You can feel the renewed sense of energy within the field as the latest discoveries build on one another and help chart the course forward.
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charting the course
At the Melanoma Research Alliance (MRA), the mission of finding a cure for melanoma guides our work each and every day. The developments over the past year, fueled by the hard work and dedication of MRA-funded investigators and innovative collaborations with our allies, have brought the field closer to making this goal a reality. This report puts in perspective all that has been accomplished and where we are headed in capitalizing on the progress in prevention, detection and treatment of deadly skin cancer.

There is continuing optimism among clinicians and patients for progress in melanoma research. You can feel the renewed sense of energy within the field as the latest discoveries build on one another and help chart the course forward. At the 2012 American Society of Clinical Oncology conference, positive results were announced for the new immune checkpoint inhibitor called anti-PD-1. The Phase-1 clinical trials involving this experimental drug were aimed at restoring the immune system’s ability to attack cancer, including melanoma. With critical funding from MRA for projects focusing on understanding the mechanism and identifying biomarkers, the anti-PD-1 antibody is moving at a breathtaking pace toward improving prognosis for Stage IV melanoma patients, lung cancer patients, and kidney cancer patients. MRA support is playing a central role in the progress of these and other transformational melanoma advances.

This progress is fueling MRA’s commitment to leverage investments and build innovative collaborations. We are capitalizing on the momentum and charting the course toward a cure for melanoma.

Over the past year, MRA awarded $8 million to 23 investigators developing improved means to prevent, detect and treat melanoma. In March, MRA convened its Annual Scientific Retreat, bringing together key melanoma research stakeholders to share early findings and to catalyze partnerships. This year for Melanoma Awareness Month in May, MRA partnered with more than two dozen allies to raise awareness through an extensive social media campaign that made more than 60 million impressions.

With melanoma incidence and death rates continuing to rise, MRA reaffirms its commitment to find and fund the most impactful scientific research around the world aimed at preventing, diagnosing, and treating melanoma. MRA funding is critical to finding the best tools and treatment for patients and all who are at risk, ultimately finding a cure for melanoma. We are gratified by the rising excitement in the field, measured by the increasing numbers of thoughtful research proposals from a widening circle of investigators around the world. We are proud of the role our MRA-funded research has played in the continued progress in the fight. Together with your support, MRA is working toward a day when no one will suffer or die from melanoma.

Debra Black
Co-founder and Chair

Wendy K.D. Selig
President and CEO
about us
In 2007, melanoma touched the lives of Debra and Leon Black when Debra was diagnosed with the disease. The Blacks formed MRA, a public charity under the auspices of the Milken Institute. Over the past five years, MRA has become the largest private funder of melanoma research in the United States. MRA’s ultimate goal is to find a cure by funding the most promising melanoma research worldwide that will accelerate progress and improve outcomes for patients and all who are at risk.

To date, MRA has awarded more than $38 million to 96 research programs to make transforming advances in the prevention, diagnosis, staging, and treatment of melanoma, including research in biological causes of carcinogenesis, skin screening, biomarkers, imaging, immunotherapy, molecularly targeted therapy, and combination therapy.

The mission of MRA is to accelerate the pace of scientific discovery and its translation in order to eliminate suffering and death due to melanoma. Over the last year a team funded by MRA built a melanoma training program called INFORMED for primary care providers available online. An academic-industrial partnership supported by MRA is enabling the development of a three-dimensional skin imaging system for clinical testing this year. These are hopeful signs for a better outlook and underscore the progress since the founding of MRA. Thanks to the ongoing support of our founders, MRA applies 100 percent
of public donations to our research program and is the largest private funder of melanoma research.

MRA research awards provide an important and unique source of funding that addresses the gap in translational science, which is a critical stage in moving scientific discoveries into tools and treatments for patients.

**Hallmarks of the MRA research portfolio include:**

**MRA worldwide researchers:** MRA has funded 134 Principal Investigators at 65 institutions in 10 countries. In 2012 alone, MRA has awarded almost $8 million for melanoma research.

**Collaborative team science:** Team Science Awards fund multidisciplinary research groups and account for two thirds of research funding to date, followed by a variety of individual awards.

**Investing in developing new treatments:** MRA has invested almost $32 million in research funding to improve melanoma treatment – more than 80 percent of total funding awarded to date. In 2011, clinical advances ushered in a new era in the fight against metastatic melanoma with two new agents coming onto the market. MRA is accelerating this remarkable progress by supporting research to improve these therapies as well as develop new immunotherapy, molecularly targeted therapy, and combination therapy treatment approaches.

**Advancing key scientific and clinical areas:** MRA research funding is guided by a Strategic Research Portfolio that articulates the key questions to be answered to transform the prevention, diagnosis, staging, and treatment of melanoma. MRA addressed 17 scientific and clinical questions raised at the initial Call to Action meeting in 2007 which launched MRA, and the plan was updated in 2011.

**Commitments by Science Area**

- Prevention $2.95M
- Diagnosis/Staging $3.68M
- Treatment $31.8M
“MRA has provided my laboratory the opportunity to grow in scope, achievement, and outreach. MRA is a motivational organization that brings together the research community. At the end of each interaction we find ourselves highly invigorated to take on this very challenging disease.”

Timothy Bullock, Ph.D.
2008 MRA Young Investigator
2011 Academic Industry Partnership Awardee
University of Virginia
research
program
Sequencing implicates new genes, confirms effects of sun damage: Genome sequencing offers one way for scientists to better understand cancer at a molecular level and uncover new targets for drug development. A recent whole genome sequencing study of human melanoma tumors supported by MRA and carried out by Levi Garraway, M.D., Ph.D., of the Dana-Farber Cancer Institute, Lynda Chin, M.D., of MD Anderson Cancer Center, and their collaborators revealed genetic alterations never before described in melanoma. One of these involves a gene called PREX2, which was mutated in a significant number of melanoma samples and was shown to promote tumor growth in follow up experiments. The study also confirmed previous findings that sun exposure is associated with a greater number of genetic mutations in tumors, further supporting the role of ultraviolet radiation in the development of melanoma.

Empowering primary care physicians to participate in melanoma detection: Most individuals do not perform skin self-exams and the dermatologic workforce may not be sufficient to detect the increasing numbers of melanoma cases in the U.S. Therefore, primary care physicians have the potential to play an important role in melanoma detection. In order to equip them with the skills to participate, Martin Weinstock, M.D., Ph.D., of Rhode Island Hospital led an MRA-funded team that developed the web-based curriculum INFORMED. Pilot testing found that it improved diagnostic accuracy and management decisions that were sustained six months after program completion, as well as self-reported confidence and skills by the participating physicians. The program can be accessed in the Resource section on the MRA Web site.

Advancing the next generation of melanoma immunotherapy: An MRA-funded team effort being led by Drew Pardoll, M.D., Ph.D., and Suzanne Topalian, M.D., of Johns Hopkins University and Lieping Chen, M.D., Ph.D., at Yale University is advancing a promising new therapy that boosts the immune system against melanoma. This agent, anti-PD-1, is a so-called immune checkpoint inhibitor, which is a type of treatment approach whose clinical utility was established with the FDA approval of ipilimumab last year. In a recent phase I clinical trial, the drug
produced positive results in melanoma, non-small cell lung cancer, and kidney cancer patients. With support from MRA, the team is focused on further elucidating the mechanisms underlying this therapy, identifying treatment-related biomarkers, and developing combinatorial therapy approaches. The investigators found that PD-L1 (the partner protein to PD-1) expression in patient tumor samples was correlated with treatment response and, therefore, represents a potential biomarker for use in selecting patients for therapy.

**Addressing drug resistance to targeted agents:**

Identifying resistance mechanisms to BRAF inhibitors and other molecularly targeted agents is needed to develop new drugs and combination therapies that will provide longer lasting control of the disease. MRA Young Investigator Roger Lo, M.D., Ph.D. at University of California, Los Angeles and his collaborators uncovered a new mechanism of resistance to the BRAF inhibitor vemurafenib. In some patients with BRAF-mutated metastatic melanoma, the BRAF gene driving the cancer becomes amplified. This means that more of the protein is made and the drug dose becomes too weak to be effective. However, simply giving more of the drug to patients might not be feasible, but a MEK inhibitor added to the BRAF inhibitor may be effective in this situation. In addition to this finding, it was discovered that, despite what scientists previously thought, a mutation in MEK1 does not necessarily contribute to resistance to BRAF inhibitor therapy. Some patients' tumors were found to harbor certain MEK1 mutations even before they started therapy, and they responded to BRAF-inhibitors just as well as patients with only the BRAF mutation.
Funding by Type of Award

MRA has funded 25 Teams, 32 Established Investigators, 24 Young Investigators, 12 Pilot and Development projects, and three Academic-Industry Partnership Awards.

**Team Science Awards** fulfill one of MRA’s primary goals: to foster a collaborative research process. Multidisciplinary teams consist of Principal Investigators with complementary expertise that may be from the same institution, inter-institutional, and/or international institutions. Team science projects promote transformational melanoma research advances with the potential for rapid clinical translation.

**Established Investigator Awards** support senior investigators with an established record of scientific productivity and accomplishment and who are past the initial four years of their first academic faculty appointment.

**Pilot Awards** test potentially transformative ideas that do not have extensive preliminary data but articulate a clear hypothesis and translational goals. Resources for such “high-risk, high-reward” projects are important to establish proof-of-concept, which may then leverage additional funding through more traditional avenues. Development Awards are a subtype in which one year of funding is provided.

**Young Investigator Awards** aim to attract early career scientists with novel ideas into melanoma research, thereby...
recruiting and supporting the next generation of melanoma researcher leaders. Young Investigators are scientists within four years of their first academic faculty appointment. A mentorship commitment from a senior investigator is required.

**Academic-Industry Partnership Awards** are designed to facilitate interactions between the academic and industrial research sectors, and are co-supported by MRA and an industrial partner whose involvement is essential to the project.

**Funding By Award Type**

- **Established Investigator** $7.5M
- **Young Investigator** $3.8M
- **Partnership** $0.6M
- **Pilot/Development** $1M

Team Science $25.4M

{(2008-2012 MRA Young Investigators)}
“The award from MRA allowed me to obtain the data necessary to secure a recent NIH R01 grant. This is an important milestone in my career, particularly in this extremely difficult funding environment, allowing me to firmly establish my research program in melanoma.”

Bin Zheng, Ph.D.
2011 Elizabeth and Oliver Stanton—MRA Young Investigator
Columbia University
collaboration
Research Funding
Collaboration is at MRA’s core—from its team research funding approach to funding allies who help the organization realize its vision.

Notably, MRA has co-funded research projects with premier cancer research foundations, including the Melanoma Research Foundation, Cancer Research Institute, Canadian Cancer Society, American Association for Cancer Research, and the Safeway Foundation.

This year, MRA and Stand Up to Cancer (SU2C) jointly funded a Melanoma Dream Team at the level of $6 million, with additional funding leveraged from other sources. This groundbreaking award represents one of the largest single grants for melanoma research and the first collaboration of its kind with SU2C.

MRA selected three Academic-Industry Partnership Awards to support projects in conjunction with matched contributions from an industry partner whose participation is essential to the project. Current industry partners are Canfield Scientific Inc, Celldex Therapeutics, and Altor BioScience Corporation.

Alliances
From alliances with donors and foundations funding research grants to alliances with companies helping to raise awareness about the dangers of melanoma, collaboration remains central to MRA’s activities. In 2011 and 2012, MRA made great strides with its Allies program, sharing collaborations with more than 90 allies who believe in its mission. In the past year some of MRA’s most notable allies have joined the organization in prevention and awareness campaigns through promotions and social media outreach, while others have hosted and contributed to fundraising events on MRA’s behalf. With the help of our many allies, MRA messages made more than 60 million impressions during Melanoma Awareness Month in 2012 with information on melanoma and how to reduce risk.
**Transformative Advances**
In just five years of active research, the productivity of MRA-funded investigators has been high, as measured by tangible outcomes and promising early research results advancing the understanding of the causes, origins, and progression of melanoma and developing new therapies for patients with advanced disease:

**14 Clinical trials** supported by MRA to test promising agents alone and in combination for the treatment of metastatic melanoma.

**$27 million** in additional research funding leveraged from other sources by MRA investigators. The majority of this funding was granted by the U.S. National Institutes of Health through a merit-based peer-review process.

**14 patent applications** filed or new inventions disclosed for new technologies, which have the potential to be developed into new tools or treatments for patients.

**More than 120 collaborations** initiated and strengthened between academic, government, and industry scientists, which enhance sharing of information and fast-forwarding of the research.

**More than 70 papers** published in high-impact journals describing research results supported by MRA, which inform the scientific and clinical communities about promising new research findings so that others may build upon the results to help patients.

**Approximately 300 presentations** delivered by MRA investigators at medical and scientific meetings around the world, where research results are shared and the profile of MRA is enhanced.
Accountability and Community Engagement
Research proposals submitted to MRA are vetted by MRA’s Grant Review Committee (page 31), comprised of leading experts in melanoma and cancer research. Review is based on MRA’s key criteria: innovation, scientific merit, and potential for rapid progression to clinical testing. MRA’s conflict-of-interest guidelines ensure a fair and unbiased process. Final funding decisions are ratified by the MRA Board of Directors (page 30).

The MRA Scientific Advisory Panel (page 30) advises, assists, and makes recommendations to the MRA leadership team on the scientific matters and policies, including research needs, opportunities that may be targeted for funding and planning scientific symposia.

The MRA Medical Advisory Panel (page 32) was formed in 2011 to advise MRA leadership team on medical matters and policies including medical consultations, clinical research needs and opportunities, clinical regulatory and policy initiatives, and public education about melanoma.

Annual Scientific Retreat
In February 2012, MRA convened its Fourth Annual Scientific Retreat, bringing together more than 220 thought leaders from academia, industry, government, business, and philanthropy to share latest findings and forge new partnerships in pursuit of better outcomes for patients. MRA-funded investigators, including early career scientists, established investigators, and interdisciplinary teams, reported on the progress of their work. Highlights from this Scientific Retreat included MRA’s first Young Investigator’s Breakfast, which featured a discussion led by MRA Board member Michael Milken and engaged Young Investigator Award recipients, mentors, donors, and industry partners.

MRA published, “Building on the Momentum: Charting the Course,” summarizing meeting highlights, underscoring the momentum that has occurred due to recent research breakthroughs and opportunities for charting a new course in the fight against melanoma.

Site Visits
Each year, MRA leadership and staff conduct site visits to MRA-funded institutions to learn more about their melanoma programs, hear about progress being made thanks to their MRA award funding, and further develop relationships with awardees. Over the past year, MRA has conducted 10 site visits.

Policy
MRA has contributed to a number of efforts aimed at policymakers urging them to help in the fight against deadly skin cancer. Some examples of these projects in the past year include:

- MRA is an active member of several coalitions, such as United for Medical Research and the National Coalition for Cancer Research, the Alliance for a Stronger FDA, and
Research!America, whose ongoing efforts advocate for sustained funding increases at the National Institutes of Health, the National Cancer Institute, and the Food & Drug Administration.

- MRA partnered with the American Association for Cancer Research (AACR) to host a Congressional briefing which highlighted AACR’s “Cancer Progress Report 2011: Transforming Patient Care through Innovation.” The briefing focused on advances in cancer research in the 40 years since the landmark National Cancer Act of 1971.
- MRA sent letters to Congress in support of the Melanoma Research Act of 2012, establishing a Skin Cancer Fund at the National Institutes of Health.
- In a letter to Congress, MRA encouraged the U.S. Preventative Services Task Force to take into account additional evidence produced by the scientific community when they meet to reconsider changing the outdated recommendations regarding skin cancer screening set in 2009.
- MRA applauded a congressional staff report entitled “False and Misleading Health Information Provided to Teens by the Indoor Tanning Industry,” which underscores the disregard for health concerns by the indoor tanning industry and calls for the restrictions on indoor tanning beds for minors (as the states of California, New York and Vermont have implemented).

Global Presence

Australia
Ludwig Institute for Cancer Research, Melbourne
Queensland Institute of Medical Research
University of Sydney
Westmead Hospital

Belgium
Catholic University of Leuven

Canada
Lady Davis Institute for Medical Research
McGill University
Sunnybrook Health Sciences Center

Germany
Goethe University Frankfurt
University Hospital Heidelberg

Israel
Hebrew University of Jerusalem
Sheba Medical Center

Netherlands
Daniel den Hoed Cancer Center
Leiden University Medical Centre
Netherlands Cancer Institute
University Medical Center Groningen

New Zealand
Malaghan Institute of Medical Research
Stand Up To Cancer

- Stand Up To Cancer (SU2C), MRA, and SU2C’s scientific partner, the American Association for Cancer Research (AACR), announced a new Dream Team dedicated to melanoma research. Jeffrey M. Trent, Ph.D., and Patricia M. LoRusso, D.O., will lead the Dream Team project entitled “Personalized Medicine for Patients with BRAF Wild-Type (BRAFwt) Cancer.” The SU2C-MRA Melanoma Dream Team Translational Cancer Research Grant will provide $6 million over a three-year period and is intended to accelerate the application of new therapeutic agents to the clinic.

- In 2012, MRA launched a multi-year Public Service Announcement (PSA) campaign with SU2C on melanoma awareness featuring actress Laura Linney and other prominent spokespeople. Both MRA and SU2C have the PSAs prominently highlighted on their Web Sites through a special “Protect your Skin” microsite.

- MRA was featured during the 2012 SU2C live telecast with a moving segment about Dr. Patricia LoRusso and her patient, Hillary Kind and a shout out by actor Tom Hanks.

{Stand Up 2 Cancer PSA}
Melanoma Awareness Month

May offered an important opportunity for MRA and its allies to advance the mission of reducing suffering and death from deadly skin cancer. MRA’s awareness campaign highlighted the dangers of melanoma, educated the public about how to reduce risk, and offered opportunities for people to take action.

MRA’s estimated total outreach for the month of May through all of its collaborative campaigns exceeded 60 million impressions. MRA continues to expand its Online and Social Media presence through Facebook and Twitter as well as through cross promotion via its allies’ social media efforts. To date, MRA has more than 1,850 followers on Twitter, 1,600 fans on Facebook, and reaches more than 1,000 people daily through its website. During the month of May, MRA boosted its presence on Twitter by 20 percent and saw an increase in following of almost 30 percent on Facebook.

MRA is continuing to focus on expanding its social media presence with the release of its melanoma info graph. MRA’s “Melanoma of the Skin: Reduce Your Risk. Protect Yourself. Take Action.” Info Graph has been shared more than 500 times by Facebook users to their networks and seen by more than 125,000 Facebook users.

Melanoma Exposed™

MRA joined in the launch of Melanoma Exposed™ Screen. Protect. Know. Tell. a national awareness campaign. MRA is proud to support this public awareness campaign to educate Americans about melanoma and its risk factors.

Partnering for Cures 2011

Partnering for Cures provided MRA an opportunity to expand its reach through networking sessions and partnering meetings. MRA participated in the meeting’s Innovator Presentations track and highlighted its novel Partnership Award grant mechanism. MRA Young Investigator Awardees Timothy Bullock, Ph.D., and Panmanee Sharma, M.D., were featured on a panel discussion focused on the future of research, led by MRA President and CEO Wendy Selig.

Global Conference 2012

Milken Institute Global Conference included a session moderated by MRA President and CEO, Wendy Selig. The session, “Cancer Prevention: What Will it Take?” focused on what is known and yet to be determined about cancer’s causes and strategies that can be implemented to reduce risk of certain cancers and prevent others.
Sirius XM Radio PSAs
MRA partnered with Sirius XM Radio and produced two new melanoma public service announcements with Martha Stewart and actress Christine Taylor. Throughout the month of May, Sirius broadcast the two PSAs on 11 channels during a nationwide awareness campaign.

AOL Impact
MRA was featured as an AOL Homepage: Daily Impact Unit & AOL Impact Site, seen by 12.4 million daily AOL users. AOL Homepage Daily Impact reserves a portion of the AOL.com homepage to feature a different cause every day of the year, while the Impact Site provides a page on AOL’s Web Site to house MRA’s Impact Site permanently.

Events
During the past year, MRA has continued to expand its reach by hosting gatherings across the country to engage new people and elevate the importance of melanoma among varied audiences.

Patient advocates, philanthropists, scientists, and Corporate Allies convened for the second MRA bi-annual benefit dinner at Sotheby’s in New York City. The dinner featured a live auction led by MRA Board member Michael Milken and Jamie Niven, Sotheby’s chairman of North and South America, an exclusive preview of contemporary Art, and the opportunity to meet with some of the most forward-thinking minds in cancer research. A highlight of the auction came when supporters pledged sponsorship for 12 Young Investigator awards, exceeding expectations with their generous funding.

This year’s event highlights also included in-store and online promotions by Bergdorf Goodman benefitting MRA during the month of May. Bergdorf Goodman kicked off this month-long promotion with a luncheon in honor of MRA on sun safety and style, hosted in the BG Restaurant.

In recognition of Melanoma Awareness Month, more than 650 of the biggest names in Leveraged Finance gathered at the Bryant Park Grill to raise funds to fight melanoma.

With the help of Christie’s, MRA was formally introduced to the world of European philanthropists at an event hosted at Christie’s auction house in London.
In Los Angeles, Dior hosted a luncheon debuting its Fall 2012 Collection at Scarpetta in the Montage Beverly Hills. A portion of proceeds from the sale of items during the month of May from the event attendees were donated to MRA.

**Looking Ahead**

The last 12 months have proved pivotal in the effort to defeat melanoma. MRA continues to lead the way in finding and funding the most transformative research projects that will benefit patients and all at risk for this deadly disease. In the five years that MRA has provided vital grant support to investigators around the world, the outlook for melanoma has changed dramatically from one of frustration and little hope to one of optimism and renewed commitment. Armed with the latest new information about how melanoma arises and progresses, researchers and their industry allies are moving quickly to bring new options forward to the clinic.

In the coming months, MRA is committed to maximizing the opportunities that have been created, accelerating the pace of discovery and engaging with all stakeholders in innovative alliances. There has never been a more hopeful time in the fight against melanoma. MRA is determined to leverage that optimism toward the day when no one suffers or dies from melanoma.
{ Sylvia Cohn, Debra Black, Patricia Shiah, and Daisy Helman at MRA’s Bergdorf Goodman Event}

{Rep. Brian Bilbray (CA) and Antoni Ribas, M.D., Ph.D. at MRA’s Fourth Annual Scientific Retreat}

{Jeff Rowbottom and Jedd Wolchok, M.D., Ph.D., at MRA’s Leveraged Finance Event}

{Jill Kargman, Bronson van Wyck, and Jamie Niven at MRA’s Sotheby Event}
support & financials
Financials (as of 12/31/11)
Thanks to the generous ongoing support of our founders, 100 percent of public donations to MRA directly support melanoma research. The independently audited financial statements of Melanoma Research Alliance Foundation form the basis for the following information.

MRA Foundation Statements of Activities Year Ended December 31

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<thead>
<tr>
<th>Revenues, Public Support &amp; Other Income</th>
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<th>2010</th>
<th>2009</th>
<th>2008</th>
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<td>Sponsorship</td>
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<td>Investment/Interest Income</td>
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<td>25,642</td>
<td>8,718</td>
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<td><strong>Total Revenues, Public Support &amp; Other Income</strong></td>
<td><strong>$21,034,891</strong></td>
<td><strong>$23,614,827</strong></td>
<td><strong>$6,542,669</strong></td>
<td><strong>$6,107,256</strong></td>
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<td>6,828,183</td>
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<td>Fundraising</td>
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<td>194,989</td>
<td>—</td>
<td>—</td>
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<td>Management and General</td>
<td>262,558</td>
<td>327,176</td>
<td>169,420</td>
<td>49,933</td>
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<td><strong>Total Functional Expenses</strong></td>
<td><strong>$6,656,438</strong></td>
<td><strong>$9,190,536</strong></td>
<td><strong>$6,997,603</strong></td>
<td><strong>$3,473,510</strong></td>
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| Change in Net Assets                   | 14,378,453 | 14,424,291 | (454,934) | 2,633,746 |
| Net Assets—Beginning of Year           | 16,603,103 | 2,178,812   | 2,633,746 | —         |
| **Net Assets—End of Year**             | **$30,981,556** | **$16,603,103** | **$2,178,812** | **$2,633,746** |
# MRA Foundation Statements of Financial Position

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<tr>
<td>Cash and Cash Equivalents</td>
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<td>$110,296</td>
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<td>Contributions Receivable</td>
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<td>9,468,362</td>
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<td>Prepaid Expenses and Other Assets</td>
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<td>517,846</td>
<td>10,000</td>
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<td>Property and Equipment (Net)</td>
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<td>5,395</td>
<td>5,116</td>
<td>—</td>
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<td><strong>Total Assets</strong></td>
<td><strong>$31,331,243</strong></td>
<td><strong>$16,707,780</strong></td>
<td><strong>$2,243,638</strong></td>
<td><strong>$2,988,402</strong></td>
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</thead>
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<tr>
<td><strong>Liabilities</strong></td>
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<tr>
<td>Accounts Payable &amp; Accrued Liabilities</td>
<td>139,051</td>
<td>59,716</td>
<td>54,478</td>
<td>67,921</td>
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<tr>
<td>Due to Affiliate</td>
<td>140,636</td>
<td>10,281</td>
<td>291</td>
<td>286,735</td>
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<tr>
<td>Deferred Revenue</td>
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<td>25,000</td>
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<td>—</td>
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<tr>
<td>Deferred Rent</td>
<td>—</td>
<td>9,680</td>
<td>10,057</td>
<td>—</td>
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<tr>
<td><strong>Total Liabilities</strong></td>
<td><strong>349,687</strong></td>
<td><strong>104,677</strong></td>
<td><strong>64,826</strong></td>
<td><strong>354,656</strong></td>
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</table>

| **Net Assets**                  |              |              |              |              |
| Unrestricted                    | 9,760,006    | 6,249,741    | 2,178,812    | 2,633,746    |
| Temporarily Restricted          | 21,221,550   | 10,353,362   | —            | —            |
| **Net Assets**                  | **30,981,556** | **16,603,103** | **2,178,812** | **2,633,746** |

| **Total Liabilities and Net Assets** | **$31,331,243** | **$16,707,780** | **$2,243,638** | **$2,988,402** |
## 2011 Functional Expenses

<table>
<thead>
<tr>
<th>Program</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grants and Awards Program</td>
<td>$5,544,560</td>
</tr>
<tr>
<td>Non-Grants Scientific Program</td>
<td>$479,775</td>
</tr>
<tr>
<td>Fundraising</td>
<td>$369,545</td>
</tr>
<tr>
<td>Management and General</td>
<td>$262,558</td>
</tr>
</tbody>
</table>

![Chart showing the distribution of expenses]

- Grants & Awards: 83%
- Management & General: 4%
- Fundraising: 6%
- Non-Grants Scientific Program: 7%
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Leon Black
Co-Founder of MRA, CEO—Apollo Management LP
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President and CEO—Milken Institute
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Managing Director—Kohlberg Kravis Roberts & Co.
Greg Simon
Jonathan W. Simons, M.D.
CEO and President—Prostate Cancer Foundation
Jonathan Sokoloff
Managing Partner—Leonard Green & Partners, L.P.
Elizabeth Stanton
President—Elizabeth and Oliver Stanton Foundation

Staff (Non-Director):
Wendy Selig
President and CEO—MRA

Officers (Non-Director):
Margaret Anderson (Secretary)
Executive Director—FasterCures
Kamyab Hashemi-Nejad (Treasurer)
Director of Finance—Milken Institute

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Paul Billings, M.D., Ph.D., Chief Medical Officer—Life Technologies
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Lynda Chin, M.D., Professor, Chair—Dept. of Genomic Medicine; Scientific Director, Institute for Applied Cancer Science—University of Texas M.D. Anderson Cancer Center
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Donald Morton, M.D., Chief, Melanoma Program and Director, Surgical Oncology Fellowship Program—John Wayne Cancer Institute
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Steven Rosenberg, M.D., Chief, Surgery Branch—National Cancer Institute
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Suzanne Topalian, M.D., Professor of Surgery and Oncology—Johns Hopkins Medicine; Director, Melanoma Program—Sidney Kimmel Comprehensive Cancer Center, Johns Hopkins University; Chief Science Officer—Melanoma Research Alliance
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Jonathan Cebon, MBBS, FRACP, Ph.D., Director—Medical Oncology Austin Health; Head Cancer Vaccine Laboratory—Ludwig Institute for Cancer Research, Melbourne; Professor of Medicine—University of Melbourne

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Tanja de Gruijl, Ph.D., Associate Professor—VU University Medical Center

Charles Drake, M.D., Ph.D., Associate Professor, Oncology, Immunology and Urology Director—Multidisciplinary Prostate Cancer Clinic, Johns Hopkins Sidney Kimmel Comprehensive Cancer Center

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Michal Lotem, M.D., Senior Physician, Sharett Institute of Oncology—Hadassah Hebrew University Hospital

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Kim Margolin, M.D., Physician—University of Washington/Seattle Cancer Center

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Antoni Ribas, M.D., Ph.D., Professor—Department of Medicine, University of California, Los Angeles
Stan Riddell, M.D., Member, Department of Immunology—Fred Hutchinson Cancer Research Center

Caroline Robert, M.D., Ph.D., Professor of Dermatology, Head of the Dermatology Unit—Institute Gustave Roussy

Lynn Schuchter, M.D., C. Willard Robinson Professor of Hematology-Oncology, Attending Physician—Hospital of the University of Pennsylvania; Program Leader, Melanoma Program—Abramson Cancer Center of the University of Pennsylvania; Division Chief, Hematology-Oncology—University of Pennsylvania

Jonathan Simons, M.D., CEO and President, David H. Koch Chair—Prostate Cancer Foundation

Howard Soule, Ph.D., Executive Vice President, Discovery and Translation—Prostate Cancer Foundation

Suzanne Topalian, M.D., Chief Science Officer—Melanoma Research Alliance; Professor of Surgery and Oncology—Johns Hopkins Medicine; Director, Melanoma Program—Sidney Kimmel Comprehensive Cancer Center

Michael Weber, Ph.D., Director, Cancer Center and Weaver Professor of Oncology—University of Virginia

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David Fisher, M.D., Ph.D., Chief, Department of Dermatology; Director, Melanoma Program—MGH Cancer Center; Director, Cutaneous Biology Research Center—Massachusetts General Hospital; Edward Wigglesworth Professor of Dermatology—Harvard Medical School

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Kim Margolin, M.D., Professor, Department of Medicine—University of Washington/Seattle Cancer Center

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Suzanne Topalian, M.D., Chief Science Officer—Melanoma Research Alliance; Professor of Surgery and Oncology—Johns Hopkins Medicine; Director, Melanoma Program—Sidney Kimmel Comprehensive Cancer Center

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