1 declare that I have and belief the transfer of paying 1 declare that I have and belief the transfer of paying 1 declare that I have and belief the transfer of paying 1 declare that I have and belief the transfer of paying 1 declare that I have and belief the transfer of paying 1 declare that I have and belief the transfer of paying 1 declare that I have and belief the transfer of paying 2 declare that I have and belief the transfer of paying 2 declare that I have and belief the transfer of paying 2 declare that I have an action 1 declare that I have a declared the transfer of paying 2 declared that I have a declared the transfer of paying 2 declared that I have a declared the transfer of paying 2 declared that I have a declared the transfer of paying 2 declared that I have a declared the transfer of paying 2 declared that I have a declared the transfer of paying 2 declared that I have a declared the transfer of paying 2 declared that I have a declared the transfer of paying 2 declared that I have a declared the transfer of paying 2 declared that I have a declared the transfer of paying 2 declared th	ciated with Perdirectly or indirectly or indirectly, or ctions)	egarded Entre (B) Percentage of ownership interest % % % % sonal Benefit v, to pay premium n a personal bene	(C) Nature of activities  Contracts s on a personal benefit fit contract?	(See Specific Instru	(E) End-of-year assets  actions on page 33 ) Yes X No Yes X No
Par  N/A  Par  (a) (b) Note	t IX Inform  Inform  Did the organize If "Yes" to (b),  ase	Refunds from Grantees for unused policy action Regarding Taxable Subsidia (A)  Name, address and EIN of corporation, partnership, or disregarded entity  action Regarding Transfers Association during the year receive any funds of action during the year, pay premiums direct file Form 8870 and Form 4720 (see instructional policy for people of officer of officer	ciated with Perdirectly or indirectly or indirectly, or ctions)	egarded Entre (B) Percentage of ownership interest % % % % sonal Benefit v, to pay premium n a personal bene	(C) Nature of activities  Contracts s on a personal benefit fit contract?	(See Specific Instru	(E) End-of-year assets  actions on page 33 ) Yes X No Yes X No
Par (a) (b) Note	t IX Inform  Inform  Did the organize If "Yes" to (b),  ase	Refunds from Grantees for unused policy action Regarding Taxable Subsidia (A)  Name, address and EIN of corporation, partnership, or disregarded entity  Return Regarding Transfers Association during the year receive any funds of action during the year, pay premiums direct action during the year.  Signeture of officer  John E Walter EVP & CFO	ciated with Perdirectly or indirectly or indirectly, or ctions)	egarded Entre (B) Percentage of ownership interest % % % % sonal Benefit v, to pay premium n a personal bene	ties (C) Nature of activities  t Contracts s on a personal benefit fit contract? schedules and statements end d on all information of which pr	(See Specific Instru	(E) End-of-year assets  actions on page 33 ) Yes X No Yes X No
Par (a) (b) Note	t IX Inform  Inform  Did the organize If "Yes" to (b),  ase	Refunds from Grantees for unused policy action Regarding Taxable Subsidia (A)  Name, address and EIN of corporation, partnership, or disregarded entity  action Regarding Transfers Association during the year receive any funds of action during the year, pay premiums direct file Form 8870 and Form 4720 (see instructional policy for people of officer of officer	ciated with Perdirectly or indirectly or indirectly, or ctions)	egarded Entre (B) Percentage of ownership interest % % % % sonal Benefit v, to pay premium n a personal bene	ties (C) Nature of activities  t Contracts s on a personal benefit fit contract? schedules and statements end d on all information of which pr	(See Specific Instru	(E) End-of-year assets  actions on page 33 ) Yes X No Yes X No
Par (a) (b) Note	t IX Inform  Inform  Did the organize If "Yes" to (b),  ase	Refunds from Grantees for unused policy action Regarding Taxable Subsidia (A)  Name, address and EIN of corporation, partnership, or disregarded entity  Return Regarding Transfers Association during the year receive any funds of action during the year, pay premiums direct action during the year.  Signeture of officer  John E Walter EVP & CFO	ciated with Perdirectly or indirectly or indirectly, or ctions)	egarded Entre (B) Percentage of ownership interest % % % % sonal Benefit v, to pay premium n a personal bene	ties (C) Nature of activities  t Contracts s on a personal benefit fit contract?  schedules and statements end d on all information of which pr	(See Specific Instruction (D) Total Income (See Specific Instruction Contract?	(E) End-of-year assets  actions on page 33 ) Yes X No Yes X No
Par (a) (b) Note	t IX Inform  Inform  Did the organize If "Yes" to (b),  ase	Refunds from Grantees for unused policy action Regarding Taxable Subsidia (A)  Name, address and EIN of corporation, partnership, or disregarded entity  Return Regarding Transfers Association during the year receive any funds of action during the year, pay premiums direct action during the year.  Signeture of officer  John E Walter EVP & CFO	ciated with Perdirectly or indirectly or indirectly, or ctions)	egarded Entil (B) Percentage of ownership interest % % % % sonal Benefit to pay premium a personal bene	ties (C) Nature of activities  t Contracts s on a personal benefit fit contract?  schedules and statements end d on all information of which pr	(See Specific Instruction (D) Total Income (See Specific Instruction Contract?  d to the best of my knowled D Preparer's SSN or	(E) End-of-year assets  uctions on page 33 ) Yes X No - Yes X No
Par (a) (b) Note	t IX Inform  Inform  Did the organize If "Yes" to (b),  ase	Refunds from Grantees for unused policy action Regarding Taxable Subsidia (A)  Name, address and EIN of corporation, partnership, or disregarded entity  Return Regarding Transfers Association during the year receive any funds of action during the year, pay premiums direct action during the year.  Signeture of officer  John E Walter EVP & CFO	ciated with Perdirectly or indirectly or indirectly, or ctions)	egarded Entil (B) Percentage of ownership interest % % % % sonal Benefit to pay premium a personal bene	ties (C) Nature of activities  t Contracts s on a personal benefit fit contract?  schedules and statements end d on all information of which pr	(See Specific Instruction (D) Total Income (See Specific Instruction Contract?	(E) End-of-year assets  uctions on page 33 )  Yes X No - Yes X No

#### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

#### **Organization Exempt Under Section 501(c)(3)**

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information - (See separate instructions )

OMB No 1545-0047

2001

MUST be completed by the above organizations and attached to their Form 990 or 990-EZ Internal Revenue Service Name of the organization Employer identification number The Leukemia & Lymphoma Society, Inc. 13-5644916 Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See page 1 of the instructions List each one If there are none, enter "None") (e) Expense account (a) Name and address of each (b) Title and average (d) Contributions to employee paid more than \$50,000 (c) Compensation hours per week and other employee benefit plans & allowances devoted to position deferred compensation See attached schedule Total number of other employees paid over \$50,000 163 Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services (See page 2 of the instructions List each one (whether individuals or firms) If there are none, enter "None") (a) Name and address of each independent contractor (b) Type of service (c) Compensation paid more than \$50,000 Paycor 644 Linn Street, Suite 200 Cincinatti, OH 45203 Supporting Services Consulting - Fundraising 1.583,994 Interact Connect, Inc 325 Springside Drive Akron, OH 44333 Supporting Service 900,632 Creative Consulting Experian 901 West Bond Street Lincoln, NE 68521 Supporting Services Creative Consulting 812,683 Paradysz Matera & Co 215 Park Avenue South, Suite 1401 New York, NY 10003 Supporting Services Creative Consulting 798.027 Alden Consulting 108 Corporate Park Drive White Plains, NY 10604 Supporting Services Creative Consulting 735,723 Total number of others receiving over \$50,000 for professional services

Sched	ule /	A (Form 990 or 990-EZ) 2001 1 The Leukemia & Lymphoma Society, Inc 13-5644916		P	age 2
Part I	III ·	Statements About Activities (See page 2 of the instructions )		Yes	No
ć	attei or in	ing the year, has the organization attempted to influence national, state, or local legislation, including any mpt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid incurred in connection with the lobbying activities \$ 53,753 (Must equal amounts on line 38, VI-A, or line i of Part VI-B)	1	X	
2 E 2 S	Part state Duri subs with own	anizations that made an election under section 501(h) by filing Form 5768 must complete VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a ement giving a detailed description of the lobbying activities ing the year, has the organization, either directly or indirectly, engaged in any of the following acts with any stantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or any taxable organization with which any such person is affiliated as an officer, director, trustee, majority er, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining transactions.)			
		e, exchange, or leasing of property?	2a		T X
bЬ	_end	ding of money or other extension of credit?	2b		X
c F	urn	nishing of goods, services, or facilities?	2c		X
d F	Payı	ment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	X	
eΤ	Γran	nsfer of any part of its income or assets?	20		X
<b>4</b> [	Оо у	s the organization make grants for scholarships, fellowships, student loans, etc ? (See Note below ) you have a section 403(b) annuity plan for your employees?	3	X	
		ach a statement to explain how the organization determines that individuals or organizations receiving grants rom it in furtherance of its charitable programs "qualify" to receive payments			
Part I	V	Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions )			
5		Inzation is not a private foundation because it is. (Please check only ONE applicable box.)  A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i)  A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)  A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).  A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v)  A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospiname, city, and state.  An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the Support Schedule in Part IV-A.)  An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)  An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its chanitable, etc., functions- subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)  An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)  Provide the following information about the supported organizations. (See page 5 of the instructions.)	_		
		(a) Name(s) of supported organization(s)  (b) Line n  from ab			
14 [		An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instruction			-

Sche	dule A (Form 990 or 990-EZ) 2001 The Leukemia & L	ymphoma Society,	Inc	13-5644916		Page 3
	IV-A Support Schedule (Complete only if y			2) Use cash met	hod of accounting	9
NOT	E You may use the worksheet in the instructions for	or converting from the	he accrual to the c	ash method of acc	counting	
	endar year (or fiscal year beginning in)	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
	Gifts, grants, and contributions received (Do		1			
	not include unusual grants   See line 28 )	149,358,305	130,616,633	105,477,398	81,657,664	467,110,000
16	Membership fees received					0
17	Gross receipts from admissions, merchandise					
	sold or services performed, or furnishing of					
	facilities in any activity that is related to the					
	organization's charitable, etc., purpose	31,291,806	28,262,315	23,891,888	20,180,279	103,626,288
18	Gross income from interest, dividends, amounts					
	received from payments on securities loans		İ			
	(section 512(a)(5)) rents, royalties, and unrelated					
	business taxable income (less section 511 taxes)					
	from businesses acquired by the organization					
	after June 30, 1975	2,999,864	2,325,333	1,240,942	1,199,877	7,766,016
19	Net income from unrelated business activities					
	not included in line 18					0
20	Tax revenues levied for the organization's benefit		ľ			
	and either paid to it or expended on its behalf					0
21	The value of services or facilities furnished to the					
	organization by a governmental unit without charge					
	Do not include the value of services or facilities					
	generally furnished to the public without charge					0
22	Other income Attach a schedule Do not include					
	gain or (loss) from sale of capital assets	1,052,096	793,917	524,578	781,287	
	Total of lines 15 through 22	184,702,071	161,998,198	131,134,806		581,654,182
	Line 23 minus line 17	153,410,265	133,735,883	107,242,918		478,027,894
	Enter 1% of line 23	1,847,021	1,619,982	1,311,348	1,038,191	
	Organizations described on lines 10 or 11		2% of amount in o		26a	9,560,558
Þ	Prepare a list for your records to show the name of					
	governmental unit or publicly supported organization					
	amount shown in line 26a. Do not file this list with yo		e total of all these	excess amounts	26b	2,719,754
	Total support for section 509(a)(1) test Enter line 2		•		26c	478,027,894
a	Add Amounts from column (e) for lines 18	7,766,016 19	0 740 754			
	22	3,151,878 26b	2,719,754		26d	13,637,648
	Public support (line 26c minus line 26d total)				26e	
	Public support percentage (line 26e (numerator)				. 26f	97 15%
27		For amounts include				
	"disqualified person," prepare a list for your records		•		ch year from, eac	:n
	"disqualified person" Do not file this list with your re	turn Enter the sum		for each year	(4007)	
	(2000)(1999)	1.5	(1998)	ns	(1997)	
b	For any amount included in line 17 that was receive			•	•	
	your records to show the name of, and amount rece					
	25 for the year or (2) \$5,000 (Include in the list organization)					
	file this list with your return. After computing the difference of the second of the s			and the larger am	iount described in	1
	(1) or (2), enter the sum of these differences (the ex	cess amounts) for	each year		(4007)	

(2000)\_\_\_\_\_(1999)\_\_\_\_\_\_

c Add	Amounts from column (e) for lines	15 20	0 16 0 21	0		] <b>27</b> c	0
	! <i>!</i>					210	
d Add	Line 27a total	and line	27b total	0		27d	0
e Publi	support (line 27c total minus line 27d	tal)		<del></del>		27e	0
	support for section 509(a)(2) test Enter		m line 23, colur	mn (e)	27f	0 //////	
g Publ	ic support percentage (line 27e (num	rator) divide	ed by line 27f	(denominator))		27g	0 00%
h Inves	tment income percentage (line 18, c	lumn (e) (nu	<u>umer</u> ator) divi	ded by line 27f (d	denominator))	27h	0 00%

28 Unusual Grants For an organization described in line 10, 11, or 12 that received any unusual grants during 1997 through 2000, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15

Page 4

Part V . Private School Questionnaire
(To be completed ONLY by schools

The Leukemia & Lymphoma Society, Inc (See page 7 of the instructions )

	(To be completed ONLT by Schools that checked the box on the 6 in Part IV)		,	
			Yes	No
	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?  Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	. 29 30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?  If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)	31		
a b c	Does the organization maintain the following Records indicating the racial composition of the student body, faculty, and administrative staff? Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? Copies of all material used by the organization or on its behalf to solicit contributions?	32a 32b 32c 32d		
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)			
	Does the organization discriminate by race in any way with respect to Students' rights or privileges?	33a		
b	Admissions policies?	33ь		
	Employment of faculty or administrative staff?	33c		<del></del>
	Scholarships or other financial assistance?  Educational policies?	33d 33e		
	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)			
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended?  If you answered "Yes" to either 34a or b, please explain using an attached statement	34	) //////	
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Sche	edule A (Form 990 or 990-EZ) 2001	The Leukemia &	Lymphoma Socie	ety, Inc	13	3-564	14916	Page 5
	t VI-A. Lobbying Expenditures by Electin	_	•	age 9 of the	ınstruc	tions	s )	<u> </u>
	(To be completed ONLY by an eligible	organization that f	iled Form 5768)	•				
Chec	ck aif the organization belongs to an affiliate	d group Che	ck <b>b</b> if you	ı checked "a" aı	nd "limit	ed co	ntrol' provisio	ns apply
	1 4 1 -11						(a)	(b)
		bying Expendit					Affiliated	To be completed for ALL electing organizations
20	(The term "expenditures" r					$\overline{}$	group totals	
	Total lobbying expenditures to influence public				_	36		
	Total lobbying expenditures to influence a legisl Total lobbying expenditures (add lines 36 and 3		lobbying)			37		
	Other exempt purpose expenditures	17)				38 39	0	0
	Total exempt purpose expenditures (add lines 3	88 and 30)			ļ	10	0	0
	Lobbying nontaxable amount Enter the amount	· ·	a table -					
٠.	If the amount on line 40 is -		g table - ontaxable amour	ntie -				
	Not over \$500,000	20% of the amoun						
	Over \$500,000 but not over \$1,000,000		of the excess over	\$500,000	<b>)</b>			
	Over \$1,000 000 but not over \$1,500,000	·	6 of the excess over		<b>\</b>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		0
	Over \$1,500,000 but not over \$17,000,000	•	of the excess over \$		J 🥡			
	Over \$17,000,000	\$1,000,000		, ,				
42	Grassroots nontaxable amount (enter 25% of lir				4	12		0
	Subtract line 42 from line 36 Enter -0- if line 42	•	36		4	13	0	0
44	Subtract line 41 from line 38 Enter -0- if line 41	l is more than line	38		4	14	0	0
			-					
	Caution If there is an amount on either line 43							
		Averaging Perio						
	(Some organizations that made a sec					ve co	lumns belov	٧
	See the instruction	s for lines 45 (nrol T	igh 50 on page 11	of the instruc	ctions )			<del> </del>
	See the instruction		igh 50 on page 1° bbying Expendit			Ave	raging Pend	od
	Calendar year (or fiscal		bbying Expendit	ures During		Avei		, <del></del>
		Lo					raging Pend (d) 1998	od (e) Total
	Calendar year (or fiscal	Lo (a)	bbying Expendit	ures During (c)			(d)	(e)
45	Calendar year (or fiscal	Lo (a)	bbying Expendit	ures During (c)			(d)	(e)
45	Calendar year (or fiscal year beginning in)	Lo (a)	bbying Expendit	ures During (c)			(d)	(e) Total
	Calendar year (or fiscal year beginning in)	Lo (a)	bbying Expendit	ures During (c)			(d)	(e) Total
46	Calendar year (or fiscal year beginning in)  Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 45(e))	Lo (a)	bbying Expendit	ures During (c)			(d)	(e) Total 0
46	Calendar year (or fiscal year beginning in)  Lobbying nontaxable amount	Lo (a)	bbying Expendit	ures During (c)			(d)	(e) Total 0
46 47	Calendar year (or fiscal year beginning in)  Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures	Lo (a)	bbying Expendit	ures During (c)			(d)	(e) Total 0
46 47	Calendar year (or fiscal year beginning in)  Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 45(e))	Lo (a)	bbying Expendit	ures During (c)			(d)	(e) Total 0
46 47 48	Calendar year (or fiscal year beginning in)  Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount	Lo (a)	bbying Expendit	ures During (c)			(d)	(e) Total 0 0
46 47 48	Calendar year (or fiscal year beginning in)  Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount	Lo (a)	bbying Expendit	ures During (c)			(d)	(e) Total 0
46 47 48 49	Calendar year (or fiscal year beginning in)  Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount  Grassroots ceiling amount (150% of line 48(e))	Lo (a)	bbying Expendit	ures During (c)			(d)	(e) Total 0 0 0
46 47 48 49 50	Calendar year (or fiscal year beginning in)  Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount  Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures	(a) 2001	bbying Expendit (b) 2000	ures During (c)			(d)	(e) Total 0 0
46 47 48 49 50	Calendar year (or fiscal year beginning in)  Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount  Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  t VI-B Lobbying Activity by Nonelecting	(a) 2001	bbying Expendit (b) 2000	(c) 1999	4-Year		(d) 1998	(e) Total 0 0 0
46 47 48 49 50	Calendar year (or fiscal year beginning in)  Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount  Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  t VI-B Lobbying Activity by Nonelecting (For reporting only by organizations tha	(a) 2001  Public Charities t did not complete	bbying Expendit (b) 2000	(c) 1999	4-Year		(d) 1998	(e) Total 0 0 0
46 47 48 49 50 Par	Calendar year (or fiscal year beginning in)  Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount  Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  t VI-B Lobbying Activity by Nonelecting (For reporting only by organizations thaing the year, did the organization attempt to influence na	Public Charities t did not complete	bbying Expendit (b) 2000  2001  Part VI-A) (See plegislation, including	(c) 1999	4-Year	tions	(d) 1998	(e) Total 0 0 0
46 47 48 49 50 Par	Calendar year (or fiscal year beginning in)  Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount  Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  t VI-B Lobbying Activity by Nonelecting (For reporting only by organizations that ag the year, did the organization attempt to influence nattempt to influence public opinion on a legislative matter	Public Charities t did not complete	bbying Expendit (b) 2000  2001  Part VI-A) (See plegislation, including	(c) 1999	4-Year	tions	(d) 1998	(e) Total 0 0 0
46 47 48 49 50 Pari	Calendar year (or fiscal year beginning in)  Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount  Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  t VI-B Lobbying Activity by Nonelecting (For reporting only by organizations that ing the year, did the organization attempt to influence nate	Public Charities t did not complete stronal, state or local	(b) 2000  2000  S Part VI-A) (See plegislation, including ough the use of	(c) 1999	4-Year	tions	(d) 1998	(e) Total 0 0 0
46 47 48 49 20 20 49 20 40 40 40 40 40 40 40 40 40 40 40 40 40	Calendar year (or fiscal year beginning in)  Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount  Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  t VI-B Lobbying Activity by Nonelecting (For reporting only by organizations that ag the year, did the organization attempt to influence nattempt to influence public opinion on a legislative matter Volunteers	Public Charities t did not complete stronal, state or local	(b) 2000  2000  S Part VI-A) (See plegislation, including ough the use of	(c) 1999	Instruc Yes N	lo X	(d) 1998	(e) Total 0 0 0
46 47 48 49 50 Pari	Calendar year (or fiscal year beginning in)  Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount  Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  t VI-B Lobbying Activity by Nonelecting (For reporting only by organizations that ag the year, did the organization attempt to influence nate attempt to influence public opinion on a legislative matter Volunteers  Paid staff or management (Include compensation in e	Public Charities t did not complete stronal, state or local	(b) 2000  2000  S Part VI-A) (See plegislation, including ough the use of	(c) 1999	Instruc Yes N	ttions	(d) 1998	(e) Total  0 0 0 0 0
46 47 48 49 50 Pari	Calendar year (or fiscal year beginning in)  Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount  Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  t VI-B Lobbying Activity by Nonelecting (For reporting only by organizations than the year, did the organization attempt to influence neattempt to influence public opinion on a legislative matter Volunteers  Paid staff or management (Include compensation in emembers, legislators, or the public Publications, or published or broadcast statements	Public Charities t did not complete ational, state or local er or referendum, thr	(b) 2000  2000  S Part VI-A) (See plegislation, including ough the use of	(c) 1999	Instruc Yes N	lo XXX	(d) 1998	(e) Total 0 0 0
46 47 48 49 50 2ar nny a a b c	Calendar year (or fiscal year beginning in)  Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount  Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  t VI-B Lobbying Activity by Nonelecting (For reporting only by organizations than the year, did the organization attempt to influence nate attempt to influence public opinion on a legislative matter Volunteers  Paid staff or management (Include compensation in e Media advertisements  Mailings to members, legislators, or the public	Public Charities t did not complete ational, state or local er or referendum, thr	bbying Expendit  (b) 2000  2000  S Part VI-A) (See plegislation, including ough the use of a lines c through h)	(c) 1999	Instruc Yes N	lo X	(d) 1998	(e) Total  0 0 0 0 0

Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

Total lobbying expenditures (Add lines c through h)

53,753

	A (Form 990 or 990-		The Leukemia & Lymphoma		13-5644916		P	age 6
Part VII		-	fers To and Transactions					
	Noncharitable			page 12 of the instructions )				
				the following with any other org				
				ns) or in section 527, relating to	political organizat	ions?		
	-	orting organizati	on to a noncharitable exempt	t organization of			Yes	No
(1)	Cash					51a(l)		X
	Other assets					a(li)	<u> </u>	X
<b>b</b> Othe	er transactions							
			h a noncharitable exempt org			b(l)	<u></u>	<u> </u>
			haritable exempt organizatior	1		b(ii)		_ X
(111)	Rental of facilities	s, equipment, or	other assets			b(iil)		Х
	Reimbursement	-				b(iv)	<u> </u>	_ X
(v)	Loans or loan gu	arantees				b(v)		X
			pership or fundraising solicital			b(vi)	<u> </u>	_ X
			g lists, other assets, or paid e			С		Х
<b>d</b> If the	e answer to any of	the above is "Ye	es," complete the following so	chedule Column (b) should alw	ays show			
the f	aır market value o	f the goods, oth	er assets, or services given b	y the reporting organization. If	the			
orga	nization received	less than fair ma	irket value in any transaction	or sharing arrangement, show i	n column			
(d) tl	he value of the go	ods, other asset	s, or services received					
(a)	(b)		(c)		(d)			
Line no	Amount involved	Name of nonc	haritable exempt organization	Description of transfers, tran	sactions, and sha	ring arran	geme	nts
					· · · · · · · · · · · · · · · · · · ·			
			_					
				··· <del></del>				
	<u> </u>		<del></del>		<del></del>			
							<del></del>	<del></del>
52a Is the	e organization dire	ectly or indirectly	affiliated with, or related to, or	one or more tax-exempt organiz	ations			
			e (other than section 501(c)(3			Yes	X	No
	es," complete the	• •		,, <del>-</del> -	L	J	ننت	,
	(a)		(b)		(c)			
	Name of organiz	ation	Type of organization	Descripti	on of relationship			
					<u></u>			
						· · · · ·		
					· · · · · · · · · · · · · · · · · · ·			
					<del> </del>			
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				<u> </u>		··		
				<u> </u>				
				i e e e e e e e e e e e e e e e e e e e				

Line 56 (990) - Other Investments

1		Beginning	End
1 Interest in Perpetual Trust	1	16,000	16,000
2	2		
3	3		
4	4		
5			
6	6		
7	7		
8			
9	9		
10	10		
11 Total other investments		16,000	16,000

#### Leukemia & Lymphoma Society, Inc. FORM 990, PART I, LINE 8 a - d Year ended 6/30/02

	Total	Total	Total	
	Gross Sales	Cost	Gains	
Common stock	7,985,388	9,007,134	(1,021,746)	

#### The Leukemia & Lymphoma Society, Inc Special Fund Raising Events and Activities Year Ended June 30, 2002

#### Part I, Line 9

The Leukemia & Lyphoma Society Inc. participated in or benefits from numerous special fund raising events and activities. The following is a listing of the combined support and direct expenses of the three largest events held during the fiscal year.

Description of Event		Gross <u>Receipts</u>	Less Contributions	Gross Revenue Line 9(a)	Direct Expenses Line 9(b)	Net Support <u>Line 9(c)</u>
Teams in Training						
Rock 'n' Roll Marathon		10,572 800	7 982,400	2,590 400	2,590,400	0
Teams in Training						
Marathon		6,608,700	4,963,100	1 645,600	1,645,600	0
Teams in Training		0 540 000	4 707 000	4 005 000	4 005 000	
Honolulu Marathon		6,542 800	4 737 000	1 805 800	1 805 800	0
Sub-Total		23 724,300	17,682,500	6 041,800	6,041,800	
All other events consisting of the following  Description	No Of <u>Events</u>					
D. I.T. E	50					
Black Tie Event	50 48					
Celebrity Waiters Dress Down Days	40					
Golf Events	56					
Hops	28					
Light the Night	230					
Man/Woman of the Year	40					
Pasta for Pennies	60					
Regatta	45					
Team In Training - Run/Walk	58					
TNT Cycle	12					
TNT Triathlon	11					
Televent/Radiothon						
Total all other event	678	102 711,090	81,005 860	21 705 230	21,705,230	0
TOTAL ALL EVENTS		126 435 390	98 688,360	27,747 030	27 747 030	0

## The Leukemia & Lymphoma Society Other Changes in Net Assets of Fund Balance For the Year Ended June 30, 2002

Part 1, Line 20 - Other Changes

Net unrealized gains and losses on investments carried at market value

\$ (1,832,039)

#### The Leukemia & Lymphoma Society Year Ended June 30, 2002

#### Part II, Line 22 - Grant

Fellows	3,378,443
Special Fellows	4,993,748
Scholars	6,670,000
Clincial Scholars	1,735,000
Translational	10,493,442
SCOR	10,377,367

\$37,648,000

#### 13-5644916

### The Leukemia & Lymphoma Society Total Patient Service Reimbursement to Chapters - Group Return Fiscal Year Ended June 30, 2002

Part II, Line 23

Part II, Line 23		_			_						_	
		Transport			<u>Dru</u>		_	Other .	_		<u>Total</u>	
	# of	Avg	Amount	# of	Avg	Amount	Trans-	Radia-	Tissue	# of	Avg	Amount
Chantar	Pat⊦	Per Patrent	Reim bursed	Pati ents	Per Patient	Reim bursed	fusing Blood	tion Lab Fees	Typing	Pat⊦ ents	Per Patient	Reim- bursed
Chapter Alabama	ents 293	\$158	\$46 290	165	\$302	\$49 756	\$25	\$2 000	\$674	384	\$257	\$98,745
Central Connecticut	72	185	13 300	55	264	14 547	470	199	\$0,7	94	303	28,516
Central Florida	103	203	20,880	85	281	23 900	440	2 088	200	157	303	47,508
Central New York	90	237	21 290	39	251	9 771	528	1 607	455	112		33,196
Central Ohio	122	219	26 752	56	239	13 390	303	518	214	150	275	41,177
Central Pennsylvania	53	163	8 657	48	237	11 395	500	1 689	911	87	266	23,152
Delaware	10	220	2 197	28	367	10 273	750			36	367	13,220
Desert Mountain	76	187	14 223	81	262	21 254	348	4 178		123	325	40,003
Eastern Pennsylvania	126	210	26 472	118	277	32 720	2191	3 205	1267	199	331	65,855
Fairfield County	41	279	11 446	27	297	8,009				51	381	19,455
Gateway Chapter	230	175	40 336	143	316	45,199	699	1 868	2341	318	284	90,443
Georgia	357	202	72 275	144	236	33,938	1547	2 167	240	419	263	110,167
Greater Los Angeles	121	268	32,403	54	365	19,720	500	122		164	322	52,745
Greater Sacramento	78	202	15 789	51	279	14 249	331	4 523		105	332	34,892
Illinois	166	297	49 289	169	353	59 652	1018	12,602	434	307	401	122,995
Indiana	147	178	26 184	91	250	22 <b>7</b> 22	241	3 417	500	194	274	53,084
Kansas	89	211	18 773	47	325	15 254		2 057	2044	120	318	38,128
Kentucky	123	226	27 843	72	288	20 756	1040	1 217	28	156	326	50,884
Long Island	106	257	27 267	55	234	12 849	164	2 657	1000	130	338	43,937
Louisiana	143	230	32 871	65	266	17 283	1624	396		178	293	52,174
Maryland	59	221	13 066	46	205	9 447	624	119	849	78	301	23,481
Massachusetts	198	203	40 103 34 407	115	185	21 268	634	3 292 998	607	246	268	65,904
Michigan	190	181		118 152	232 251	27,338 38 177		31 275	1424	259 355	248 305	64,167 108,243
Mid America Minnesota	221 189	176 209	38 791 39 536	191	350	66 802	2728	8 956	500	320	370	118,522
Mississippi	126	175	22 074	58	348	20,182	2120	3 408	360	166	277	46,024
Nat Capital Area	69	186	12 834	69	280	19 295	410	1 313	300	106	319	33,852
Nebraska	49	203	9 939	49	267	13,085	1016	4 077	773	81	357	28,890
New Mexico	71	234	16,616	41	159	6,515	915	5 4 1 8		91	324	29,464
New York City	177	293	51 832	39	187	7 309	107	500		191	313	59,748
North Carolina	157	177	27 850	116	226	26 251	2505	2,843	744	227	265	60,193
North Texas	174	246	42 860	89	242	21 509	428	16 287		241	336	81,084
Northern California	216	245	52 893	135	276	37 233	8875	45		294	337	99,046
Northern Flonda	54	215	11 614	32	227	7 268	198	359		74	263	19,439
Northern New Jersey	114	319	36 333	62	241	14 913		1 999		150	355	53,245
Northern Ohio	275	194	53 244	161	201	32 389	1059	6 852	1710	351	271	95,254
Oklahoma	97	186	18 042	87	399	34 712	1500	8 584	2297	184	354	65,135
Oregon	91	166	15 <b>1</b> 07	74	280	20 712		1 103	1052	127	299	37,974
Palm Beach Area	97	265	25 727	72	309	22 220	617	995	903	135	374	50,462
Rhode Island	34	186	6 314	39	249	9,713				60	267	16,027
Rocky Mountain	174	221	38 478	110	235	25,900	2561	775	820	224	306	68,534
San Diego Cty	95	212	20,102	42	221	9,288	225	715	260	118	259	30,590
South Carolina	140	234	32 714	102	288	29 383	1214	7 536	1785	204	356	72,632
South West Texas	169	220	37,209	126	269	33,864	1544	3 138	005	247	307	75,755
Southern Florida	72	328	23 645	29	229	6 650	205	1 000	905	90	358	32,200
Southern New Jersey Southern Ohio	97 55	217 267	21,071 14 696	60 54	228 298	13 680 16 111	205 1071			125 93	280 343	34,956 31,878
Sun Coast	106	238	25 196	88	283	24 892	1071	351		158	319	50,439
Tennessee	151	199	30 059	86	223	19 142	2606	2 782		184	297	54,589
Texas Gulf Coast	585	279	163 368	94	143	13 419	1053	3 117	111	600	302	181,068
Tri - County	78	237	18 510	50	282	14 110	500	1,994	500	108	330	35 614
Upstate New York	81	209	16 934	53	240	12 727		164	1251	103	302	31,076
Virginia	92	182	16 776	73	263	19 190	500	5 602	690	146	293	42,758
Washington State	104	265	27 517	54	309	16 679	<b>-</b>	7,357	500	163	319	52,053
Westchester / HV	77	256	19 697	48	221	10 620		1,730	450	98	332	32,497
Western New York	106	150	15 852	79	242	19 090	870	1 903	203	143	265	37,918
Western Pennsylvania	193	211	40 816	136	246	33 492				261	285	74,308
Wisconsın	123	165	20 275	113	222_	25 104	171	3 751		174	283	49,301
Totals	7,702	\$219	\$1,686,634	4,735	\$265	\$1,256,316	<u>\$46,231</u>	<u>\$186,848</u>	\$28,547	10,459	\$308	\$3,204,571

Bone Marrow Drives Total \$200 810 3,405,381

#### LEUKEMIA & LYMPHOMA SOCIETY, INC. SCHEDULE OF FIXED ASSETS AND DEPRECIATION YEAR ENDED JUNE 30, 2002 #13-5644916

#### FORM 990, PART II, LINE 42 AND PART IV, LINE 57b

	METHOD/LIFE	COST	CURRENT DEPRECIATION	ACCUMULATED DEPRECIATION	BOOK VALUE
Furniture and fixtures	Straight line over 10 years	2,262,030	204,213	605,378	1,656,652
Computer equipment	Straight line over 5 years	2,627,744	417,564	1,329,449	1,298,295
Software	Straight line over 5 years	1,511,130	291,074	736,396	774,734
Website	Straight line over 2 years	1,488,025	744,012	1,189,064	298,961
Leasehold improvements	Straight line over life of				
	lease	637,535 8,526,464	57,126 1,713,989	209,253 4,069,540	428,282

I/tax/2001/Federal/Consolidated 990/fixed assets

#### Part III, items (a), (b), (c), and (d)

#### (a) Research

The Leukemia & Lymphoma Society's research program is based on the belief that all scientifically sound approaches toward the cure or control of leukemia, lymphoma, Hodgkin's and non-Hodgkin's lymphoma and myeloma should be encouraged on a worldwide basis. The Society has awarded \$280 million in research grants since its inception. Now about \$38 million annually, the Society's grant programs are among the most prestigious in the fields of hematology and oncology.

Research grants are awarded in three program areas Career Development, Translational Research and the Specialized Centers of Research ("SCOR") As of 6/30/02, the Society will have 481 active grantees at 138 institutions in the United States and abroad This support will advance the understanding, treatment, and prevention of leukemia, lymphoma, Hodgkin's and non-Hodgkin's lymphoma and myeloma

The Leukemia & Lymphonia Society provides career development support for promising young scientists (Scholars, Special Fellows, and Fellows) pursuing careers in basic or clinical research

- Scholarships in Clinical Research are awarded at \$100,000 a year for a total of \$500,000 over five years
- Special Fellowships are awarded at \$50,000 a year for a total of \$150,000 over three years
- Fellowships are awarded at \$40,000 a year for a total of \$120,000 over three years

The **Translational Research** program provides early-stage support for clinical research on leukemia, lymphoma, Hodgkin's and non-Hodgkin's lymphoma and myeloma, which is applied to meaningful outcomes in treatment, diagnosis, or prevention

Translational Research Awards are made for an initial three-year period, funding for an additional two years may be provided for highly promising projects. Awards up to \$130,000 are granted each year

#### Specialized Centers of Research in Leukemia, Lymphoma and Myeloma 2002

The Leukemia & Lymphoma Society initiated a Specialized Centers of Research grant program in 2000 Grants are awarded to a cluster of at least three research groups that will interact to foster advances in the diagnosis, treatment, or prevention of leukemia, lymphoma and myeloma. The SCOR grants also support scientific core laboratories to provide access to innovative technology, if required by the participating research programs. The program is expected to generate new knowledge and breakthrough discoveries leading to better survival rates and prevention measures for patients. Each Specialized Center of Research may request up to \$1.5 million annually over a five-year period to a total cost of \$7.5 million over five years.

The SCOR program brings together research teams working in complementary areas, each focused on the discovery of new approaches for the benefit of patients, or those at risk for developing leukemia, lymphoma, or myeloma. Awards go to those groups who best demonstrate the synergy that will occur from their close interaction. The participating scientists may be at different institutions, or from any country

Preliminary grant applications may be submitted by November 15 Final applicants will be chosen by December 15 and asked to submit full applications by March 15 of the following year Award decisions will be made by May 31 and recipient funding will begin funding on July 1 Experts in the field of leukemia, lymphoma, and myeloma research carefully evaluate all grant applications

Guidelines and applications for the Society's three research programs may be obtained by contacting the Research Department at 914-949-5213, faxing to 914-949-6691 or emailing researchprograms@leukemia-lymphoma org Detailed instructions for proposal submissions are posted on the Society's web site, www leukemia-lymphoma org

#### (b) Patient and Community Service

The Leukemia & Lymphoma Society offers the most comprehensive array of services to patients and families touched by blood-cancers

#### **Family Support Groups**

The Society has developed more than 300 Family Support Groups at 60 chapters throughout the country Guided by two volunteer oncology health professionals, groups provide information and support, and encourage greater communication among patients, families, friends, and healthcare professionals

#### **First Connection**

A program called **First Connection** links newly diagnosed patients to a peer volunteer who has experienced a similar diagnosis. A trained patient-volunteer currently in remission visits or phones a newly diagnosed patient to share information and support. This program is available through Society chapters.

#### Cancer: Keys to Survivorship

In cooperation with the National Coalition for Cancer Survivorship, and supported by a generous restricted educational grant from Ortho Biotech Products, L P, the society has developed a specialized program that addresses four major areas of cancer education. The program "Cancer: Keys to Survivorship," offers cancer survivors information and skills in four areas. 1) living with and beyond cancer through self-empowerment, 2) communication with health care providers and loved ones, 3) understanding employment rights as a cancer survivor, and 4) understanding health insurance issues.

#### **Patient Financial Aid Program**

For over 31 years the Society has helped patients demonstrating need to obtain financial assistance to cover a portion of their treatment costs. Through the **Patient Financial Aid Program**, reimbursement of up to \$500 per year helps cover the costs of transportation, drugs, and various treatments not covered by insurance. Patient Financial Aid is subject to availability.

#### The Trish Greene Back to School Program for Children with Cancer

The **Back to School Program** is designed to increase communication among healthcare professionals, parents, patients and school personnel to assure a smooth transition from active treatment back to school Printed literature, videos, and other materials to aid the process are available through all local chapters

#### **Cancer Clinical Trials Education Series**

The Cancer Clinical Trials Education Series (CTES) was designed by the National Cancer Institute (NCI) to improve access to current and accurate information about cancer clinical trials for patients, families and healthcare professionals

#### Meet the Expert on Non-Hodgkin Lymphoma

This program will present basic information on terminology, risk factors, diagnosis, staging and classification of non-Hodgkin lymphoma. New insights, treatments and future directions for NHL will also be discussed. Sponsored through a generous unrestricted educational grant from Genentech.

#### **Educational Materials**

An extensive collection of education materials is offered free-of-charge to patients and health professionals. Each year, the Society distributes nearly one million booklets, brochures, videos, and posters through the Information Resource Center and local Society chapters. Much of the content of these materials is also available to view and download on the Society's Web site at www leukemia-lymphoma org

#### **Teleconference & Webcasts**

The Society sponsors teleconferences and webcasts on topics of interest to patients and caregivers. Information on these free events can be accessed via the website at <a href="https://www.leukemia-lymphoma.org">www.leukemia-lymphoma.org</a>

#### (c) Public Health Education

The Leukemia & Lymphoma Society continues to meet the needs of the public through its Information Resource Center and The Society's Website

#### Information Resource Center

The Leukemia & Lymphoma Society strives to be the world's foremost source of information on leukemia, lymphoma, Hodgkin's disease, and myeloma. The Information Resource Center is a nationwide link to information and resources useful to patients, their families, and healthcare professionals. Information specialists are oncology social workers and nurses who provide callers with information and respond to their questions and concerns. They are available to talk one-on-one from Monday through Friday, 9 a m to 6 p m, Eastern Standard Time. Fact sheets for frequently asked questions and a referral database to other helpful organizations are available. Patients, families and professionals may call the Information Resource Center, toll free, at 1-800-955-4572, in addition to corresponding by email at InfoCenter@leukemia-lymphoma org

#### The Society's Web Site

The Society's Web site, <u>www leukemia-lymphoma org</u>, serves a wide variety of education and information needs. Initiated in 1996, the site has experienced explosive growth and is continually being updated and expanded to support the Society's mission.

The user has the opportunity to create a personalized page with identified interests, a comprehensive overview of the Society's programs and services, Family Support Group locations, information about our peer to peer program, First Connection and other programs

#### (d) Professional Education

The Society also serves the educational needs of the medical and research community through a number of **professional education** symposia offered throughout the year. The educational program offers varying formats to facilitate the exchange of information and ideas on the newest developments in cancer research and treatment.

#### LEUKEMIA & LYMPHOMA SOCIETYINC SCHEDULE OF INVESTMENTS (AT FAIR VALUE) JUNE 30, 2002

#### **PART IV, LINE 54 - SECURITIES**

Money market funds	\$ 25,340,843
Corporate notes and bonds	27,876,139
Common stock and mutual funds	18,579,943
U S Government obligations	339,492
	\$ 72,136,417
PART IV, LINE 55a - BUILDINGS	
Share of Investment in Rental Property	\$ 42,001



Part V - 990

# THE LEUKEMIA & LYMPHOMA SOCIETY 2002 NATIONAL BOARD OF TRUSTEES

#### **JANUARY 2002**

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Hene

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-	djordanger@hunton.com		
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Trustee			
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Donna Castorino			
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Karen -	Work: (402) 572-3535 Bus Fax (402) 572-2688 Home (402) 399-8377	Ļ	

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Maryann		,	
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	Bus Fax (410) 561-7951		
	Home. (410) 653-5233		
	joe.yurfest@carefirst com		

# The Leukemia & Lymphoma Society, Inc Additional Officer/Key Employees For the Year Ended June 30, 2002

#### Part V - 990

Name and Address	Time Devoted to Position	Compensation	Contributions to Emplyee Benefit Plan	Expense Account And Other Allowances
Dwayne Howell 1311 Mamaroneck Ave White Plains, NY 10605 President and CEO	ALL	287,021	38,944	N/A
John Walter 1311 Mamaroneck Ave White Plains, NY 10605 Executive Vice President & CFO	ALL	195,571	31,150	N/A

#### THE LEUKEMIA & LYMPHOMA SOCIETY, INC.

#### YEAR ENDED JUNE 30, 2002

#### Part VI, Line 90

Listed below are the states in which The Leukemia & Lymphoma Society has chapters and which will, as of the above date, accept Form 990.

Alaska

Arkansas

California

Connecticut

Florida

Georgia

Illinois

Indiana

Kansas

Kentucky

Maine

Maryland

Massachusetts

Michigan

Minnesota

Mississippi

Nevada

**New Hampshire** 

**New Jersey** 

New York

**North Carolina** 

Ohio

Oklahoma

Oregon

Pennsylvania

South Carolina

Tennessee

Utah

Virginia

Washington

West Virginia

Wisconsin

As of the date of filing this return, the Society is unable to determine, until actually filed, whether it will file Form 990 in all of the above states as some states may provide other options.

## The Leukemia & Lymphoma Society, Inc Schedule of Compensation of Five Highest Paid Employees (Other than Officers and Key Employees Listed on Part V of 990) For the Year Ended June 30, 2002

Schedule A (Form 990) Part I - 990

Name and Address	Time Devoted to Position	Compensation	Contributions to Emplyee Benefit Plan	Expense Account And Other Allowances
Richard Geswell				
1311 Mamaroneck Ave White Plains, NY 10605				
EVP Marketing & Revenue Generation	ALL	191,477	24,983	N/A
<b>U</b>		·		
Stephen Lucas				
1311 Mamaroneck Ave				
White Plains, NY 10605				
Chief Information Officer	ALL	172,934	23,181	N/A
Country Conne				
Cynthia Cross 1311 Mamaroneck Ave				
White Plains, NY 10605				
EVP Field Development and HR	ALL	169,535	28,468	N/A
David Timko				
1311 Mamaroneck Ave				
White Plains, NY 10605 Executive Director	ALL	159,581	27,349	N/A
			,0.10	
Vicki Weiland				
1311 Mamaroneck Ave				
White Plains, NY 10605				
Sr Executive Director	ALL	155,785	20,331 95	N/A

EIN: #13-5644916

# THE LEUKEMIA & LYMPHOMA SOCIETY YEAR ENDED JUNE 30, 2002

Schedule A (Form 990)

Part III, Line 2(d) – Payment of Key Employee Compensation and Benefits

See Form 990, Part V

#### Schedule A (Form 990)

#### Part III, Line 2(d) - Reimbursement of Expenses

Members of the National Board of Trustees and Corporate Delegates are reimbursed for expenses incurred to attend Board and Annual meetings. The Society provides hotel accommodations, travel fares and meals. Ground transportation expenses, usually to/from the airport, are also reimbursed. Use of a personal auto while on Society business is reimbursed at a rate not to exceed \$ 345 per mile. Many trustees do not seek reimbursement.

Employees are reimbursed for expenses incurred while on Society business, according to established policy

EIN: #13-5644916

#### THE LEUKEMIA & LYMPHOMA SOCIETY

### YEAR ENDED JUNE 30, 2002

# Schedule A (Form 990) Part III, Line 4b – Determining Qualifications of Grant Recipients

The Leukemia & Lymphonia Society, Inc is organized exclusively for charitable, scientific and educational purposes, particularly to make grants of stipends to investigators through hospitals, universities and institutions for the study of and research into leukemia and allied diseases and their treatment and cure Research applicants are reviewed and approved by the Medical and Scientific Committee prior to being recommended to the Board for funding

Annual grant recipient progress reports are reviewed by the Medical and Scientific Committee of the Board of Trustees and approved (or disapproved) for continued funding of their research project

EIN: #13-5644916

#### THE LEUKEMIA & LYMPHOMA SOCIETY

#### YEAR ENDED JUNE 30, 2002

Schedule A (Form 990)
Part VI-B – Lobbying Activities

The Society's advocacy activities have focused on securing increased federal support for medical research at the National Institutes of Health, FDA reform, and health insurance reform. Actual activities included visits by volunteer trustees and staff with congressional staff to provide them with the Society's position on the aforementioned issues. In addition, the Society provided legislative updates on a bi-monthly basis to chapters across the country for the purpose of educating our volunteers about the status of issues pending in Congress. Finally, calls-to-action were distributed by the Society's Vice President for Governmental & Legislative Affairs urging volunteers and staff to write their members of Congress and express support for the Society's position on issues as they were debated on Capitol Hill

In 2000, The Leukemia & Lymphoma Society successfully lobbied Congress for legislation that by 2003, would double the budget of the National Institutes of Health to support basic, translational and clinical research