A Tradition of Excellence

2010 Annual Report

ALSAC®/St. Jude Children’s Research Hospital®
St. Jude Children’s Research Hospital Mission

Our mission is to advance cures, and means of prevention, for pediatric catastrophic diseases through research and treatment. Consistent with the vision of our founder, Danny Thomas, no child is denied treatment based on race, religion or a family’s ability to pay.

ALSAC Mission

We raise the funds and build awareness to sustain the mission of St. Jude Children’s Research Hospital to advance cures, and means of prevention, for pediatric catastrophic diseases through research and treatment while honoring the memory and heritage of our founder, Danny Thomas.
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In 1962, world-renowned entertainer Danny Thomas stood before a crowd of more than 9,000 in Memphis, Tenn., and officially opened the doors of St. Jude Children's Research Hospital®. Committed to excellence from the beginning, St. Jude has become one of the world’s premier centers for the research and treatment of childhood cancer and other catastrophic diseases.

As the founder of St. Jude, Danny Thomas believed strongly that St. Jude patients would be treated regardless of race, religion or the family’s ability to pay for treatment. He also wanted to ensure that the doctors and scientists at St. Jude had the support they needed to conduct the cutting-edge research and provide the world-class treatment that could lead to cures. ALSAC, which he organized to raise the funds to build St. Jude, now exists solely to support the hospital’s lifesaving work.
“The theme of St. Jude Hospital will be ‘Excellence’.

We will create an institution whose ideas and functions should be as vital five hundred years from now as they are today.”

Dr. Donald Pinkel, first medical director of St. Jude and Recipient of the Lasker Award for Medical Research
Dear Friends:

What a remarkable year we have had at St. Jude Children’s Research Hospital.

During one of the most difficult economic periods in our nation’s history, our loyal donors, volunteers and partners responded like champions, enabling us to continue our lifesaving mission on behalf of the brave little boys and girls who are fighting for their lives.

We all had so much to celebrate this year, which was full of scientific advancements and national recognition.

In August, U.S. News & World Report named St. Jude the nation’s top pediatric cancer research center. This ranking validated that our clinical care is unsurpassed in the world, and we want to congratulate Dr. William E. Evans, director and CEO of St. Jude, and his entire staff for this well-deserved recognition.

We were also pleased when St. Jude was named the second best place to work among all academic institutions by The Scientist magazine. St. Jude is perennially in the top 10 of this survey, which again speaks to the unique culture that we have created at St. Jude as we seek to attract the best scientific minds in the world to find cures and save the lives of precious children.

And in 2010, St. Jude embarked on an unprecedented scientific journey when it announced the St. Jude Children’s Research Hospital – Washington University Pediatric Genome project. This is an incredible effort to identify the genetic changes that cause childhood cancer, which is still the deadliest disease threatening the lives of children under one year of age in the United States. The knowledge we gain from this project has the potential to rewrite the textbooks on how we diagnose and treat children with cancer.

We are truly grateful to our donors and volunteers who have made all of these accomplishments possible. Without their support, we would not have the resources to attract the best scientists and doctors or to undertake breath-taking scientific endeavors or to ensure that every child receives the best possible care, no matter the cost. So as we celebrate this past year, we celebrate those loyal supporters who have stood by the kids of St. Jude.

But in spite of all that we are accomplishing, we are painfully aware that we have not been able to save all of our children. Our hearts ache for those families. With the memories of those children to inspire us, we will move forward, fiercely determined to continue our progress and learn from those children who did not make it so that we can have many more days at St. Jude full of celebrations with the families of children who can go home to lead happy, healthy lives.

Of course, it all begins with hope. The hope that a family is given when they walk through the doors of St. Jude for the first time. The hope that a child feels during his or her coming-off-chemo party that signals the end of treatment. The hope that inspires our researchers and doctors to believe that they can defeat these terrible diseases once and for all. You will see that hope celebrated throughout these pages.

Finally, on behalf of the entire Thomas family, we want to thank our Board of Directors and Governors, the ALSAC and St. Jude staffs, the patients and families who so generously share their stories with us and, finally, the donors and volunteers across this nation who have embraced our father’s belief that no child should die in the dawn of life.

God bless the children,

Marlo, Terre and Tony

Marlo Thomas Terre Thomas Tony Thomas
As chairman of the St. Jude Board of Governors, I am honored to update you on a remarkable year for St. Jude Children’s Research Hospital and its mission of finding cures and saving children.

A highlight of the year was the announcement in January of the St. Jude Children’s Research Hospital – Washington University School of Medicine Pediatric Cancer Genome Project to identify the genetic changes that give rise to childhood cancer. This unprecedented effort will decode the genomes of more than 600 childhood cancer patients to help scientists and researchers understand the genetic origins of pediatric cancer. With that understanding comes the hope of discovering new treatments for some of the world’s deadliest cancers.

Another high point was the recognition by U.S. News & World Report of St. Jude as the No. 1 pediatric cancer hospital in the country in the magazine’s 2010-2011 Best Children’s Hospitals rankings. We are extremely gratified by this national recognition of the cutting-edge research and first-class patient care at St. Jude.

The Scientist also ranked St. Jude as one of the top institutions in the magazine’s annual “Best Places to Work in Academia” listing, the fifth consecutive year that St. Jude has made that publication’s Top 10 list of U.S. institutions.

And the contributions made by St. Jude faculty and staff to scientific and medical knowledge continued to be acknowledged this year by the worldwide medical and scientific community.

• Michael Kastan, MD, PhD, and Mary Relling, PharmD, were elected to the Institute of Medicine, a prestigious branch of the National Academy of Sciences. Kastan, the hospital’s Comprehensive Cancer Center director, and Relling, chair of St. Jude Pharmaceutical Sciences, join four other St. Jude faculty as IOM members.

• Charles Sherr, MD, PhD, co-chairman of Genetics and Tumor Cell Biology and a Howard Hughes Medical Institute Investigator, was honored by being named a fellow of the American Association for the Advancement of Science.

• Arthur Nienhuis, MD, was recognized for his excellence in mentoring trainees and colleagues with the 2009 Mentor Award from the American Society of Hematology.

• Robert Webster, PhD, delivered the prestigious 2010 Leeuwenhoek Lecture to the Royal Society.

• Ching-Hon Pui, MD, was honored with the Clinical Excellence Award at the fifth annual National Physician of the Year Awards.

• Social worker Judy Hicks was named the 2010 Social Worker of the Year by the Association of Pediatric Oncology Social Workers.

We also want to congratulate our friends at ALSAC for another notable year of fundraising, one that underscores the place that this incredible institution has in the hearts of donors and volunteers across the country.

Because of the dedicated support of ALSAC, we are able to continue the lifesaving mission of St. Jude. We are so grateful for the generosity of all the donors and volunteers who have helped St. Jude become a beacon of hope to families in communities everywhere.

Even as we look back on the successes of the past year, there is still much work ahead in the fight against childhood cancer and other catastrophic diseases. With our leadership and expertise in research, treatment and patient care, the dedication of ALSAC and the passionate commitment of our donors and volunteers, we will stay firmly focused on finding the cures that will save children’s lives.

Stephen J. Camer, MD
Chairman/President
St. Jude Board of Governors
I have the honor and distinct privilege to report on the record-breaking fiscal year ALSAC recently completed in our ongoing support of the lifesaving mission of St. Jude Children’s Research Hospital.

Faced with the toughest economic conditions since the Great Depression, we were able to raise $685 million to help fund St. Jude’s pioneering research and treatment, and to enable St. Jude’s team of clinicians, scientists and nurses to provide the best possible care for our patients and their families. This outstanding effort was made possible by an incredibly dedicated staff and by the heartfelt generosity and devotion of our donors and volunteers throughout the country.

Across this country people from all walks of life have embraced Danny Thomas’ dream that no child will die in the dawn of life. This past year tens of thousands of events – from Math-A-Thons to Trike-A-Thons, from golf tournaments to triathlons, from radiothons to telethons – were held to help raise funds and awareness for St. Jude. Even as the economy continued to falter, the loyal supporters of St. Jude did not, helping the hospital through $1 pin-up campaigns or add-on donations or by becoming Partners In Hope and donating monthly to the hospital. Organizations like the Delta Delta Delta Fraternity surpassed even their own expectations by reaching a fundraising goal of $10 million six years ahead of schedule. At ALSAC we are committed to keeping costs down and to finding new opportunities and new ways to share the St. Jude story.

We are also honored to have the support of some of this country’s most respected corporations, who have chosen to join St. Jude in the fight against childhood cancer and other deadly diseases. Many of these corporate partners support the hospital through the annual Thanks and Giving® campaign, created by Marlo, Terre and Tony Thomas, the children of St. Jude founder Danny Thomas, to encourage consumers to help St. Jude during the holiday season. The dedication of these partners was reflected in the success of this year’s campaign, during which Kmart, as the lead fundraiser, set a new Thanks and Giving record – raising almost $6.9 million for St. Jude.

And when the St. Jude Children’s Research Hospital – Washington University Pediatric Cancer Genome Project was announced, another corporate partner, Kay Jewelers, joined this historic initiative with a sponsorship of $20 million toward the project’s estimated cost of $65 million.

The work of supporting and maintaining St. Jude and Danny’s dream is the work of many: the passionate dedication of the Thomas family, the commitment of time and talent by our Board of Directors and volunteers, and the generosity of millions of donors help not only to keep the doors of St. Jude open but also allow for groundbreaking research, care and treatment year after year.

Inside St. Jude’s doors lies hope for families with sick children throughout the world. The inspiring work of the doctors, scientists, staff and administration at St. Jude is so deserving of recognition as the nation’s top children’s cancer hospital by U.S. News & World Report. Be assured that we at ALSAC will continue in our unwavering commitment to support their work and Danny’s dream of finding cures for childhood cancer and other catastrophic diseases.
Excellence in Research and Treatment

St. Jude was the first institution established for the sole purpose of conducting basic and clinical research and treatment into catastrophic childhood diseases, primarily cancer. St. Jude also was the first pediatric cancer research institution to place doctors, scientists and patients under one roof, creating the bench-to-bedside model that allows research into childhood cancer, sickle cell disease and other deadly illnesses to be more quickly translated into lifesaving treatment.

The discoveries made at St. Jude are freely shared with the global scientific and medical community, helping to save the lives of children in communities everywhere. One child saved at St. Jude can mean thousands saved around the world.
St. Jude’s culture is based upon our people, our standards of performance and the consistent application of these standards. Our ultimate success will require unfaltering commitment to excellence across every aspect of our enterprise.

Dr. William E. Evans, director and CEO of St. Jude
Pediatric Cancer Genome Project yielding new insights and tools for understanding childhood cancer

As the blue-gloved laboratory technician gently rocked the capped test tubes back and forth, what at first resembled dust motes in a sun beam gradually materialized in the clear liquid. The particles coalesced into what resembled long strands of cotton thread. In reality, those threads were the genetic material, the DNA, that once fueled a child’s cancer. Extracted from a tumor sample donated years earlier by a St. Jude patient, the DNA was poised to join an unprecedented effort launched in 2010 to transform understanding and treatment of childhood cancer.

Known as the St. Jude Children’s Research Hospital – Washington University Pediatric Cancer Genome Project (PCGP), the three-year, $65 million endeavor aims to sequence and then compare the normal and cancer genomes of 600 children with cancer. When the PCGP was announced in January of 2010, just two complete cancer genomes, each from an adult patient, had been decoded. But the St. Jude leadership believed that scientifically, technologically and institutionally the timing for such a project was right. By identifying and understanding the differences between the normal and cancer genomes of the same patient, investigators expect to learn how a normal blood cell transforms into leukemia, a normal brain cell turns into a brain tumor or a cell normally involved in bone growth leads to a bone tumor.

Success will mean not only a more detailed understanding of the key missteps that give rise to pediatric cancers, but also new tests to better match patients with treatments, new tools to identify high-risk patients, new uses for existing drugs and new targets for the next generation of cancer therapies. The project is a collaboration involving investigators at St. Jude and Washington University. Once PCGP data are validated, the information will be publically available to researchers worldwide. “We believe that from this foundation the advances of 21st century cancer diagnosis and treatment will come,” said Dr. William E. Evans, St. Jude director and CEO.

Although childhood cancers might look different, arise in different places and follow vastly different trajectories, all begin with a handful of key errors in a person’s genome. A genome is the instruction manual inherited from our parents and encoded in the DNA. DNA is organized into 23 pairs of chromosomes found inside nearly every cell. Evidence of the genome’s central role in cancer has been accumulating for decades. Technological and scientific advances mean scientists finally have the tools to not only find the mistakes, but also to identify the pathways those mistakes exploit to influence cell behavior, and then to translate the findings into new treatment and prevention tools.

The project met its first-year goal of sequencing the normal and cancer genomes of 50 childhood cancer patients. The normal and cancer genomes of another 250 young patients are scheduled to be sequenced the second year, followed by another 300 genome pairs during the third year. The cancers included so far represent some of the most challenging, including different types of leukemia, brain tumors and cancers of the bone, muscle and connective tissue known as sarcomas.

James Downing, MD, St. Jude scientific director, said the PCGP has already yielded exciting discoveries. Investigators identified complex new chromosomal rearrangements and several potential treatment targets in leukemia. The research has provided fresh insights into the origins of the eye tumor retinoblastoma, as well as the number of mutations, or changes, required for a cell to begin the unchecked cell growth that is a hallmark of all cancers. The international scientific community will also benefit from the new tools St. Jude scientists have developed for analyzing cancer genomes.

The DNA sequenced during the first year came from tumor and normal tissue donated earlier by St. Jude patients and stored in the hospital’s tissue bank. The sequencing is occurring at the Washington University Genome Center in St. Louis. But other elements of the project are the responsibility of St. Jude investigators. That work ranges from selecting the tumors to be included in the project and extracting the DNA for sequencing to developing the computational tools required to mine the data and conducting additional sequencing to gauge how often newly identified mutations occur in other young cancer patients. Altogether, the project’s first year united more than 100 St. Jude employees from across the institution, including the Comprehensive Cancer Center, the molecular diagnostics laboratory, the tissue bank, Information Sciences and the new PCGP validation laboratory. It also triggered a massive investment in computational resources, both people and hardware, to manage and mine the information generated.

With the project now in its second year, work continues in earnest to not only uncover the origins of childhood cancer but to quickly translate that scientific insight into lifesaving clinical tools. “As we go through this project, there will be more and more insights into these diseases and more data that will feed into the scientific community here and worldwide and lead to our ability to better treat these diseases,” Downing said.

The St. Jude Children’s Research Hospital – Washington University Pediatric Cancer Genome Project is the largest investment to date aimed at understanding the genetic origins of childhood cancers. Kay Jewelers, a long-standing supporter of St. Jude Children’s Research Hospital, has committed to providing $20 million as lead sponsor of this project. Your support now can help bring about a new frontier in understanding childhood cancer – a frontier which scientists believe could lead to new possibilities for diagnosing, treating and curing children with cancer. There are many opportunities for your support to make this exciting work possible. Join our most ambitious initiative ever with a gift to the Pediatric Cancer Genome Project. Call us at 1-800-395-1087.
Research Highlights

The current basic and clinical research at St. Jude includes work in gene therapy, bone marrow transplantation, chemotherapy, the biochemistry of normal and cancerous cells, radiation treatment, blood diseases, resistance to therapy, viruses, hereditary diseases, influenza, pediatric AIDS and the psychological effects of catastrophic illnesses. St. Jude also conducts biostatistical investigations on the long-term outcomes of its patients. Here are the highlights for Fiscal Year 2010:

CANCER GENOMICS

Comprehensive analysis suggests a handful of genetic mistakes are enough to launch AML
Proceedings of the National Academy of Sciences, August 2009
Senior author: James Downing, MD, Scientific Director
The most complete analysis yet of the genome of acute myeloid leukemia (AML) found surprisingly few genetic mistakes. St. Jude researchers directed the study, which suggests that unlike most cancers, AML requires relatively few inherited or acquired missteps to free the white blood cells where the cancer begins for the unchecked cell division that is a hallmark of the disease. Investigators said the findings underscore the need to survey the entire AML genome to gain a better understanding of the key genetic changes fueling different subtypes of this leukemia.

New chromosomal abnormality identified in leukemia associated with Down syndrome
Nature Genetics, November 2009
First author: Charles Mullighan, MD, PhD, Pathology
Work directed by St. Jude investigators identified a new chromosomal abnormality that appears to work together with a mutation in another gene to cause a subtype of acute lymphoblastic leukemia (ALL). The findings have already generated a new diagnostic test and might help explain why children with Down syndrome are more likely to develop ALL. Clinical trials are in the works targeting one of the altered genes.

Push to understand basis of childhood brain tumors leads to a new treatment target
Journal of Clinical Oncology, June 2010
Senior author: Suzanne Baker, PhD, Developmental Neurobiology
The most comprehensive analysis yet of childhood high-grade glioma found significant differences in the molecular features underlying the pediatric and adult forms of the cancer. St. Jude investigators helped direct the international effort, which highlighted the link between treatment advances and a more detailed understanding of the genetic changes driving the disease. In this study, investigators identified a gene named PDGFRA as unusually active in some of the childhood tumors. The gene is now the focus of a St. Jude Phase 1 safety study.

Scientists find inherited risk factors that increase the odds of ALL
Nature Genetics, September 2009
Senior author: Mary Relling, PharmD, Pharmaceutical Sciences chair
St. Jude scientists identified inherited variations in two genes that account for 37 percent of childhood acute lymphoblastic leukemia (ALL), including a gene that may help predict drug response. The findings stem from the first complete search of the human genome to look for inherited ALL risk factors. While investigators noted that variations in the genes ARID5B and IKZF1 alone were not enough to cause ALL, the work provides new insight into the missteps that give rise to this leukemia and the likelihood patients will benefit from certain medicines.
INFECTIOUS DISEASES

Bird flu strain primes brain for Parkinson’s disease
Proceedings of the National Academy of Sciences, August 2009
Senior author: Richard Smeyne, PhD, Developmental Neurobiology
At least one strain of the H5N1 bird flu virus leaves survivors at significantly increased risk for Parkinson’s disease and possibly other neurological problems later in life. St. Jude scientists reported that mice who survived the infection lost about 17 percent of the same brain cells lost in Parkinson’s. Researchers also found evidence of other changes associated with both Parkinson’s and Alzheimer’s diseases. Those disorders involve a loss of brain cells crucial for a variety of tasks, including movement.

Study links 1976 “swine flu” shot to stronger immune response to 21st century pandemic flu
Clinical Infectious Diseases, June 2010
First author: Jonathan A. McCullers, MD, Infectious Diseases
This study of 116 St. Jude employees and spouses age 55 and older found evidence that individuals immunized against “swine flu” in 1976 might have enjoyed some protection against the 2009 pandemic H1N1 influenza virus. St. Jude researchers found persons who received the 1976 vaccine mounted an enhanced immune response against both the 2009 pandemic H1N1 virus and a different H1N1 strain that circulated during the 2008-09 flu season.

IMMUNOLOGY AND IMMUNOTHERAPY

Researchers identify gene pivotal for immune system balance
Nature Immunology, August 2009
Senior author: Mark Bix, PhD, Immunology
A team led by St. Jude researchers identified Mina as a gene pivotal for immune balance, a discovery that may someday aid efforts to tame allergies and asthma. Investigators showed that Mina works by indirectly regulating production of interleukin 4 (IL-4), a type of chemical messenger. IL-4 plays a central role in easing or preventing certain diseases by balancing the supply of certain specialized immune cells called Type 2 T-helper cells.

Immune cell entry into the pancreatic islets key to understanding origins of type 1 diabetes
Immunity, October 2009
Senior author: Dario Vignali, PhD, Immunology vice chair
St. Jude researchers discovered how destructive immune cells gain access to insulin-producing cells and help cause type 1 diabetes. The findings point to possible new strategies to halt or prevent type 1 diabetes, a disease that is usually diagnosed in childhood and affects as many as 3 million Americans.

Distinct origins found for immune cells responding during autoimmune attack
Immunity, December 2009
Senior author: Terrence Geiger, MD, PhD, Pathology
St. Jude scientists reported that different sub-classes of a type of white blood cell involved in autoimmune diseases such as multiple sclerosis (MS) arise independently within the disease-fighting immune system. That finding provides new insight into how autoimmunity is controlled. The results will likely help investigators exploring treatments linked to balancing two types of immune cells, known as regulatory and effector T lymphocytes. Effector T cells promote disease and regulatory T cells protect against the misguided immune attack associated with illnesses like MS.

Study points to new role for donor natural killer cells
Journal of Clinical Oncology, February 2010
Senior author: Wing Leung, MD, PhD, Bone Marrow Transplantation and Cellular Therapy director
First author: Jeffrey Rubnitz, MD, PhD, Oncology
Powerful but rare immune cells taken from a parent might provide a safe, effective and affordable approach to preventing cancer’s return in children with acute myeloid leukemia (AML). That was the conclusion of a Phase 1 safety study conducted by St. Jude investigators. The finding is important because relapse is a key reason AML cure rates remain at 71 percent.

Study details machinery of immune protection against inflammatory diseases like colitis
Immunity, March 2010
Senior author: Thirumala-Devi Kanneganti, PhD, Immunology
Scientists reported that a protein made by a gene already associated with a handful of human inflammatory immune diseases plays a pivotal role in protecting the intestinal tract from colitis. The research, which was led by St. Jude investigators, points to possible new strategies for combating the disease. Colitis is a chronic inflammatory disorder that leads to colon damage. This study involves the body’s innate immune response, the branch of the immune system programmed to act immediately against a variety of threats, including cancer.
CLINICAL ONCOLOGY
Smarter use of existing treatment helps dramatically boost survival of young AML patients
Lancet Oncology, June 2010
Senior author: Dario Campana, MD, PhD, Oncology
First author: Jeffrey Rubnitz, MD, PhD, Oncology
A multicenter trial led by St. Jude investigators used more individualized therapy and better supportive care to help push the survival for children with acute myeloid leukemia to 71 percent three years after diagnosis. The results are among the best reported worldwide. Investigators are now working to create novel therapies to save even more lives.

New evidence that modern cancer treatment offers improved long-term survival
Journal of Clinical Oncology, March 2010
Senior author: Les Robison, PhD, Epidemiology and Cancer Control chair
First author: Gregory Armstrong, MD, Epidemiology and Cancer Control
Modern, risk-adapted therapies appear to reduce rates of late death among long-term survivors of childhood cancer. The analysis from St. Jude investigators was the first to show that patients in more recent eras, who likely received treatments tailored to risk status, are not only surviving their cancer, but are also less likely to die later of treatment-related complications. Researchers compared childhood cancer patients treated from 1974 to 1980 with patients treated from 1995 to 2000.

CHEMICAL BIOLOGY
Quest to find drugs targeting childhood cancer advances
Journal of Biological Chemistry, April 2010
Senior author: Michael Dyer, PhD, Developmental Neurobiology
Investigators led by St. Jude researchers believe they have identified the founding member of a chemical family they hope will lead to a new class of cancer drugs, the first designed specifically against a childhood tumor. The chemical is the first small-molecule inhibitor to target the MDMX protein. Excess MDMX is a hallmark of the childhood eye tumor retinoblastoma as well as certain cases of breast, lung, prostate and other cancers.

Scientific effort aims to jump-start progress against malaria
Nature, May 2010
Senior author: R. Kiplin Guy, PhD, Chemical Biology and Therapeutics chair
An international team led by St. Jude investigators screened a chemical library of nearly 310,000 compounds and identified more than 1,100 with confirmed activity against a malaria parasite that remains a leading killer of young children worldwide. The list of possible new agents included almost two dozen families of molecules, including one St. Jude investigators used to stop the parasite’s growth in mice. Along with publishing the results, investigators used a public database to freely share data generated by the six-year effort in hope of reviving interest of anti-malaria drug development.

BASIC BIOLOGY
Scientists track impact of DNA damage in the developing brain
Nature Neuroscience, August 2009
Senior author: Peter McKinnon, PhD, Genetics
St. Jude scientists led research demonstrating that switching off a key DNA repair system in the developing nervous system is linked to smaller brain size and other problems in brain structures vital to movement, memory and emotion. The work provided new insight into the workings and impact of the body’s system for repairing single strands of the double-stranded DNA molecule.

Research reveals lipid’s unexpected role in triggering death of brain cells
Molecular Cell, November 2009
Senior author: Alessandra d’Azzo, PhD, Genetics
The lipid that accumulates in the brain cells of individuals with an inherited enzyme disorder also drives neuronal cell death that is a hallmark of the disease. St. Jude scientists directed the
research, which provides the first evidence a lipid can initiate the apoptotic or suicide response in cells. The work focuses on a disorder called GM1-gangliosidosis, symptoms of which develop in childhood. Although the current outlook for patients remains bleak, researchers predict this discovery might have important implications for future therapies.

**St. Jude expands story of lymphatic development**

*Genes & Development, April 2010*

Senior author: Guillermo Oliver, PhD, Genetics

St. Jude investigators identified another gene, *Coup-TFII*, as playing an essential role in the developing lymphatic system. The finding advances understanding of how the important vascular network forms and might eventually lead to new strategies for treating lymphatic disorders or blocking cancer’s spread. Tumors use the lymphatic system’s network of organs, ducts and vessels to spread throughout the body.
St. Jude faculty and staff published more than 700 papers this year to share our research advances and basic science discoveries with the world.

Mary Relling, PharmD, Pharmaceutical Sciences chair, and Michael Kastan, MD, PhD, Comprehensive Cancer Center director, were elected to the Institute of Medicine (IOM), a branch of the National Academy of Sciences. They became the fifth and sixth members of the St. Jude faculty selected for inclusion in the IOM. New IOM members are elected annually through a highly selective process that recognizes important contributions made to the advancement of medical science, health care or public health. St. Jude has one of the highest numbers of IOM members among U.S. children’s hospitals.

Arthur Nienhuis, MD, Hematology, received the 2009 Mentor Award from the American Society of Hematology, the world’s largest professional society concerned with the causes and treatments of blood disorders. The award recognizes hematologists who have excelled at mentoring trainees and colleagues.

Charles Sherr, MD, PhD, co-chair of Genetics and Tumor Cell Biology and a Howard Hughes Medical Institute Investigator, was awarded the distinction of American Association for the Advancement of Science Fellow. The organization is the world’s largest general scientific society.

Ching-Hon Pui, MD, Oncology chair, was honored with the Clinical Excellence Award at the fifth annual National Physician of the Year Awards, organized by Castle Connolly Medical Ltd. The National Physician of the Year Awards honor physicians and the medical leadership of medical centers and hospitals who demonstrate an unwavering dedication to patients and to medicine as a whole.

The Clinical Excellence Award recognizes physicians who exemplify excellence in clinical medical practice.

Acclaimed virologist Robert Webster, PhD, Infectious Diseases, presented the 2010 Leeuwenhoek prize lecture, a prestigious recognition awarded by the Royal Society in London. The Leeuwenhoek Lecture recognizes excellence in the field of microbiology. The Royal Society, founded in 1660, is the world’s oldest scientific academy in continuous existence.

St. Jude was named the nation’s top children’s cancer hospital in the 2010-11 Best Children’s Hospital rankings published in U.S. News & World Report. St. Jude received the best overall score summarizing quality of care. The rankings were based on how well a hospital did in three areas: reputation; medical outcomes such as cancer survival; and care-related indicators of quality such as the number of patients, nursing staff and other factors.

Nurses and staff in the Intensive Care Unit were recognized by the American Association of Critical-Care Nurses with the Beacon Award for Critical Care Excellence. The award recognizes the nation’s top adult critical care, pediatric critical care and progressive care units. Fewer than 3 percent of the estimated 6,000 intensive care units in the United States have received the Beacon Award. St. Jude was the first intensive care unit in Tennessee to be recognized.

St. Jude was listed among the “Best Places to Work in Academia” by The Scientist magazine, making it the fourth consecutive year the institution has placed in the Top 10.

The Joint Commission Survey resulted in a “perfect score” for St. Jude with zero recommendations for improvement.
The following statistics are for the fiscal year ended June 30, 2010.

The number of patients who visited St. Jude in FY10 was 5,912. Unlike a general care hospital where the daily total equals total admissions, an active patient at a research hospital is one who is admitted to a research protocol (scientific treatment plan).

Each day, approximately 229 patients visited the hospital for clinic visits or for admission to one of the hospital’s 78 inpatient rooms. Some received induction therapy to achieve remission of their diseases while others underwent diagnostic or treatment procedures. During the course of their protocols, patients return to St. Jude for therapy, checkups, medication adjustments or crisis care.

During FY10 the total number of active patients was 7,492. The Primary Clinic Association for these patients was:

- Hematology Clinic: 45.5%
- Leukemia/Lymphoma Clinic: 14.97%
- Solid Tumor Clinic: 13.97%
- Neuro-oncology Clinic: 9.28%
- Infectious Disease: 5.55%
- Bone Marrow Transplant Clinic: 5.26%
- Radiation Oncology Clinic: 3.33%
- Immunology Clinic: 2.0%

Also in FY10, the number of patients assigned to the After Completion of Therapy Clinic was 1,373. These patients have completed therapy for their diseases and visit the hospital for periodic followups. Another 2,397 patients were considered St. Jude Alumni in FY10. Patients become alumni when they are 18 years old or their disease has been in remission for 10 years, whichever occurs later. And finally, there were 1,603 St. Jude Life patients. St. Jude Life patients participate in ongoing hospital studies of adult survivors of childhood cancer.

These categories cannot be totaled to determine an overall patient count due to the fact that an individual patient can hold more than one status for any given year. The distinct patient count for the four categories in FY10 was 12,466.

2010 Fiscal Year at a Glance
- Pharmacy doses dispensed – 592,383
- Diagnostic X-rays – 7,813
- Blood transfusions – 10,432
- Radiation treatments – 4,680
- CT scans – 5,989
- Radioisotope scans – 864
- Dental procedures – 4,753
- Dental encounters – 1,029
- Surgical cases – 1,649
- MRI exams – 9,313

The Scientific Advisory Board is an autonomous panel of renowned physicians and scientists. They foster the medical and scientific development of St. Jude Children’s Research Hospital by discussing ongoing and potential research projects with faculty members, reporting to the Board of Governors regarding institutional policy and oversight and advising the hospital director and scientific director on scientific policy decisions, appointments, research directions and clinical activities.

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- Professor
- Departments of Pediatrics/Human Oncology
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- David S. Eisenberg, PhD
- Investigator, HHMI
- Director UCLA-DOE Institute for Genomics and Proteomics
- Departments of Biological Chemistry and Chemistry
- University of California, Los Angeles

- Donald E. Ganem, MD
- Department of Microbiology and Immunology
- University of California, San Francisco
- G.W. Hooper Foundation

- Kathleen M. Giacomini, PhD
- Professor and Chair
- Department of Biopharmaceutical Sciences
- University of California, San Francisco

- Marilyn J. Hockenberry, PhD
- Director
- Center for Research and Evidence-Based Practice
- Nurse Scientist and Director of Nurse Practitioners
- Texas Children’s Hospital
- Professor, Department of Pediatrics
- Baylor College of Medicine

- William G. Kaelin, Jr., MD
- Professor
- Department of Medicine
- Dana-Farber Institute and Harvard Medical School Investigator
- Howard Hughes Medical Institute

- Theodore S. Lawrence, MD, PhD
- Isadore Lampe Professor and Chair
- Department of Radiation Oncology
- University of Michigan Medical School

- Michael P. Link, MD
- The Lydia J. Lee Professor of Pediatrics
- Chief, Division of Hematology/Oncology
- Stanford University School of Medicine
- Director, Center for Cancer and Blood Diseases
- Lucile Packard Children’s Hospital at Stanford

- John Quackenbush, PhD
- Professor of Biostatistics and Computational Biology
- Dana-Farber Cancer Institute

- Charles L. Sawyers, MD
- Chair, Human Oncology and Pathogenesis Program
- Memorial Sloan-Kettering Cancer Center

- Robert C. Shamberger, MD
- Robert E. Gross Professor of Surgery
- Harvard Medical School
- Chair, Department of Surgery
- Children’s Hospital Boston

- Louise C. Strong, MD
- Sue and Radcliffe Killam Chair
- Professor of Cancer Genetics
- Department of Cancer Genetics
- University of Texas M.D. Anderson Cancer Center

- Robert M. Stroud, PhD
- Chair Emeritus
- Biochemistry and Biophysics
- University of California, San Francisco

- James A. Wells, PhD
- Professor of Pharmaceutical Chemistry and Molecular and Cellular Pharmacology
- University of California, San Francisco
The International Outreach Program works with partners around the world as part of the St. Jude mission to improve the survival of children suffering from catastrophic diseases. There are St. Jude international partner sites in 15 countries.

**International Outreach Partner Sites**

**Brazil**
Unidad de Oncologia Pediatrica – Instituto Materno Infantil de Pernambuco; Centro de Hematologia e Oncologia Pediatrica (Recife)

**Chile**
Hospital Luis Calvo Mackenna (Santiago)

**China**
Shanghai Children's Medical Center (Shanghai)
Beijing Children's Hospital (Beijing)

**Costa Rica**
Hospital Nacional de Ninos (San Jose)

**Ecuador**
Hospital de la Sociedad de Lucha Contra el Cancer Nucleo de Quito (Quito)
Hospital de Ninos Baca Ortiz (Quito)

**El Salvador**
Hospital Benjamin Bloom (San Salvador)

**Guatemala**
Unidad Nacional de Oncologia Pediatrica (Guatemala City)

**Honduras**
Hospital Escuela Materno Infantil (Tegucigalpa)

**Ireland**
Our Lady's Hospital for Sick Children (Dublin)

**Jordan**
King Hussein Cancer Center (Amman)

**Lebanon**
American University of Beirut/Children's Cancer Center of Lebanon (Beirut)

**Mexico**
Hospital Pediatrico de Sinaloa (Culiacan)
Hospital Civil de Guadalajara (Guadalajara)

**Morocco**
Hospital d'Enfants (Rabat)
Hospital 20 Aout 1953 (Casablanca)

**Philippines**
Davao Medical Center

**Venezuela**
Hospital de Ninos J.M. de los Rios (Caracas)
Hospital de Especialidades Pediatricas (Maracaibo)
St. Jude Children’s Research Hospital is a national resource whose impact is felt throughout the world. St. Jude freely shares all research findings with the global medical and scientific community, and plays a critical leadership role in groundbreaking studies on childhood cancer, sickle cell disease and infectious diseases.

St. Jude Children’s Research Hospital has six clinic sites in its Domestic Affiliate Program. These clinics enroll patients on St. Jude protocols and participate in St. Jude research and treatment programs.

**Domestic Affiliate Sites**

**Baton Rouge, LA**  
Our Lady of the Lake Regional Medical Center  
Medical Director • Shelia L. Moore, MD  
Jeffrey E. Deyo, MD, PhD  
Andrea Dimond, MD  
Paige Patterson, RN, MSN, CPNP  
Jessica Templett, PA-C

**Huntsville, AL**  
Huntsville Hospital  
Medical Director • Lucille Ferrante, MD

**Johnson City, TN**  
Johnson City Medical Center  
East Tennessee State University  
Medical Director • David K. Kalwinsky, MD, Chair of Pediatrics  
Kathryn Klopfenstein, MD  
Kathleen Wetherell Griffin, RN, MSN, CPNP

**Peoria, IL**  
Children’s Hospital of Illinois (OSF Healthcare System)  
University of Illinois College of Medicine at Peoria  
Medical Director • Stephen Smith, MD  
Mohamad Al-Rahawan, MD  
Pedro de Alarcon, MD, Chair of Pediatrics  
Kay L. Saving, MD, Medical Director, CHOI

**Shreveport, LA**  
Feist-Weiller Cancer Center  
LSU Health Sciences Center  
Medical Director • Majed A. Jeroudi, MD  
Christine Odom, RN, MSN, FNP

**Springfield, MO**  
St. John’s Health System  
Medical Director • Remi Fasipe, MD

- St. Jude is home to the Childhood Cancer Survivor Study, a collaborative study among 30 U.S. and Canadian institutions that includes more than 20,000 childhood cancer survivors.

- St. Jude researchers are heading a national study on a treatment for sickle cell disease, which is funded by the National Heart, Lung, and Blood Institute of the National Cancer Institute and involves more than 20 major pediatric sickle cell disease centers.

- St. Jude is the national coordinating center for the National Cancer Institute–funded Pediatric Brain Tumor Consortium, a group of 10 top research institutions in the U.S. that are collaborating in the design and implementation of clinical trials and laboratory studies to further the understanding of childhood brain tumors.

- St. Jude is first and only pediatric cancer center to be designated as a Comprehensive Cancer Center by the National Cancer Institute.

- St. Jude is one of six Centers of Excellence for Influenza Research and Surveillance funded by the National Institute of Allergy and Infectious Diseases, part of the National Institutes of Health.
Excellence in Patient Care

St. Jude is committed to providing unsurpassed patient care, treating the whole child and not only a disease. This means doing everything possible to ensure that children enjoy as normal a life as possible while undergoing treatment and that top priority is given to the quality of a child’s life, during and after treatment.

In Fiscal Year 2010, St. Jude opened the doors to a newly renovated CVS Caremark Rehabilitation Services Center. Thanks to a generous gift from CVS/pharmacy, this facility helps St. Jude preserve the highest quality of life possible for its patients. In addition, the St. Jude School Program Presented by Target obtained a permanent home, providing spacious classrooms for that most normal of childhood activities: attending school.
“Families have entrusted their children’s care to our physicians since the birth of this institution, and we never lose sight of this tremendous responsibility. When we recruit physicians to come to work for St. Jude, we look for excellence in their respective areas.”

Dr. Joseph Laver, clinical director and executive vice president at St. Jude.
Renovated school makes the grade at St. Jude

Like many third-graders, Ryan loves her teacher. But for most of the past year, Ryan has not attended class in her hometown. Because she is a patient at St. Jude Children’s Research Hospital, Ryan has completed her school work under the tutelage of Michaela Shurden, a teacher in the St. Jude School Program Presented by Target.

Ryan is one of approximately 250 students who use the hospital’s academic services each year. Many of these children will be in Memphis for months or even years while undergoing treatment. The seven dedicated teachers at St. Jude help these patients continue their normal educational activities. For students who are thrust into an unfamiliar hospital environment, school offers a regular routine, a feeling of control and a sense of normalcy.

For the past couple of decades, the hospital’s school program has moved to various locations across campus. The school recently obtained a permanent home, thanks to the funding and vision of Target Corporation. The new facility offers spacious classrooms, a comfortable parent waiting area and new office space for teachers. The addition of a SMARTboard—an electronic, interactive whiteboard—makes learning even more fun for students. Elementary students may take spelling tests on the board, while high school students may use it to work algebra and geometry problems.

Usually, St. Jude teachers obtain textbooks and other materials from each child’s school. Assignments are faxed, mailed or e-mailed to the hospital. The St. Jude teacher then works with the student for at least three hours a week, assigning grades and mailing scores back to the home school.

In addition to academics, St. Jude teachers help students celebrate other traditional rites of passage, such as kindergarten and high school graduations and a formal dance for teens. School services do not cease when a student finishes treatment and prepares to return home. Because of fatigue or other issues, children may need to ease back into a regular school environment. That may mean having a part-time homebound teacher and attending school part time.

“We help parents and schools to understand those options and to access them,” says Laurie Leigh, the school’s director. “Then when the student is ready to go back full time, it helps them make that transition slowly without a lot of pressure that they really don’t need.”

When the student does return to the regular classroom, the hospital’s teachers and Child Life specialists may present a school reentry presentation for classmates. They plan the presentation with input from the patient. The program can include discussions of diagnosis and treatment and their side effects.

Leigh says the reentry presentation helps ease the transition into the classroom by demystifying the disease. “We help them understand that cancer is not contagious; that you don’t get cancer because you were bad,” she says. “If you explain things, then they accept it.”

Everyone knows that grades are not all-important. But to children like Ryan, the St. Jude School Program Presented by Target rates an A+.
Gingerbread houses delight patients, families
During the holiday season, St. Jude patients and their families created their own gingerbread houses with the help of Memphis-area chefs. Topped with candies, sprinkles, chocolates and icing, the houses were displayed throughout the holidays next to the large St. Jude Gingerbread House, created by the hospital’s Food Services staff.

Teens delight in chance to attend prom
Since 2007, the St. Jude Teen Formal has given patients and their siblings the opportunity to enjoy an important teenage milestone – attending the spring prom. The young people are treated to hair-styling and makeup, as well as gowns and tuxedos. Limousines then transport the teens to an unforgettable evening in the Danny Thomas/ALSAC Pavilion.

Children get into the Halloween spirit
The halls of St. Jude are transformed each year into a trick-or-treat extravaganza as employees decorate booths and clinical areas throughout the hospital. Employees plan months in advance, coming up with special themes and costumes of their own, so that patients and their siblings don’t miss out on the fun of Halloween.

Marking a key rite of passage
Kindergarten and high school graduations are notable occasions at St. Jude. As they embark on their education, the hospital’s youngest scholars don caps and gowns and receive diplomas during a special ceremony. A separate event honors the efforts of patients who completed their high school education while receiving treatment.
Siblings recognized for their support
Every year, St. Jude employees line the red carpet in front of the hospital’s Patient Care Center to cheer on the brothers and sisters of St. Jude patients. Sibling Star Day recognizes the important role that siblings play in patients’ healing process and puts the spotlight on these deserving youngsters.

Celebrating the silly in all of us
The competition and the giggles are fierce when patient families, faculty and staff participate in St. Jude’s annual Silly Field Day. The highlight of the day’s activities, which include an obstacle course and pie and bean bag tosses, is the aerosol string war that fills the air and everyone’s hair with streams of colored strings.

Teen art show impresses, inspires
St. Jude has turned a hallway in the Patient Care Center into a Teen Art Gallery, where the work of talented adolescent patients is displayed during the year. The colorful and powerful works of photography, group projects, drawings, sculptures and poetry are a moving testament to these teens’ journeys with catastrophic diseases.

Toys a part of auction fun
The nation’s top auctioneers bring their fast-talking skills to St. Jude every year, hosting a toy auction that lets St. Jude patients and their siblings “bid” on free toys and games. The kids also get to practice their own auctioneering skills with silly tongue-twisters at the event sponsored by the National Auctioneers Association.
Rehabilitation an integral part of St. Jude treatment

First-class patient care at St. Jude Children’s Research Hospital extends beyond the medical treatments that save the lives of children battling cancer and other deadly diseases. St. Jude clinicians treat the whole child, which includes providing care that ensures every patient will enjoy the highest quality of life possible.

One such example of this excellence in patient care is demonstrated daily in the CVS Caremark Rehabilitation Services Center at St. Jude. The facility provides comprehensive care and rehabilitation for infants, children and teenagers treated at the hospital.

A generous seven-year, $16 million gift from CVS/pharmacy, the retail division of CVS Caremark Corporation, a St. Jude Thanks and Giving® corporate partner, helped St. Jude to double the space dedicated to providing audiology, occupational therapy, physical therapy and speech-language pathology services to St. Jude patients.

It was the recognition that children battling cancer may experience developmental, cognitive, sensory or physical impairments as a result of their illnesses as well as the treatments used to save their lives that prompted CVS Caremark to make its commitment.

Construction on the 6,945-square-foot facility was completed in the summer of 2009. The new space features an open rehabilitation area; a separate fitness area; special infant rooms; a separate toddler room; private space dedicated to casting and fitting devices; testing areas for diagnosing hearing disorders and for the fitting and dispensing of hearing aids and other assistive devices; additional space and privacy during appointments for staff, patients and families, and new space for Social Work and Cardiopulmonary Services, among other features.

The new facility plays a critical role in helping St. Jude provide care that protects a child’s quality of life during treatment for catastrophic diseases. The interdisciplinary Rehabilitation Services team designs a systematic plan for each child to help patients adapt and improve functional abilities. Therapists on staff treat 65 to 75 patients a day for approximately 30 minutes during one or two visits per week. They use play, exercise and education to help each child break through the barriers that will lead to a healthy, happy life after treatment.

Therapists, children and parents work together to establish goals for the child in a family-centered approach. When possible, goals of strength, balance and coordination are met through play or recreational activities.

The Rehabilitation Services expansion builds on the hospital’s history of providing first-rate services to St. Jude patients. It’s also the beginning of a long-term vision to continue to enhance the department’s clinical care, research and educational capabilities in order to become a world leader in pediatric oncology rehabilitation education.
Millions of people throughout the country and around the world have embraced the St. Jude mission of finding cures and saving children. The continued support of these dedicated and compassionate volunteers, donors and corporate partners help St. Jude remain a beacon of hope to families in communities everywhere.

Thanks to their generosity, ALSAC raised $685 million in Fiscal Year 2010 to meet the needs of St. Jude.
“Our work is not done. Because the truth is that our success is not really measured in the dollars we bring. It’s measured in children’s lives.”

Richard C. Shadyac Jr., CEO of ALSAC
Public Support

Gift Planning
Gift Planning identifies, cultivates and stewards some of the hospital’s most dedicated and generous donors in their wishes to make major commitments in support of St. Jude. Gift Planning develops strong, enduring relationships with donors and works closely with their financial advisors when appropriate to help them achieve their charitable goals through annual major gifts as well as estate planning.

Individuals who make legacy gifts to St. Jude through bequests, charitable gift annuities, trusts, gifts of life insurance, or other planned gifts are recognized for their commitment through membership in the Danny Thomas – St. Jude Society. Current membership exceeds 8,000. Last year Gift Planning hosted 44 appreciation luncheons across the country for these dedicated donors.

The division also cultivates gifts from other sources, including family, corporate and community foundations. Gift Planning’s donor-centered approach matches donor interests with hospital needs for today and the future.

Gift Planning’s philanthropic team in the field made more than 29,000 personal calls and visits to donors last year. Staff at the national office also made more than 38,000 calls to donors who gave $500 or more, personally expressing our appreciation for their generosity and support.

National Direct Marketing
Direct mail has traditionally been one of St. Jude's most effective fundraising tools. More than 140 million mail pieces are sent to donors and prospective donors each year. As a result, St. Jude acquires more than 1 million new donors each year.

Direct mail is also used to reach our more than 6 million active donors who make an average direct mail gift of about $30. This includes more than 450,000 Partners In Hope donors who make monthly gifts to St. Jude and receive monthly patient and hospital updates.

The St. Jude story is brought to millions of households each year through national television marketing and a one-hour reality television special. The show, hosted by St. Jude National Outreach Director Marlo Thomas, gives viewers an in-depth look into the lives of St. Jude patients and their families during their care and treatment at St. Jude. The special airs approximately 2,400 times in almost 210 markets nationwide, resulting in more than 90,000 new monthly donors annually.

The generosity and loyalty of donors acquired and cultivated through direct marketing channels provides a strong foundation for supporting the lifesaving mission of St. Jude.

Corporate Alliances
The Corporate Alliances division forms long-term partnerships with corporations to support the mission of St. Jude, meeting their diverse philanthropic needs through traditional charitable giving, cause-related marketing programs, employee giving, event sponsorship, in-kind donations, matching gifts and volunteer opportunities.

Corporate Alliances’ most visible national campaign, Thanks and Giving®, occurs from November through December. Through an unprecedented coming together of celebrities, media and corporate partners, the campaign reaches millions of Americans with its signature call to action – “Give thanks for the healthy kids in your life, and give to those who are not.”

To assist our partners in their fundraising efforts, Corporate Alliances hosts summits each year that offer relevant, industry-specific educational sessions as well as networking opportunities and reinforcement of the St. Jude mission. Partners leave with invaluable knowledge, energized for their upcoming fundraising campaigns to benefit St. Jude.

St. Jude is very proud to be affiliated with such exceptional corporate partners, and extremely grateful for their many accomplishments on behalf of St. Jude. Some of these partners include Kmart, Chili’s Grill & Bar, CVS/pharmacy, DICK’s Sporting Goods, Kay Jewelers, Williams-Sonoma Inc., ANN INC., Domino’s, AutoZone, New York & Company and Target.
Field Operations
Field Operations works with volunteer committees and event coordinators in grass-roots fundraising events that reach a broad spectrum of the American public. Through their efforts, generous supporters responded to appeals to donate $1 in our thriving Halloween pin-up promotion with MillerCoors and the new Give thanks. Give hope. campaign. Supporters gave $100 for a chance to win a house through our growing St. Jude Dream Home Giveaway® campaign, and participated in such fundraising events as galas and golf tournaments.

Students in high school and college raised millions to help fund our search for cures through Team Up for St. Jude, Up ‘til Dawn®, Tri Delta Sincerely Yours and other collegiate partnerships. St. Jude Heroes continued to run, walk, swim and bike for our young cancer patients by participating in challenging sporting events, including the St. Jude Memphis Marathon Weekend, which drew a sell-out crowd of 16,000 registrants in December 2009. In March, Hoops for St. Jude allowed players and NBA fans to join together to help St. Jude.

To kick off the Thanks and Giving® season, Field Operations conducted Give thanks. Walk. events in 40 communities throughout America. More than 350 radio stations continued their remarkable support by recruiting tens of thousands of new monthly donors through Country Cares for

St. Jude Kids®, Promesa y Esperanza, and Radio Cares radiothons. And the members of Kappa Alpha Psi Fraternity Inc., through their vibrant Sunday of Hope campaign, reached a major milestone, raising $1 million since they chose St. Jude as their national philanthropic partner in 2005.

These local and regional events are organized by thousands of volunteers and supported by our 32 field offices located across the country. Field Operations is honored to support such dedicated individuals who work tirelessly to heighten public awareness and support for our fight against childhood cancer.

ALSAC operational divisions
ALSAC’s Donor Care division works diligently to keep St. Jude donors happy. The division is committed to enhancing the donor experience and retaining St. Jude’s valued donor base. Call Center Operations connects with volunteers and donors to develop and enhance the volunteer coordinator experience and expand new and ongoing fundraising programs. The Marketing Division works across ALSAC providing creative services to fundraising campaigns, helping protect the St. Jude brand and increasing public awareness of the St. Jude mission. Human Resources seeks to attract, inspire and retain world-class talent to advance the work of ALSAC in support of St. Jude. ALSAC’s Legal Department provides legal guidance for fundraising activities including contract negotiations and review, trust and estate administration, trademark review and protecting St. Jude from unauthorized fundraising activities. Information Technology Services works to keep ALSAC in the forefront of information and fundraising technology. Finance and Administration carefully stewards our donor’s dollars, making sure that ALSAC works as efficiently and economically as possible.

To each coordinator, participant, and donor, we say “thank you” for sustaining the patients and families of St. Jude.
Why support St. Jude?

The support of caring people helps ensure that St. Jude Children's Research Hospital will continue its lifesaving mission of finding cures and saving children. It costs $1.6 million a day to operate St. Jude, and public donations provide more than 70 percent of our funding. But the most important reason is, in the words of St. Jude founder Danny Thomas: “No child should die in the dawn of life.”

How do your donations help?

- Thanks to donors, St. Jude families never pay for treatment not covered by insurance, and no child is ever denied treatment because of the family’s inability to pay.

- Your donations also help St. Jude cover other costs a family typically incurs while their child is being treated at the hospital, including travel, housing and food.

- At St. Jude, donor dollars help fuel the groundbreaking research that leads to pioneering care and treatments for childhood cancer and other deadly diseases.

How is St. Jude making a difference for sick children?

- Every child saved at St. Jude means children saved around the world—a direct result of cutting-edge research and treatment that set the standard in treating childhood cancers. Our discoveries are shared freely with doctors and scientists all over the world.

- St. Jude developed protocols that have helped push overall survival rates for childhood cancers from less than 20 percent, when the hospital opened in 1962, to 80 percent today.

- St. Jude is the first and only pediatric cancer center to be designated as a Comprehensive Cancer Center by the National Cancer Institute.

- St. Jude has embarked on an unprecedented effort to sequence the pediatric cancer genome and to identify the genetic changes that give rise to some of the world’s deadliest childhood cancers (read more on page 11).

How are donations used?

- During the past five years, 81 cents of every dollar received has supported the research and treatment of St. Jude Children's Research Hospital.
Leadership

Excellence in Leadership

The lights at St. Jude are always on, reflecting the dedication of the entire St. Jude family to finding the cures that will save the lives of children. The leadership, the employees and the Board members and supporters of St. Jude and ALSAC are deeply committed to this mission, giving tirelessly of their time and talent.

The members of the ALSAC/St. Jude Boards of Directors and Governors serve voluntarily and without compensation. Leaders in business, industry and entertainment volunteer their guidance. Examples of excellence are set by the leadership and staff of St. Jude and ALSAC each day as they continue the fight against catastrophic childhood diseases.
“In the final analysis, this is the main reason all of us, staff, scientists, board and ALSAC are here: love, and the sharing of a dream, and for our efforts we’ve been rewarded a thousand times over.”

Edward F. Barry, first Board chairman
The same volunteers serve without compensation on the ALSAC Board of Directors and the St. Jude Board of Governors of St. Jude Children’s Research Hospital. In 1989, the Boards of Directors and Governors created an honorary body to recognize distinguished service on the Board by those unable to continue to actively participate. These emeritus members are entitled to all privileges of Board members and may participate as they are able, but they do not vote.


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Joseph A.
The Professional Advisory Board

The Professional Advisory Board consists of volunteers – leaders in their fields – who provide guidance and support for ALSAC’s fundraising efforts. Historically, the Board has met twice a year in Memphis, where members received medical briefings and discusses strategic fundraising issues and ways to better enable ALSAC and St. Jude to fulfill their mission. The Professional Advisory Board ended its service to ALSAC/St. Jude in FY2010 and two new advisory groups have since replaced it.

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International Association of Machinists and Aerospace Workers
Upper Marlboro, Maryland

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Buttafuoco, Arce & Price
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Philadelphia, Pennsylvania

Capt. Scott F. O’Grady
U.S. Air Force (Inactive Reserves)
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Blue Cross Blue Shield Association
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The Racquet Club of Memphis
Memphis, Tennessee
The Hospital
St. Jude Children’s Research Hospital, which opened in 1962, is one of the world’s premier pediatric cancer research centers. Its mission is to advance cures, and means of prevention, for pediatric catastrophic diseases through research and treatment. Consistent with the vision of our founder Danny Thomas, no child is denied treatment based on race, religion or a family’s inability to pay. Children from all 50 states and around the world have come through the doors of St. Jude for treatment, and thousands more around the world have benefited from the knowledge gleaned from the research conducted.

Fundraising
ALSAC was incorporated in 1957 and exists for the sole purposes of raising the funds and building awareness to sustain the mission of St. Jude. During the past five years, 81 cents of every dollar received has supported the research and treatment at St. Jude.

The National Executive Office (NEO) in Memphis, Tennessee, provides professional knowledge and administrative support for ALSAC’s fundraising operation. ALSAC’s regional offices coordinate volunteer activities in various states. In addition, two Volunteer Service Centers handle telephone recruitment of volunteers for ALSAC’s community development programs. Oversight of ALSAC’s regional offices and chapters is provided by NEO, and a centralized accounting system ensures the proper stewardship of donations to St. Jude.

Financial Categories Defined
The financial highlights on page 45 broadly reflect the source of ALSAC/St. Jude’s income and expenses. The following explains these categories in greater detail. Full copies of the audited financials can be obtained by calling 1-800-822-6344 or writing to annual.report@stjude.org.

Patient care services consist of all care needed for active patients of St. Jude. For example, for a child with acute lymphoblastic leukemia, the most common form of childhood cancer, a successful course of treatment would consist of two to three years of active therapy.

Initial therapy to induce remission (absence of cancer cells) requires about four to eight weeks of hospitalization or a succession of outpatient visits. In general, most children receive their treatments in the hospital’s clinics rather than being confined to hospital beds.

Once remission is achieved, the patient’s chemotherapy treatments may be overseen by a St. Jude doctor, or by the patient’s doctor in his or her home community, using drugs provided by the hospital. The length of time between clinic visits depends upon the patient’s progress.

The same system is used for treatment at St. Jude affiliates in Peoria, Illinois; Johnson City, Tennessee; Baton Rouge, Louisiana; Shreveport, Louisiana; Huntsville, Alabama; and Springfield, Missouri. Patients remain active in the research protocol through periodic checkups in the clinic for 10 years or until age 18, whichever comes later. After that, patients become alumni and are followed annually by mail or telephone. Former St. Jude patients also can choose to participate in the St. Jude Life study for adult survivors of childhood cancer. Children with other kinds of cancer may require more or less intensive therapy depending upon the guidelines for that particular treatment program.

Children must meet the following medical criteria for acceptance to St. Jude: They must have a disease currently under study; they must be referred by their physicians; normally they must be no older than 18 years of age; and, except in certain cases, they must not have received prior extensive treatment at another institution. Once accepted, all St. Jude patients are treated regardless of ability to pay. St. Jude is the only pediatric cancer research center where families never pay for treatments not covered by insurance. No child is ever denied treatment because of a family’s inability to pay.

Research expenditures consist of clinical and laboratory research and research services. Clinical research expenses are those incurred by St. Jude physicians in the treatment of patients. These expenses cover laboratories, technicians, supplies and staff salaries needed to evaluate data acquired from medical services provided to patients or clinical laboratory trials. Laboratory research expenses are those incurred through the hospital’s basic biomedical science programs. St. Jude’s state-of-the-art laboratories offer an ideal environment for the scientist interested in molecular genetic research of childhood cancer. Learning more about the genes that cause disease will lead to the discovery of new ways to improve their treatment, particularly for childhood cancers. Research at St. Jude is also aimed at finding more effective anti-cancer drugs, better ways to treat hematologic diseases, such as sickle cell disease, and infectious diseases; and more efficient and safer methods of administering treatments. Research expenses include the medical library, computer links to the National Cancer Institute and other services directly associated with research.

Education, training and community service expenses represent the costs of the continuing efforts of St. Jude staff to inform general and specialized audiences about research and treatment procedures and advances being made in the area of childhood catastrophic diseases. This is being done through printed materials, speeches, video presentations and seminars to professional associations, civic organizations and other groups. The hospital also offers a diverse training environment to qualified physicians, nurses and predoctoral research fellows. Emphasis is on basic biomedical sciences, pediatric hematology-oncology and childhood cancer nursing.

Fundraising expenses represent all costs associated with efforts to obtain donations for the hospital.

Administrative and general expenses represent the supporting services that St. Jude and ALSAC require for all activities, including program services. Utilities and housekeeping expenses, although necessary to research and patient care, are considered to be administrative expenses.
## ALSAC/St. Jude Children’s Research Hospital
### Combined Financial Highlights for Fiscal Year 2010

**Years Ended June 30 (in thousands)**

<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Revenues</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Support</td>
<td>$685,290</td>
<td>$681,904</td>
</tr>
<tr>
<td>Net Patient Services Revenue</td>
<td>83,759</td>
<td>81,712</td>
</tr>
<tr>
<td>Research Grants</td>
<td>89,185</td>
<td>82,329</td>
</tr>
<tr>
<td>Net Investment Income (Lost)</td>
<td>183,753</td>
<td>(368,351)</td>
</tr>
<tr>
<td>Other</td>
<td>9,636</td>
<td>9,400</td>
</tr>
<tr>
<td><strong>TOTAL REVENUES</strong></td>
<td>1,051,623</td>
<td>486,994</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Expenses</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Program Expenses</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Patient Care Services</td>
<td>274,815</td>
<td>237,943</td>
</tr>
<tr>
<td>Research</td>
<td>286,874</td>
<td>282,467</td>
</tr>
<tr>
<td>Education, Training and Community Support</td>
<td>47,341</td>
<td>60,657</td>
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<tr>
<td><strong>TOTAL PROGRAM EXPENSES</strong></td>
<td>609,030</td>
<td>581,067</td>
</tr>
<tr>
<td>Fundraising</td>
<td>145,474</td>
<td>134,656</td>
</tr>
<tr>
<td>Administrative and General</td>
<td>80,241</td>
<td>77,104</td>
</tr>
<tr>
<td><strong>TOTAL EXPENSES</strong></td>
<td>834,745</td>
<td>792,827</td>
</tr>
<tr>
<td>Gain (loss) on Disposal of Property and Equipment</td>
<td>(622)</td>
<td>(2,884)</td>
</tr>
<tr>
<td>Change in Net Assets</td>
<td>216,256</td>
<td>(308,717)</td>
</tr>
<tr>
<td>Beginning Net Assets</td>
<td>1,907,014</td>
<td>2,215,731</td>
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<tr>
<td>Ending Net Assets</td>
<td>2,123,270</td>
<td>1,907,014</td>
</tr>
</tbody>
</table>
St. Jude Executive Committee

Dr. William E. Evans
Director and Chief Executive Officer

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Shared Services

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and Volunteer Service Centers