“I support cancer research to honor my mother and to benefit future generations. I saw polio cured in my lifetime and I now wish to see cancer cured in the future.”

– Ronald L. Brough (NFCR donor since 2001)

“We owe a great deal to your cancer researchers and believe they are the basis of cancer survival. Thus, we urge others to give to help your efforts for which we are grateful.”

– Ray and Lucille M. (NFCR donors since 2004)

“I believe in knowing how your body talks to you and listening to it, so that early detection can save lives. Keep up the good work that the Foundation is doing.”

– B.W. (NFCR donor since 1994)

“When I read about this (Rose Fund), I finally feel able to do something. I am no doctor or research specialist so this is my contribution to help future patients and families hopefully avoid what my family went through. Thank you for this opportunity to make a difference.’

– D.A. (NFCR donor since 2001)

“I want to help support cancer research in any way that I can. I want the horrible cancer to be stopped so that grandchildren can have a little extra time with their grandparents. I don’t want cancer to rob anyone else of precious time with their loved ones.”

– Brian Ostry (NFCR donor since 2001)
For over 33 years, the National Foundation for Cancer Research (NFCR) has supported cutting-edge basic research that will lead to cures for cancer. To date, NFCR has provided more than $240 million to support discovery-oriented cancer research and cancer prevention education, an investment that has paid off for millions of cancer survivors and cancer patients worldwide.

Supported by individual contributions from all across America, NFCR is one of the premier cancer charities in the U.S. NFCR’s philosophy includes supporting collaborative research by the best scientific minds around the world. We believe laboratory research is the surest way to develop new drugs, more effective diagnostics, and improved therapies that increase the options for patients fighting cancer.

Looking ahead, we are more committed than ever to funding innovative research that will accelerate the pace at which new therapies and drugs are brought to the patient’s bedside. Even more, we are confident that the laboratory research we fund with the support of our donors will one day produce cures for all types of cancer.

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Cover:
I. Bernard Weinstein, M.D.
Professor of Medicine at Columbia University and an NFCR Fellow
Dear Friends of NFCR:

We are at a turning point in the battle against cancer, and doctors are genuinely excited about a new generation of anti-cancer drugs, so-called targeted cancer therapies, which hold great promise for helping patients in ways never before possible. Targeted cancer therapies are anti-cancer drugs that home in on the molecular characteristics of cancer cells, leaving healthy tissue that is often damaged by standard treatments like radiation and chemotherapy, relatively unharmed.

For too long, the best medicine has had to offer cancer patients involved toxic radiation and chemotherapies that often cause harm to the entire body. Because targeted therapies have the potential to target cancer cells while sparing healthy cells, there is great hope among oncologists that this still-new approach will yield many more effective options for physicians treating cancer—options which present patients and their doctors with fewer side effects that must be dealt with in treatment.

With the support of generous donors, NFCR supports basic cancer research that will help scientists better understand cancer cells at the molecular level and find the keys to cancer causation and metastasis. NFCR’s long-term support of this type of research has already led to many advances in the field, and has fueled major scientific breakthroughs that are key to producing new, targeted treatments for cancer patients.

NFCR accelerates the pace of cancer research by recognizing innovative ideas while they are still in their infancy and providing scientists with the initial funding to substantiate those ideas. Through their groundbreaking work at the molecular and genetic levels, NFCR scientists are leading the way in some of the newest and most promising research fields, including chemoprevention, nanotechnology, molecular profiling, genetic mapping, angiogenesis, and antibody therapies, as well as the development of new targeted therapeutics.

At NFCR we know that research takes time. For this reason NFCR is committed to supporting scientists who are at the cutting edge of basic cancer research. If we can all agree that basic science is essential to new drug development, then we can agree that the more we understand about the mechanisms by which cancer grows and multiplies, the closer we will be to conquering it.

We are more convinced than ever that by funding innovative laboratory research we will achieve our goal of delivering cures for all types of cancer to patients worldwide. NFCR is about Research for a Cure. It’s about saving lives.

Sincerely,

Franklin C. Salisbury, Jr.
President
For over 33 years, the National Foundation for Cancer Research (NFCR) has been a leading force within the world of cancer research, supporting science-based approaches to cancer at the molecular and genetic levels, and focusing on bringing new treatments to the bedside of cancer patients. To date, NFCR has provided more than $240 million to fund cancer research and prevention education initiatives with this goal in mind. These vital research dollars were provided by more than 4 million individual donors from across the United States and many other countries around the globe who share our belief that we cannot let up in our effort to find the answers to cancer. Our donors and the brilliant scientists with whom we work are our partners in one of life’s most important goals—a world freed from the suffering caused by cancer.

NFCR is often recognized as an innovative cancer philanthropy because of our focus on collaborative scientific research. We don’t believe that the answers we urgently need to the mysteries of cancer will be discovered by some lone scientist toiling away in his or her laboratory, nor in some “Eureka!” moment when the answers reveal themselves unexpectedly. Cancer cures will result from the joint efforts of the best minds around the world working diligently to unravel its complexities. Over the years, this approach has proven to be the surest way to combat many diseases; to evolve effective diagnostic tools; and to develop, test, and validate new and better life-saving therapies for patients. So it will be for the patients and the doctors and the scientists fighting cancer.

Looking ahead, we are more convinced than ever that by funding innovative laboratory research we will one day achieve our shared goal of delivering cures for all types of cancer to patients worldwide.

At NFCR, we are realists—we know that the research process is difficult and that progress is most often made through trial and error along the way. Research takes time, and it is not realistic to expect that a scientist or a team of scientists will solve the cancer problem within a matter of weeks or even months. Many brilliant scientists have devoted their entire lives to this cause, and still the answers elude them. At best, they were able to take comfort in the progress made—cures delivered, patients saved, new treatments brought into the clinic. For this reason, NFCR provides support to committed scientists who are at the cutting edge of the field.

Just as these devoted researchers know this is a life’s work, supporting cancer research must be a long-term commitment. At NFCR we made the decision to stay with the process just as our funded scientists do. We stay with our scientists long enough for them to make real progress.
The National Foundation for Cancer Research’s long-time commitment to funding basic cancer research is revolutionizing cancer treatment, diagnostics, and prevention. The resulting new therapies that target the genetic causes of cancer, coupled with the advent of new technologies that permit molecular profiling of human tumors, are improving survival and response rates in patients with HER-2-positive breast cancer, non-small cell lung cancer, myelogenous leukemia, and hard-to-treat cancers such as kidney and pancreatic cancer.

I. Bernard Weinstein, M.D., Professor of Medicine at Columbia University and an NFCR Fellow, is widely recognized for his pioneering research into the molecular bases of cancer and the behavior of cancer cells. These advances are leading to pivotal changes in doctors’ abilities to prevent, diagnose and treat cancer.

NFCR has been supporting Dr. Weinstein since 1984. In 2006, his NFCR research was recognized as providing the scientific rationale for designing drugs that target molecular pathways that can lead to cancer—and to a new approach to treating this group of diseases that strikes half the men and one-third of women in the United States.

Many cancers are driven by genetic mutations that either activate growth-inducing genes or sabotage genes that stop cell growth. Dr. Weinstein hypothesized that these mutations within a cancer causing gene (called an oncogene) drive the cell toward malignancy and alter the cell-signaling pathways characteristic of normal, healthy cells in a way that makes the cancer cell dependent on the oncogene for its survival. This dependence is cancer’s Achilles heel.

This is also cancer’s Achilles “heal.” When cancer cells are driven by one signaling pathway, and when tumor cell growth or survival are dependent upon a single pathway—a phenomenon Dr. Weinstein describes as “oncogene addiction”—molecular targeted therapies can be developed to exploit this vulnerability.

Researchers have now discovered dozens of signaling pathways in cancer cells that tell
them whether to grow or not. Anti-cancer drugs that block these signals are helping to stop cancer in its tracks. Scientists today are working to discover mutated oncogenes and develop anti-cancer drugs targeted at them.

These include the gene called Bcr-Abl in leukemia, the HER2/neu gene in breast cancer, and the Epidermal Growth Factor Receptor (EGFR) gene found in many solid tumors. All of these genes code for proteins called kinases which regulate the processing of key cellular signals. Overactivation of these kinases leads to uncontrolled growth of tumor cells.

Targeted therapies that block signals from these oncogenes could help stop cancer. Anti-cancer drugs are now being specifically designed to interfere with the activity of these kinases. That's how many of today’s targeted therapies work. Gleevec™, for instance, blocks the Bcr-Abl protein that makes some abnormal white blood cells grow. The breast cancer drug Herceptin™ latches on to cancer cells that have receptors for the HER2/neu protein and keeps them from dividing and growing.

Tarceva™, Iressa™ and TheraCIM™ are oral tyrosine kinase inhibitors that interfere with cancerous cell growth by inhibiting EGFR. Overexpression of EGFR is common in many cancer types, and Tarceva has been approved by the FDA for the treatment of non-small cell lung cancer and pancreatic cancer. EGFR inhibitors are being tested in head and neck and colorectal cancers, kidney cancer, ovarian cancer, and two aggressive types of brain cancer: glioblastoma multiforme and pontine glioma, a fatal brain cancer affecting children.

NFCR’s program of funding basic cancer research is providing insight into new targets for drug intervention at the gene, RNA, and protein levels. Progress to cures cannot come soon enough. But with the remarkable success of molecular targeting agents in the treatment of many cancers, we can expect that many forms of cancer will ultimately yield to therapies that target cancer’s Achilles “heel.” This has been made possible in no small part by Dr. Weinstein’s NFCR-funded research and his theory of oncogene addiction.
A CATALYST FOR DISCOVERY
PROGRESS AGAINST CANCER SINCE 1973

Fifty years ago, two out of every three cancer patients died within five years or less after being diagnosed. Today, over 60 percent of cancer patients live longer than five years due to more effective therapies. The significant increase in cancer survival rates is the direct result of scientific breakthroughs derived from decades of innovative cancer research. As a leading cancer charity, NFCR has made significant contributions to scientific breakthroughs that form the basis for many of today’s most effective cancer therapies. From basic science research to clinical application, significant research achievements from hundreds of dedicated NFCR scientists in the past 33 years are making a difference in the lives of millions of cancer patients and their families. What NFCR has accomplished in cancer research is constantly being translated into prevention strategies, better detection methods, and more effective cancer therapies that are saving the lives of cancer patients around the world.

(An extended list of NFCR’s 30-plus years of accomplishments can be found at www.NFCR.org)

Selected Scientific Achievements in 2005 - 2006

• Established 11 novel research technologies that will improve early diagnosis and drug screening.
• Initiated 16 clinical trials of new anti-cancer drugs that, if successful, will bring novel life-saving treatment to cancer patients.
• Identified 17 new molecular targets that will be used to develop novel anti-cancer drugs and improve diagnosis.
• Developed 26 new drug candidates or novel therapies that will bring more effective treatments to cancer patients.
• Published more than 350 research papers in peer-reviewed science journals that have made significant contributions to further understand the complex nature of cancer.
Selected Major Breakthroughs Supported by NFCR

• Discovery of Vascular Endothelial Growth Factor (VEGF), an essential protein for tumor blood vessel growth by Harold Dvorak, M.D., at Beth Israel Deaconess Medical Center. Today, VEGF-targeting drugs such as Avastin® provide an effective new line of treatment for advanced colorectal cancer as well as breast, lung and ovarian cancers.

• Extension of the use of High Performance Liquid Chromatography (HPLC) from chemistry to life sciences by Csaba Horvath, Ph.D., the father of HPLC, at Yale University. Today, this technology is used in nearly all pharmaceutical companies to analyze, characterize, and develop new drugs.

• Investigation of estrogen receptors by Jack Gorski, Ph.D., at the University of Wisconsin at Madison. His research has broadened our understanding of the function and influence of estrogen receptor-ligand interaction, providing important groundwork for today’s use of hormone therapy to treat breast cancer.

• Improvement of monoclonal antibody (mAb) construction method by Cesar Milstein, Ph.D., the inventor of mAb production technology, at the University of Cambridge, Oxford, England. Today, monoclonal antibodies are used extensively in developing targeted anti-cancer drugs, providing a new generation of therapies to fight against many types of cancer such as breast cancer, colorectal cancer, and leukemia.

• Discovery of a novel drug agent that can selectively kill certain types of leukemia cells by Dennis Carson, M.D., at the University of California, San Diego. This discovery led to the development of Cladribine, the first successfully developed targeted cancer therapy for the treatment of certain types of leukemia.

• Investigation of the role of vitamins B12 and folic acid in preventing DNA damage by Bruce Ames, Ph.D., at the University of California, Berkeley. His findings have been translated into clear public policy recommendations on the use of a healthy diet to reduce cancer risk.
NFCR Research Discovery Centers

NFCR works to accelerate the pace of cancer research by recognizing innovative ideas while they are still in their infancy, and providing scientists with the initial funding to substantiate their ideas. To maximize the productivity of its cancer research programs, NFCR established an international network of Research Discovery Centers, each of which is directed by a highly accomplished cancer research leader. Together, these Centers constitute our “Laboratory Without Walls”—promoting the sharing of ideas and information across research institutions and engaging top research minds from a wide range of scientific disciplines.

Scientists in these Centers are connected to more than 40 lead investigators in other NFCR-funded institutions. These are the NFCR Fellows and NFCR Project Directors. Together, NFCR’s scientists constitute a “research collaborative” working on cancer from diverse perspectives and actively sharing ideas and information with one another.

Beginning at the molecular and genetic levels, NFCR scientists are leading the way in some of the newest and most promising research fields, including chemoprevention, nanotechnology, molecular profiling, genetic mapping, angiogenesis, antibody therapies, the development of new targeted therapeutics, and more. Because our scientists are encouraged to share their latest findings with one another, NFCR’s approach increases the likelihood that discoveries in one area of cancer research will lead to advances in another.

While many cancer research organizations encourage scientists to pursue incremental advances in treatment, NFCR funds cooperative, multi-disciplinary approaches to discovering the root causes of cancer and applying those discoveries to the development of new treatment modalities. NFCR-funded scientists list six primary advantages of NFCR funding over other sources:

1. **Seed Funding** – NFCR provides seed funding for innovative research that is difficult, if not impossible, to obtain from other sources. NFCR has been the incubator for many of the most important discoveries in cancer research over the past 30 years.

2. **Flexibility** – NFCR’s funding is more flexible, allowing scientists to pursue promising and unanticipated discoveries during the course of their research. This flexibility accelerates the pace at which clinical trials can be initiated and new treatment options brought to patients.

3. **Long-Term Vision** – NFCR demonstrates a long-term commitment to cancer research. As a leading cancer charity, NFCR can provide cutting-edge ideas with resources and time to develop.

4. **Collaboration** – NFCR actively facilitates collaboration among researchers and serves as a catalyst to accelerate life-saving research. This commitment to collaboration infuses all the work NFCR supports.

5. **Global Reach** – With programs on three continents, NFCR is a bridge connecting laboratories around the world in pursuit of a cure for cancer. NFCR overcomes barriers to progress by bringing the best ideas and the best minds together, regardless of location.

6. **Multiple Perspectives** – NFCR’s multi-disciplinary approach encourages scientists from different fields to join forces to accelerate the pace of cancer research.
There are currently nine **NFCR Research Discovery Centers** worldwide supported by the Foundation. Scientists from diverse research disciplines are encouraged to collaborate on their research efforts and share information to optimize progress. NFCR commits five years of funding to each Center, with the option of extending that support.

**NFCR Center for Metastasis Research**  
*University of Alabama at Birmingham, AL*

Identifying the fundamental molecular changes in cancer cells that cause them to metastasize, and translating the results into strategies to prevent metastasis in breast cancer, prostate cancer, and melanoma patients.

**NFCR Center for Molecular Imaging**  
*Case Western Reserve University, Cleveland, OH*

Utilizing molecular imaging technologies to identify specific genes ideally suited for early cancer detection and treatment.

**NFCR Center for Targeted Cancer Therapies**  
*Translational Genomic Research Institute, Phoenix, AZ*

Designing uPA inhibitors to develop new anti-cancer agents for improving the treatment of pancreatic cancer.

**NFCR Center for Anti-Cancer Drug Design & Discovery**  
*Yale University, New Haven, CT*

Developing new beta-peptide inhibitors that will provide new and vital links in the development of more effective drugs that may be effective against many types of cancer.

**NFCR Center for Therapeutic Antibody Engineering**  
*Dana-Farber Cancer Institute, Harvard Medical School, Cambridge, MA*

Conducting therapeutic antibody research by identifying high affinity human sFVs to virtually any cancer target of interest, and providing high affinity human single-chain antibodies (sFv) to facilitate the cancer research projects of numerous NFCR scientists.

**NFCR Center for Computational Drug Discovery**  
*University of Oxford, Oxford, UK*

Creating a database for drug screening by using computer software to identify new protein targets of interest for their potential applicability to the development of novel anti-cancer drugs and cancer prevention techniques.

**NFCR Center for Molecular Targeted Therapy**  
*Institute of Medicinal Biotechnology, Beijing, P.R. China*

Synthesizing anti-cancer drug compounds with improved bioavailabilities and identifying new biological targets that can be used as drug agents for regulating the cell cycle and inhibiting metastasis.

**NFCR Center for Proteomics and Drug Action**  
*Vanderbilt University, Nashville, TN*

Developing techniques to identify molecular targets to monitor anti-cancer drug distribution, drug efficacy, and toxicity in human bodies, and counteract drug resistance.

**NFCR Joint Tissue Banking Facility**  
*Tianjin Cancer Institute and Hospital, P.R. China*

Providing valuable cancer tissue samples to all NFCR-supported scientists to directly extract unaltered, multi-dimensional information about DNA, RNA, and protein, for the development of new treatments for cancer.
Exciting and potentially life-saving discoveries are being developed every day in cancer research laboratories around the world. However, scientific discoveries coming out of research laboratories will not benefit cancer patients without a process of “translation.” “Translational Research” focuses on bridging the gap between laboratory discoveries and patient care. The Fellows Program was initiated to strengthen our efforts in translational research. This program is currently providing long-term and flexible funding to ten NFCR Fellows who are leaders in their respective research fields with close connections to research hospitals. This unique funding approach enables NFCR Fellows to perform innovative research in the laboratories and collaborate with clinicians in the hospitals to convert the potential life-saving discoveries into actual applications to benefit cancer patients.

**NFCR Fellows**

- **Webster K. Cavenee, Ph.D.**  
  *Ludwig Institute for Cancer Research*  
  Identifying genes whose mutation or altered expression leads to malignant tumors of the brain and muscle.

- **Stanley N. Cohen, M.D.**  
  *Stanford University School of Medicine*  
  Elucidating of the genetic control of tumorigenesis and cancer metastasis.

- **Yung-Chi Cheng, Ph.D.**  
  *Yale University School of Medicine*  
  Exploring a Chinese medicinal formula discovered to decrease hematologic side effects and enhance anti-tumor activity for a variety of anti-cancer drugs.

- **Harold F. Dvorak, M.D.**  
  *Beth Israel Deaconess Medical Center*  
  Demonstrating that two anti-cancer drugs in clinical trial (retinoic acid and TNP-470) can inhibit vascular permeability, allowing other anti-cancer drugs a greater chance of reaching the targeted cancer cell.

- **Curt I. Civin, M.D.**  
  *Johns Hopkins University School of Medicine*  
  Understanding how the survival, proliferation, and differentiation of normal and malignant leukemia cells are regulated and translating the results into useful clinical tools.

- **Waun Ki Hong, M.D.**  
  *M.D. Anderson Cancer Center*  
  Employing the drug, celecoxib, in a clinical trial for the chemoprevention of lung cancer.
NFCR Fellows are distinguished and well-established scientists with excellent track records in their individual fields of scientific interest. Throughout the years, our Fellows have demonstrated their dedicated support of NFCR’s mission, and NFCR provides them with long-term research support to allow the nurturing of their discovery-oriented research.

Susan Band Horwitz, Ph.D.
*Albert Einstein College of Medicine*

Searching for natural products that are analogues of Taxol that circumvent the problem of tumor multi-drug resistance.

Helmut Sies, M.D.
*Heinrich-Heine-Universität*

Addressing the underlying mechanism and biological impact of DNA damage related to ultraviolet radiation that gives rise to skin cancer, and the defense systems repairing such damage.

Paul Schimmel, Ph.D.
*The Scripps Research Institute*

Understanding how components of the genetic code function in signal transduction pathways in the hope that this knowledge will lead to novel treatments for cancer.

I. Bernard Weinstein, M.D.
*Columbia-Presbyterian Medical Center*

Exploring biological abnormalities that control cell cycle progression and signal transduction in cancer cells and using these insights to develop naturally occurring and synthetic compounds that can be used in cancer prevention and therapy.
# NFCR Project Directors

<table>
<thead>
<tr>
<th>Name</th>
<th>Institution</th>
<th>Research Area</th>
</tr>
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<tbody>
<tr>
<td>Rebecca W. Alexander, Ph.D.</td>
<td>Wake Forest University</td>
<td>Understanding protein-to-nucleic-acid interactions that are fundamental to cellular processes in both normal and tumor cells.</td>
</tr>
<tr>
<td>Jacqueline K. Barton, Ph.D.</td>
<td>California Institute of Technology</td>
<td>Understanding the consequences of DNA charge transport chemistry with respect to how DNA is damaged and repaired.</td>
</tr>
<tr>
<td>Robert Bast, Jr., M.D.</td>
<td>M.D. Anderson Cancer Center</td>
<td>Identifying novel tumor suppressor genes in epithelial ovarian cancer.</td>
</tr>
<tr>
<td>Joseph R. Bertino, M.D.</td>
<td>The Cancer Institute of New Jersey</td>
<td>Determining if sequential administration of a low dose of flavopiridol, a cyclin dependent kinase inhibitor, can sensitize small cell lung cancer cells to another drug, doxorubicin.</td>
</tr>
<tr>
<td>Esther H. Chang, Ph.D.</td>
<td>Georgetown University</td>
<td>Developing a liposome-based, tumor-targeting drug delivery system that can carry anti-cancer drugs directly to both primary and metastatic tumor cells.</td>
</tr>
<tr>
<td>Laurence J. N. Cooper, M.D., Ph.D.</td>
<td>M.D. Anderson Cancer Center</td>
<td>Evaluating the anti-lymphoma effects of combining CD19-specific human white blood cells, with CD20-specific immunocytokines.</td>
</tr>
<tr>
<td>Donald M. Engelman, Ph.D.</td>
<td>Yale University</td>
<td>Researching the possible roles of membrane helix interactions in viral carcinogenesis.</td>
</tr>
<tr>
<td>Daniel A. Haber, M.D., Ph.D.</td>
<td>Massachusetts General Hospital Cancer Center</td>
<td>Discovering new tumor suppressor genes implicated in cancer progression using Representational Difference Analysis.</td>
</tr>
<tr>
<td>Kathryn B. Horwitz, Ph.D.</td>
<td>University of Colorado Health Science Center</td>
<td>Understanding the role of estrogen, progesterone, and their receptors in breast cancer development.</td>
</tr>
<tr>
<td>Rakesh K. Jain, Ph.D.</td>
<td>Massachusetts General Hospital Cancer Center</td>
<td>Investigating vascular normalization and develop surrogate markers that will extend the normalization window of tumor cell vasculature as a result of Avastin treatment.</td>
</tr>
<tr>
<td>Janos Ladik, Ph.D.</td>
<td>University Erlangen-Nürnberg</td>
<td>Investigating the cancer prevention effects of DNA intercalating agents.</td>
</tr>
<tr>
<td>Daruka Mahadevan, M.D., Ph.D.</td>
<td>Arizona Cancer Center</td>
<td>Investigating drugs known as tyrosine kinase inhibitors for their potential for the treatment of prostate cancer.</td>
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</table>
Prevention, Education, And Outreach

Cancer is one disease that will affect virtually every living American. Since one-in-two men and one-in-three women can expect to be diagnosed with cancer during their lifetimes, it is important to know what new insights the medical community has to offer about how to prevent cancer. And if you or a loved one is confronted with a cancer diagnosis, you will want to know what state-of-the-art treatment options are available and how to access them. NFCR provides information free of charge through publications and the Internet about the most up-to-date preventive measures, diagnostic tools, and treatment options available. These are weapons to fight cancer that are provided to all of us, thanks to the work of NFCR’s outstanding scientists and many other dedicated researchers who share our commitment to eradicating cancer as a threat to life and health in our global community.

NFCR is About Saving Lives

The investment in cancer research is paying off! More individuals diagnosed with cancer are surviving today than ever before, and those who unfortunately do not survive live longer and experience a much higher quality of life than was possible just a few years ago. Every day at NFCR, our researchers report progress in developing promising new treatments for cancer. But until there is a cure, we will not be satisfied—too many lives are at stake.

NFCR is committed to funding research because we want to cure cancer. We continue to pursue every qualified lead and every opportunity that merits funding with the resources we have available. As an organization that relies solely on the generosity of millions of donors nationwide, we take the fight against cancer very seriously. No risk is too great when it comes to saving lives!

Terence H. Rabbitts, Ph.D., FRS
MRC Laboratory of Molecular Biology
Developing anti-RAS intrabodies as anti-cancer reagents, which can block cancerous cell growth, invasion, or metastasis.

Alan C. Sartorelli, Ph.D.
Yale University School of Medicine
Discovering novel therapeutic approaches for the treatment of leukemia.

Michael B. Sporn, M.D.
Dartmouth Medical School
Developing new triterpenoid compounds for the prevention of cancer through their anti-proliferative and anti-inflammatory properties.

Wei Zhang, Ph.D.
M.D. Anderson Cancer Center
Developing the most efficient combinations of anti-cancer therapies for colon cancer by examining drug interactions between 5-FU and other therapeutic compounds.

RESEARCH for cure
Breast cancer wouldn’t be nearly so terrifying were it not for the fact that the cancer may not be detected until after tumor cells have spread to other parts of the body. When cancer cells metastasize (or spread), the effect is devastating. Metastasis is the ultimate cause of death in the vast majority of cancer patients. Fewer than 10% of cancer deaths are caused by the primary tumor, while more than 90% stem from metastasis to vital sites like the lungs, the liver, the bones and the brain.

If tumors are diagnosed before they spread to other tissues, cure rates exceed 90%. Dr. Danny Welch, Director of the NFCR Center for Metastasis Research, and his colleagues at the University of Alabama-Birmingham are determined to answer two crucial questions: how does cancer spread from one part of the body to another and, how can the spread be stopped?

Unfortunately, by the time a tumor is diagnosed, millions of cancer cells have already escaped to other parts of the body. To a pessimist, the implication is that treatments to stop metastasis may be too little, too late.

But researchers at the NFCR Center for Metastasis Research have recently become more optimistic because of new and exciting data emerging from their research.

Dr. Welch’s laboratory and Dr. Carrie Rinker-Schaeffer at the University of Chicago have discovered several “metastasis suppressors” that seem to make all the difference. These metastasis suppressors, BRMS1, KISS1, TXNIP1, CRSP3, MKK4 and p38 specifically control the development of metastases and prevent tumor cells from being able to colonize other tissues even if they have already escaped the confines of the primary tumor. In other words, metastasis suppressors may provide a means of controlling cancer.

The dream of taking the metastasis suppressors from the laboratory to patient care depends upon understanding how metastasis suppressors accomplish this role. In order to do that, researchers with broad expertise are needed. And that is what NFCR funding is all about. The NFCR Center for Metastasis Research epitomizes a ‘laboratory without walls’ by fostering collaboration among researchers from the University of Alabama-Birmingham (Drs. Welch and Andra Frost), the University of Chicago (Dr. Rinker-Schaeffer), Utah State University (Dr. Daryll DeWald) and Penn State University (Dr. Andrea Mastro). Together, they have discovered that metastasis suppressor genes play a key role in the communication between cancer cells and normal cells with which they interact during their journey through the body. This team of investigators has found that metastasis suppressors block the development of metastases in breast, prostate and ovarian cancers as well as the most deadly skin cancer, malignant melanoma.
NFCR-CMR researchers have engineered metastatic tumor cells to express a green fluorescent protein, allowing them to track tumor cells more easily. The panel on the left shows a lung in which melanoma cells have spread and have grown to a size that will kill the tumor-bearing mouse. The panel on the right also shows the same tumor cells, but now these cells make the KISS1 metastasis suppressor. The green dots are actually single cells. Those single cells persist for a long time, but they don’t kill the mice!

As long as metastasis suppressors are active, they keep tumor cells that have left the primary tumor from growing once they reach vital organs. Thus far, NFCR-funded researchers have found that the genes encoding metastasis suppressors are turned “off” in metastatic cells. They are not mutated. So, some researchers are trying to find ways to turn the genes back on. Other members of the team are actively seeking to discover drugs that would mimic the action of metastasis suppressors. In both scenarios, the research behind metastasis suppressors provides new hope for cancer patients.

“Donors to the National Foundation for Cancer Research have been instrumental in this research from the beginning,” says Dr. Welch. “NFCR recognized the potential of metastasis suppressor research when other funding agencies considered it too risky. We had preliminary data showing that metastasis suppressors existed; but that was not enough. If it weren’t for NFCR funds, the research in this promising area could have stopped 12 years ago. Because NFCR has steadfastly and consistently supported the programs of the Center for Metastasis Research, we are closer than we’ve ever been to controlling the seemingly uncontrollable cancer cell.”

“Discovering metastasis suppressor genes and deciphering the mechanisms by which they control metastasis,” emphasizes Dr. Welch, “could lead to a new class of anti-cancer drugs and give new hope for all cancer patients.” This is what we mean at NFCR by Research for a Cure.

“Discovering metastasis suppressor genes and deciphering the mechanisms by which they control metastasis, could lead to a new class of anti-cancer drugs and give new hope for all cancer patients.”

— Danny Welch, Ph.D.

This is what we mean at NFCR by Research for a Cure.
TARGETING TOP KILLERS TO SAVE LIVES

NFCR supports the full scale and scope of cancer research that will shed light on, and provide new insights into, better prevention strategies, more sensitive diagnostic technologies, and more effective treatments for all types of cancer. In addition to its support of research that focuses on specific scientific challenges related to cancer and cancer progression (for example, metastasis), NFCR also funds projects that investigate the onset and development of certain specific cancer types.

Lung, breast, prostate, and colorectal cancers together account for more than half of the cancer deaths in the United States. NFCR supports outstanding researchers who are focused on the root causes of these top killers with the goal of reducing the suffering caused by cancer and saving lives.

“Cancer is a disease that can be cured...”
– Albert Szent-Györgyi, M.D.
Nobel Prize Laureate, NFCR Co-Founder

Lung Cancer Research

As the leading killer of women in the United States, lung cancer is the cause of nearly one-third of all cancer-related deaths in the United States. To reduce the role of this devastating disease, NFCR has recruited nine outstanding scientists from around the world to tackle the two major types of lung cancer; small cell lung cancer and non-small cell lung cancer. These research projects are focused on finding better ways to prevent lung cancer with a continued focus on more effective diagnosis approaches and improved treatment for patients. Our research discoveries are already beginning to help improve the understanding of lung cancer and our goal is to continue to improve the survival rate of lung cancer patients.

Prostate Cancer Research

Every year there are more than 230,000 men diagnosed with prostate cancer in the United States. Approximately 30,000 men will die from prostate cancer. These stunning numbers motivated NFCR Project Director, Daruka Mahadevan, M.D., Ph.D., to develop a more effective treatment to tackle this leading killer. A new therapy that combines Tarceva®, an FDA approved drug for the treatment of lung and pancreatic cancer, and HPK56(MP470), a powerful drug discovered in Dr. Mahadevan’s laboratory, has shown to be effective in treating prostate cancer. Dr. Mahadevan’s novel treatment strategy brings hope to the fight to save the lives of prostate cancer patients in the future. In addition, NFCR Project Director, Stanley Cohen, M.D., Ph.D., is identifying new genetic mechanisms that identify cancer cell resistance to current chemotherapy treatments. This finding could lead to the development of more potent drugs to better target resilient prostate cancer cells.

Breast Cancer Research

Breast cancer is the most frequently diagnosed and the second leading cause of cancer death in women. NFCR is currently supporting breast cancer research in the laboratories of
ten leading scientists in this field. Our scientists are known worldwide as some of the leading researchers devoted to developing cutting-edge molecular imaging technology that will improve mammography screening, researching new anti-cancer drugs for more effective treatments of breast cancer, and establishing new strategies that will work to stop the spread of breast cancer cells to other parts of the body.

**Colorectal Cancer Research**

Colorectal cancer is the third leading cancer killer of both men and women in America. With NFCR’s support, scientists I. Bernard Weinstein, M.D., Rakesh Jain, Ph.D., and Wei Zhang, Ph.D., are launching an attack on this deadly disease from their laboratories. Their research has already led to the discovery of new markers that more accurately monitor the effects of anti-cancer drugs and has brought more potent therapies for the treatment of colorectal cancer to the patient.

**Other Types of Cancer**

In addition to their focus on the most deadly cancers, NFCR scientists are also working against the clock to find better ways to treat other types of cancer. Our researchers are conducting pioneering research to fight pancreatic cancer, ovarian cancer, leukemia, lymphoma, melanoma, and many other types of cancer.

NFCR co-founder, Nobel Prize Laureate Dr. Albert Szent-Györgyi said, “Cancer is a disease that can be cured.” NFCR scientists are moving cancer research toward our ultimate goal—finding cures for cancer, *all types of cancer*.
Development of Targeted Therapies for Patients with Cancer

Drugs that focus on hard-to-treat cancers were among the top advances against cancer in 2006, according to experts from the American Society of Clinical Oncology. Increasing numbers of clinical trial results are showing that targeted therapies improve survival and response rates in HER-2–positive breast cancer, chronic myelogenous leukemia, and that the combination of two new anti-cancer drugs—Genentech’s Avastin™ and OSI Pharmaceutical’s Tarceva™—provides a “one-two” punch against non-small cell lung cancer (NSCLC), the nation’s leading cancer killer. Clinical trials also show that Tarceva in combination with another anti-cancer drug, gemcitabine, works against pancreatic cancer.

These developments have energized both cancer researchers and clinical oncologists alike, and have fueled discussions about a new patient-centered model of cancer care. Advances in the fast-growing field of personalized medicine, including molecular profiling tests that could help physicians individualize cancer treatments and predict prognosis, are making a difference for patients with cancer, improving both their survival and quality of life. Targeted therapies have been heralded as a whole new paradigm for treating cancer. What is particularly important is that many of these treatments are targeted more directly at tumor cells versus normal cells and hence have a bigger impact against cancer with fewer side effects.

What is equally important is the leading role that the National Foundation for Cancer Research (NFCR) has played in the development of these targeted therapies.

There are multiple examples over the last 30-plus years where NFCR has led the way by funding some of the most innovative and cutting-edge basic cancer research. In addition to research that led to the development of both Tarceva and Avastin, here are a few more examples that are having an enormous impact on the care of cancer patients today.

NFCR Project Director, Kathryn Horwitz, Ph.D., at the University of Colorado has demonstrated the importance of progesterone receptors in breast cancer progression. This helped lead the way by illustrating how to utilize hormones and anti-hormones against the disease. This is one of the greatest success stories of using targeted therapy against breast cancer, and one that Dr. Horwitz helped bring to the patient’s bedside. The use of hormonal therapies was one of the first targeted therapies to result in major advances, treating patients with advanced breast cancer, and preventing recurrence in patients with early breast cancer.
Dennis Carson, M.D., at the University of California San Diego, found that certain purine nucleoside agents selectively kill hairy cell leukemia cells. This discovery, resulting in the drug cladribine, was also a landmark piece of work for patients with hairy cell leukemia. Indeed it is curative in most instances and Dr. Carson’s research is directly attributable to NFCR.

Former NFCR Scientist, Gordon Sato at the W. Alton Jones Cell Science Center developed critical insight into the importance of a special receptor found on the surface of cells called the epidermal growth factor receptor (EGFR). His work and the work of others led to the development of very targeted therapies for cancers that express EGFR. He explored two approaches to go after the growth receptor. One was the use of monoclonal antibodies—very targeted antibodies—against EGFR. This work could never have been done without the pioneering work of another NFCR Project Director, Nobel Laureate Cesar Milstein, at the MRC Laboratory in Molecular Biology in Cambridge, England.

Recently, another NFCR Project Director, Daniel A. Haber, M.D., Ph.D., director of the Massachusetts General Hospital Cancer Center, discovered a way to determine which patients will and will not respond to small molecules interacting with EGFR. This represents a way to “super target” patients’ tumors. Dr. Haber demonstrated that only patients with specific mutations in their tumor will see their tumor shrink after treatment with certain EGFR inhibitors. This was truly pioneering work and will help doctors select patients for specific therapies at the bedside; all supported by NFCR.

Finally, one of the most exciting new areas of research that has already made a difference for patients with colon cancer and kidney cancer is the area of angiogenesis or new blood vessel growth. Tumors need to have blood supplies if they are to grow. A great pioneer and NFCR investigator in this area is Harold F. Dvorak, M.D., at the Beth Israel Deaconess Medical Center in Boston. Dr. Dvorak identified vascular permeability factor which was so important for the discovery of antibodies against vascular permeability factor, now known as vascular endothelial growth factor “VEGF.” Antibodies against VEGF have significantly improved the survival of patients with advanced colorectal cancer, and most cancer drugs available today are based on Dr. Dvorak’s NFCR-funded research.

What does all of this mean? It simply means the era of targeted, more effective, less toxic therapy is here. We can use targeted cancer therapies at the bedside!

NFCR is not a “Johnny Come Lately” in the area of developing targeted, less toxic approaches to treating cancer patients. NFCR was there at the beginning.

The therapeutic index (the amount of effect against the tumor vs. the toxicities for the patient) has greatly improved because of the work of NFCR and we can happily have more and less toxic options for our patients.

NFCR continues to fund pioneering research by cutting-edge scientists who are dedicated to finding more targets in patients’ tumors and are working to find ways to inhibit those targets to beat cancer.
THE ALBERT SZENT-GYÖRGYI PRIZE FOR PROGRESS IN CANCER RESEARCH

In its inaugural year, the Albert Szent-Györgyi Prize for Progress in Cancer Research was awarded to Harold F. Dvorak, M.D., Mallinckrodt Professor of Pathology at Harvard Medical School and Chief of the Department of Pathology at Beth Israel Deaconess Medical Center in Boston, MA.

The Prize Selection Committee selected Dr. Dvorak for his breakthrough discovery of vascular permeability factor/vascular endothelial cell growth factor (VPF/VEGF). This contribution has led to a series of discoveries which both elucidated the mechanisms of tumor angiogenesis and created a molecular target for the development of antibodies and small molecule therapeutics to inhibit tumor angiogenesis.

Dr. Dvorak’s discovery laid the foundation and provided the molecular basis for the entire field of tumor angiogenesis—now considered to be one of the most promising directions for anti-cancer therapy development today. Dr. Dvorak stepped down as Chair of Pathology at Beth Israel Deaconess in July 2006 after 26 years to devote his attention to basic science cancer research. He has served on the Harvard Medical School faculty since 1967 and at Beth Israel Deaconess since 1979, and he has published over 220 peer-reviewed articles. Dr. Dvorak stressed the importance of this award to him since it was NFCR that provided much of the initial funding for his work on VPF/VEGF—at a time when no one else believed in the concept and grant support was hard to come by.

The annual Albert Szent-Györgyi Prize for Progress in Cancer Research was established to honor outstanding scientific achievement in the war against cancer and celebrate leading researchers who have made extraordinary contributions in the field of cancer research. The Prize is designed to draw attention to the continued need to support basic cancer research. It carries a $25,000 cash prize.

The 2006 Prize Selection Committee consisted of: Daniel Von Hoff, M.D., TGen; Stanley Cohen, M.D., Stanford University; Bruce Zetter, Ph.D., Children’s Hospital Boston; Stephen Sallan, M.D., Dana Farber Cancer Institute; Thea Tlsty, Ph.D., University of California, San Francisco; Dennis Carson, M.D., University of California, San Diego; Richard Gaynor, M.D., Eli Lilly; and Sujuan Ba, Ph.D., NFCR.

“The Albert Szent-Györgyi Prize for Progress in Cancer Research is an important reminder that basic science research in cancer is vital to unlocking the secrets of this disease and finding new ways to treat it,” said Sujuan Ba, Ph.D., NFCR, 2006 Prize Selection Committee Chair. “Dr. Dvorak’s discovery was groundbreaking and has led to a series of discoveries that have helped improve our understanding of tumor angiogenesis and provided a target for developing new therapies.”

“Without Dr. Dvorak’s fundamental discovery, we would probably not have had...a tremendous impact on improving survival for patients with advanced colorectal cancer, breast cancer, non-small cell lung cancer, and renal cell carcinoma.”

— Daniel Von Hoff, M.D.
**BIOFUNDING SUMMIT 2005**

NFCSR is not only funding leading cancer researchers worldwide, but working together with scientists to promote and foster global collaboration. In October 2005, NFCSR and the Chinese Academy of Medical Sciences co-hosted a Biofunding Summit where top cancer researchers from around the world came to Beijing to present their research on “Anti-Cancer Innovations and Global Collaborations.” This international think-tank forum provided an intimate setting for international collaboration between scientists at universities, research hospitals, biotech and pharmaceutical companies.

**CANCER PROGRESS 2006**

NFCSR was a proud sponsor of the Seventeenth Annual Cancer Progress Conference in New York City. The premier cancer forum for executives in the pharmaceutical and biotech communities, the Cancer Progress conference focuses on research into the molecular basis of cancer and advances in targeted therapies. NFCSR scientists joined top oncology-focused executives and leading financial analysts to address new approaches and strategies for accelerating progress towards a cure for cancer.

**NFCSR TISSUE BANK AT TIANJIN CANCER INSTITUTE**

Genetic data is essential in identifying cancer-related biomarkers for new drug development. In 2004, NFCSR established a tissue bank at the Tianjin Cancer Institute in China to provide scientists with sorely needed genetic data from cancer tissue, and bring clinical benefits to untold numbers of cancer patients. A steering committee of leading scientists from universities and research hospitals in the United States and China ensures that the tissue bank operates in total compliance with international standards. The NFCSR Tissue Bank at the Tianjin Cancer Institute was the highlight of the 2006 4th Chinese Conference on Oncology.
# Financials

National Foundation for Cancer Research, Inc. and Affiliates  
Consolidated Statement of Financial Position, September 30, 2006

## Assets

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash and cash equivalents</td>
<td>$670,656</td>
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<tr>
<td>Accounts receivable</td>
<td>182,563</td>
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<td>Bequests receivable</td>
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<tr>
<td>Prepaid expenses and other assets</td>
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<tr>
<td>Furniture and equipment, net of accumulated depreciation</td>
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<tr>
<td>Investments</td>
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<tr>
<td>Amounts held in trust by others</td>
<td>1,811,914</td>
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<tr>
<td><strong>Total Assets</strong></td>
<td><strong>$12,011,709</strong></td>
</tr>
</tbody>
</table>

## Liabilities and Net Assets

### Liabilities

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accounts payable and other liabilities</td>
<td>$681,151</td>
</tr>
<tr>
<td>Research contracts payable</td>
<td>1,148,441</td>
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<tr>
<td>Accrued compensation and benefits</td>
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<tr>
<td><strong>Total Liabilities</strong></td>
<td><strong>$1,959,642</strong></td>
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</table>

### Net Assets

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unrestricted</td>
<td></td>
</tr>
<tr>
<td>Designated for research</td>
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<tr>
<td>Undesignated</td>
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<td><strong>Total unrestricted</strong></td>
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<tr>
<td>Temporarily restricted</td>
<td>1,800,850</td>
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<tr>
<td>Permanently restricted</td>
<td>1,558,127</td>
</tr>
<tr>
<td><strong>Total Net Assets</strong></td>
<td><strong>$10,052,067</strong></td>
</tr>
<tr>
<td><strong>Total Liabilities and Net Assets</strong></td>
<td><strong>$12,011,709</strong></td>
</tr>
</tbody>
</table>

The accompanying notes are an integral part of these financial statements.
# National Foundation for Cancer Research, Inc. and Affiliates

## Consolidated Statement of Activities for the year ended September 30, 2006

### Revenue and Support

<table>
<thead>
<tr>
<th>Description</th>
<th>Unrestricted</th>
<th>Temporarily Restricted</th>
<th>Permanently Restricted</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public support</td>
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<td>2,265,239</td>
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<td>Noncash support</td>
<td>982,841</td>
<td>-</td>
<td>-</td>
<td>982,841</td>
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<tr>
<td>Mailing list rentals</td>
<td>536,366</td>
<td>-</td>
<td>-</td>
<td>536,366</td>
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<tr>
<td>Net investment income</td>
<td>538,445</td>
<td>3,028</td>
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<td>541,473</td>
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<tr>
<td>Change in value of split-interest agreements</td>
<td>(27,139)</td>
<td>11,051</td>
<td>35,561</td>
<td>19,473</td>
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<tr>
<td>Other revenue</td>
<td>111,153</td>
<td>-</td>
<td>-</td>
<td>111,153</td>
</tr>
<tr>
<td>Net assets released from restrictions</td>
<td>1,822,706</td>
<td>(1,822,706)</td>
<td>$ -</td>
<td>-</td>
</tr>
<tr>
<td><strong>Total Revenue and Support</strong></td>
<td><strong>$16,421,654</strong></td>
<td><strong>$117,409</strong></td>
<td><strong>$35,561</strong></td>
<td><strong>$16,574,624</strong></td>
</tr>
</tbody>
</table>

### Expenses

<table>
<thead>
<tr>
<th>Description</th>
<th>Unrestricted</th>
<th>Temporarily Restricted</th>
<th>Permanently Restricted</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program services</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Research</td>
<td>$5,923,114</td>
<td>$ -</td>
<td>$ -</td>
<td>$5,923,114</td>
</tr>
<tr>
<td>Public education and information</td>
<td>5,589,809</td>
<td>-</td>
<td>-</td>
<td>5,589,809</td>
</tr>
<tr>
<td><strong>Total Program Services</strong></td>
<td><strong>$11,512,923</strong></td>
<td><strong>$ -</strong></td>
<td><strong>$ -</strong></td>
<td><strong>$11,512,923</strong></td>
</tr>
<tr>
<td>Supporting services</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fundraising</td>
<td>$4,061,180</td>
<td>$ -</td>
<td>$ -</td>
<td>$4,061,180</td>
</tr>
<tr>
<td>Management and general</td>
<td>890,949</td>
<td>-</td>
<td>-</td>
<td>890,949</td>
</tr>
<tr>
<td><strong>Total Supporting Services</strong></td>
<td><strong>$4,952,129</strong></td>
<td><strong>$ -</strong></td>
<td><strong>$ -</strong></td>
<td><strong>$4,952,129</strong></td>
</tr>
<tr>
<td><strong>Total Expenses</strong></td>
<td><strong>$16,465,052</strong></td>
<td><strong>$ -</strong></td>
<td><strong>$ -</strong></td>
<td><strong>$16,465,052</strong></td>
</tr>
<tr>
<td>Change in Net Assets</td>
<td>$(43,398)</td>
<td>$117,409</td>
<td>$35,561</td>
<td>$109,572</td>
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<tr>
<td>Net Assets, Beginning of Year</td>
<td>6,736,488</td>
<td>1,683,441</td>
<td>1,522,566</td>
<td>9,942,495</td>
</tr>
<tr>
<td>Net Assets, End of Year</td>
<td>$6,693,090</td>
<td>$1,800,850</td>
<td>$1,558,127</td>
<td>$10,052,067</td>
</tr>
</tbody>
</table>

To receive a copy of NFCR’s Financial Statements and Schedule for September 30, 2006 (with independent Auditor’s Report) from the auditing firm of Squire, Lemkin + O’Brien, LLP, please call us at 1-800-321-CURE (2873) or visit our website, www.NFCR.org.
LEAVING A LEGACY IN CANCER RESEARCH

The NFCR Legacy Society was created to recognize donors who have decided to leave a substantial legacy in cancer research through an estate or other planned gift to NFCR. Legacy donors receive special recognition through membership in the Legacy Society, and in NFCR publications. Society members also receive invitations to special annual Society activities and frequent “Cancer Updates” from NFCR outlining the most recent developments in the fight against cancer. We, of course, honor requests for donor anonymity, but hope that by sharing the names of our generous Legacy donors, others will be inspired to join them to make a lasting contribution to the fight against cancer.

Honorees of the Legacy Society may choose to designate their gifts to NFCR in general, to a specific NFCR program, or for work focused on a specific cancer type or research area.

Planned gifts are generally made from a donor’s assets and important financial, tax, and estate planning goals should be taken into consideration to maximize benefits to both the donor and NFCR. Therefore, it is recommended that donors consult with their tax or legal advisors prior to making a planned gift commitment. Inquiries from advisors are welcome.

Enrollment in this honorary Society is simply a matter of advising NFCR of the creation of a legacy gift: a bequest in a will or living trust; a charitable gift annuity; a charitable remainder trust; designation of NFCR as beneficiary of a retirement plan or IRA, an investment or savings account, or a life insurance policy.

Donors who make their gift intentions known to NFCR by September 30, 2007 will be designated as Charter Members of the NFCR Legacy Society.

Legacy Society
Charter Members to Date:

Mr. and Mrs. Terry Albrecht
Dr. Sujuan Ba
Mr. and Mrs. Jerry Bleeker
Mr. Ronald L. Brough
Mrs. Thelma D. Cabaniss
Rev. Robert J. Carlson
Mrs. William P. Curto
Mrs. Lois N. De Conca
Mr. Elmo L. Fischer
Mr. Donald R. Gemmel
Mr. and Mrs. Herbert L. Harger
Mrs. Marie D. Hutchinson
Mr. and Mrs. Billy B. Lawrence
Mr. Charles P. Minialga
Ms. Elizabeth M. Netting
Mr. Albert Ottinger
Mrs. Sandra C. Rowe
Mr. & Mrs. John Rust
Mr. Franklin C. Salisbury, Jr.
Mr. Lewis R. Shields
Mrs. Margo I. Sparling
Mr. and Mrs. Fred Unterleitner
Dr. and Mrs. Daniel D. Von Hoff

Estate of Eleanor S. Bailey
Estate of Paul Baron
Estate of Elaine B. Beachler
Estate of John Jamerson Bell
Estate of Margaret M. Borkholm
Estate of Wilma E. Coates
Estate of Dorothy A. Dixey
Estate of Marion E. Eisenberg
Estate of Samuel S. Feuerstein
Estate of Eva Jane Houghtaling Foster
Estate of Frances Gainey
Estate of Charles Donald Garrett
Estate of Esther S. Gordon
Estate of Loren G. Harrell
Estate of Helen M. Heerey
Estate of Mary V. Urann Hollidge
Estate of Donald L. Jacoby
Estate of Christine M. Jonidis
Estate of James A. Macholl
Estate of Edith Lee McCord
Estate of Barbara J. Minahen
Estate of Susan S. Myerson
Estate of Bertine J. Prosser
Estate of Helen C. Pryor
Estate of Alice E. Robens
Estate of Esther Siltanen

Estate of Ruth I. Stimmel
Estate of Claire B. Strub
Estate of Pauline Tompkins
Estate of William A. Triche
Estate of Edith M. Wachsner
Estate of Hazel D. Walsh
Estate of John J. Weichman
Estate of George C. Wernham
Estate of Madeline Wilhelm
Estate of Corinne Wilson
Estate of Fred S. Youkstetter

Anonymous Trust
Trust of Martha G. Borders
Trust of Grace W. Densmore
Trust of Gertrude F. Dickson
Trust of Mildred R. Dubuadl
Trust of Wilbur C. Grosse
Trust of John T. Holowiak
Trust of Leonard & Eustelle Hudson
Trust of Edward Low
Trust of Susan Mahn
Trust of Helen B. O’Roarke
Trust of Joslyn Moffett Perkins
Trust of A.L. & E.R. Repecka

Estate And Trusts

NFCR gratefully acknowledges the following Estate gifts received during FY06:

Mr. and Mrs. Terry Albrecht
Dr. Sujuan Ba
Mr. and Mrs. Jerry Bleeker
Mr. Ronald L. Brough
Mrs. Thelma D. Cabaniss
Rev. Robert J. Carlson
Mrs. William P. Curto
Mrs. Lois N. De Conca
Mr. Elmo L. Fischer
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Trust of Leonard & Eustelle Hudson
Trust of Edward Low
Trust of Susan Mahn
Trust of Helen B. O’Roarke
Trust of Joslyn Moffett Perkins
Trust of A.L. & E.R. Repecka

26 Legacy Society
NFCR Gratefully Acknowledges These Corporations And Foundations For Their Leadership Support Of Our Mission To Conquer Cancer.

Foundations

Arlene Foundation
David Altman Foundation
Bank of America Foundation
Bellini Foundation
Herb Block Foundation
Blue Grass Foundation, Inc.
Chua Charitable Foundation
Coach’s Crew Foundation
Alvin & Fern Davis Foundation
Flowers Family Foundation
Gettinger Foundation
Shirley & William L Griffin Foundation
M & L Grossman Foundation
Russ & Andrea Gullotti Foundation
I Do Foundation
Jurenko Foundation
Kapoor Family Foundation
Kay Family Foundation
Kurz-Kneiger Foundation
M. J. & Caral G. Lebworth Foundation
Litterman Family Foundation
Ludeke Foundation
M & T Charitable Foundation
Diane & James Perrella Family Foundation
Pfizer Foundation
Prudential Foundation
Pursuing Scientific Research Foundation
Raynie Foundation
Benjamin & Sophie Scher Charitable Foundation
Albert & Olive Schlink Foundation
David & Carol Schultz Family Foundation
Sills Foundation
Stupell Foundation
James H. & Margaret Tabeling Foundation
Taubert Memorial Foundation
Darla Dee Turlington Charitable Foundation
Whiting Family Foundation
Malcomb Hewitt Weiner Foundation
Wiegand Family Foundation, Inc.

Corporations

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Brown & Hofmeister
Decatur Memorial Hospital
Hamilton Physical Therapy
Helen Galland Associates
Hewlett-Packard Company
House Of Sake
IBM
The Kandell Fund
Karchner Logistics & Distribution
Landcraft
M. B. Duncan, Inc.
Microsoft
The Nolan Company
New Control, LLC
Novartis
NWPL, Inc.
Osceola Community Fund
Robert Regenery Consulting
Silverton Construction
TC Group
Travelocity
YM BioSciences
The President’s Circle: Honoring Our Most Generous Supporters

Membership in The NFCR President’s Circle provides an opportunity for the National Foundation for Cancer Research to recognize its most generous annual donors. These individuals are leading the way by making a substantial investment in cancer research and in NFCR’s mission to find cures for all types of cancer. Every gift is important to the fight against cancer, and every gift is equally valued, but members of The President’s Circle are the true leaders within the NFCR donor family. Their generosity helps NFCR sustain its research effort and assures that our research programs remain at the cutting edge of cancer science, enabling NFCR to continue its leadership in pushing back the frontiers of our understanding of cancer and moving us toward a cure.

President’s Circle members ensure NFCR’s ability to fulfill its mission today and in the future by making annual gifts of $1,000 or more to NFCR during each calendar year. In addition to the special recognition afforded to members of The President’s Circle, these committed donors receive numerous communications throughout the year, designed to keep them abreast of NFCR programs and research initiatives. To strengthen the relationship between our President’s Circle members and the Foundation, new member benefits will be introduced in 2007, including periodic “Behind the Scenes in Cancer Research” updates providing information about the latest advances in cancer treatment and prevention and the most recent news from the research frontiers where NFCR-funded scientists are working to defeat cancer. Members will also receive the NFCR Annual Report, a personalized certificate of appreciation, and invitations to special “Voices of Cancer Leadership Luncheons” held periodically at key locations around the country. These gatherings will serve to introduce our valued President’s Circle members to the scientific leaders whose pioneering work they are supporting with their charitable contributions to NFCR.

At NFCR we are grateful for every gift, and we extend a special appreciation to the members of The President’s Circle for their extraordinary generosity. We hope others will be inspired to join the ranks of The President’s Circle and become leaders in the fight against cancer through NFCR.

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A dedicated committee, generous corporate sponsors, and many hard-working volunteers helped to make the 25th Annual Daffodils & Diamonds Luncheon held March 9, 2006, a sell-out success at the Congressional Country Club in Bethesda, Maryland. This was a very special quarter-of-a-century anniversary for the luncheon, and the National Foundation for Cancer Research was honored to be the beneficiary for the second year in a row. Kathleen Matthews served as Mistress of Ceremonies which was attended by over 400 women and a few happily outnumbered men from all over the Washington Metropolitan area. Over $60,000 was raised and will be used by NFCR to give hope to those who suffer with cancer, especially those with breast and ovarian cancer.

Preparations are already underway for the next Daffodils & Diamonds Luncheon to be held on March 8, 2007.

Daffodils & Diamonds committee members were in attendance at the inaugural Albert Szent-Györgyi award dinner. Left to right: Nancy Cole, Sujuan Ba, Ph.D., Ann Dvorak, M.D., Harold Dvorak, M.D., Alice-Anne Birch, Claire Cooney, and Sarah Funt.

Kind, compassionate, generous—these are all words that aptly describe NFCR donor Thelma Cabaniss. After surviving her own battle with breast cancer many years ago, Thelma chose to support NFCR’s mission—something she has done for nearly 20 years with generous gifts including the establishment of several charitable gift annuities.

Thelma is a Charter Member of the newly established NFCR Legacy Society, which was created to recognize donors who have established one or more gifts that will benefit NFCR’s cancer research programs in the future. These members are passionate about conquering cancer with support from life income and estate gifts.

Thelma’s concern for the welfare of people is evident in her support of cancer research, and it should come as no surprise that she loves animals as well. She currently lives with her Siamese cat, Cimba, whom she adopted from the Humane Society.

In the 1940s, Thelma and her sister, Leatha, attended business school and later worked for a top secret section of the FBI. She married Lem Cabaniss, an officer and attorney with the U.S. Army. Thelma, Lem, and their dog, Jefferson Davis, traveled extensively over the years in connection with Lem’s work—including Germany, Greece, Israel, Switzerland, and New Zealand.

Thelma enjoys line dancing, socializing with neighbors and friends, and attending church in her Silver Spring, Maryland community. But doing something about “the cancer problem” is never far from her mind.
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