



PROSTATE CANCER
FOUNDATION

Global Enterprise & Partnership

Advancing Patient-Centered Science



2011 Progress Report



PROSTATE CANCER FOUNDATION

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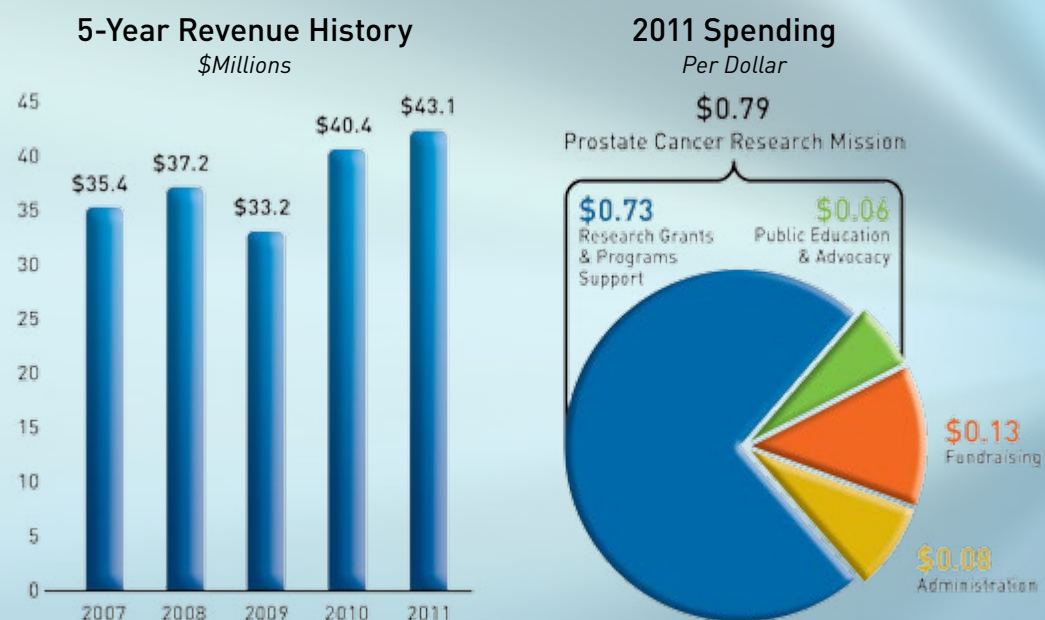
Expanding Global Research & Partnership

Since our founding, we have worked to build a vibrant global research enterprise by investing in human capital and strategic partnerships to fast-forward the ongoing advancement of prostate cancer science. We continue to expand these efforts and celebrate the recent establishment of the Coalition to Cure Prostate Cancer in Canada and our PCF China initiatives.

The Prostate Cancer Foundation (PCF) is the world's largest private funder of prostate cancer research, accelerating the world's most promising research and delivering better patient outcomes. In the past 2 years, 5 new medicines that extend the lives of men with metastatic prostate cancer have been approved by the FDA. PCF initiated and supported academic treatment science that fast-forwarded every one of these approvals.

Since 1993, PCF donors have given over \$479 million to fund more than 1,600 research projects at nearly 200 institutions in 15 countries. Our continually expanding global research enterprise brings together the brightest minds in prostate cancer research and other scientific areas to collaborate across borders and institutional lines. Together, we spark and accelerate innovative projects that deliver life-saving results.

PCF is widely acknowledged as the source of hope for more than 16 million men and their families around the world who are affected by prostate cancer. In 2011, our patient-centered science made important advances toward overtreating less and curing more so we can ultimately eliminate death and suffering from prostate cancer for **every** man affected. In 2012, our progress continues.



EXPANDING GLOBAL RESEARCH & PARTNERSHIP



PCF China Committee members visited the Beijing Genomics Institute in Shenzhen in March 2012.

Dear Friends:

Men diagnosed with prostate cancer have more reason for hope than ever before. Progress funded and accelerated by the Prostate Cancer Foundation means they can expect to live longer, more productive lives. We are closer than ever to living in an age when prostate cancer is considered a chronic condition, not a life-threatening disease.

Just two decades ago, the outlook for this disease was much different. In the early 1990s, many health analysts were predicting that—with the aging of the baby boomers—prostate cancer would soon kill far greater numbers of American men than the more than 40,000 who succumbed each year. Thanks to research here and around the world—and to increased awareness, both largely driven by PCF—the reality is much brighter. Today, prostate cancer claims at least 40 percent fewer lives than had been predicted.

And the outlook gets brighter every day. Over the past two years, four new treatments were approved to treat prostate cancer: Provenge (Dendreon), Zytiga (Janssen Pharmaceuticals, a Johnson & Johnson company), Xgeva (Amgen) and Jevtana (Sanofi-Aventis). Today, 97 drugs are in Phase I or II trials, and four more PCF-supported therapeutics are rapidly working their way through Phase III clinical trials:

- **Alpharadin** (radium-223 chloride by Algeta and Bayer Pharma AG), a novel radiotherapy that disperses small amounts of radiation to kill metastasized cells while sparing healthy cells;

- **Ipilimumab** (Yervoy by Bristol-Myers Squibb), an immunotherapy that has already proven effective for melanoma patients and may soon be available for prostate cancer patients.
- **MDV3100** (Enzalutamide by Medivation and Astellas Pharma), which inhibits the androgen signaling pathway and has shown a 37 percent reduction in the risk of death compared to placebo; and
- **XL184** (Cabozantinib by Exelixis), an orally administered tyrosine kinase inhibitor (TKI) that shows unprecedented promise in reducing bone metastases for many patients;

Thinking Globally

PCF expanded its global research network and partnerships in 2011 through two important steps: the establishment of the Coalition to Cure Prostate Cancer (CCPC) in Canada and the launch of PCF China.

The Canadian entity will monitor national research progress at Canadian cancer centers and universities, and it will provide benefits for Canadian donors, enabling us to use transformational gifts to expand research efforts.

Our China initiative will identify, fund and promote innovative research projects benefitting men around the world. China historically had low rates of the disease, but the number of new cases is rising in urban centers where Chinese men are adopting more Westernized lifestyles; and when the disease does strike, it's often more virulent and aggressive. The Chinese government

is thus committed to investing in and expanding its prostate cancer research efforts; not only is this good for China, but it also provides a unique opportunity to study the effects of diet and environmental changes on prostate cancer incidence worldwide. In March 2012, we presented our first two Young Investigator awards to Chinese scientists at the inaugural China Prostate Cancer Symposium in Beijing. Moving forward, we'll work with established Chinese institutions such as the Chinese Urological Association to expand cancer research and encourage sustainable collaborations.

Closer to home, PCF announced the first prostate cancer research Dream Teams in April 2012, funded jointly by PCF and Stand Up to Cancer, in association with the American Association for Cancer Research. These three-year, \$10 million Translational Cancer Research Grants provide funding to address therapeutic interventions in advanced metastatic prostate cancer. This global competition resulted in the selection of two teams of researchers: one led by Dr. Charles Sawyers at New York's Memorial Sloan-Kettering Cancer Center (MSKCC) and Dr. Arul Chinnaiyan at the University of Michigan, Ann Arbor and the second led by Dr. Eric Small at UCSF and Dr. Owen Witte at UCLA. All four received PCF research awards earlier in their careers.

The Michigan-MSKCC Dream Team will focus on precision therapy for metastatic prostate cancer. The UCSF-UCLA team, funded in part by Movember—an annual campaign that raises awareness and funding for men's health issues—will investigate pathways of treatment resistance and identify new treatment approaches. We are pleased that Paul Villanti, Movember's first chairman, joined our Board of Directors in 2011.

Our emphasis on global collaboration and our support of public-private partnerships continue to accelerate discovery and expand access to patient information, leading to highly personalized treatment plans so we can overtreat less and cure more.

New Donors, New Ways to Support PCF

The PCF team enhanced our digital footprint considerably in 2011. Unique visits to pcf.org were up 10 percent. Facebook followers were up 30 percent, and PCF reached more than 5 million through its Facebook community. Our list of Twitter followers increased 10 percent. The world is taking note of our work.

In 2011, 54,000 PCF donors—including 24,000 new supporters—contributed \$43.1 million to maintain the momentum of discovery. Since 1993, 170,000 donors have contributed \$479 million to support more than

1,600 patient-centered research projects in genomics, epigenetics, drug development, biomarkers, immunology, imaging technologies and nutritional research.

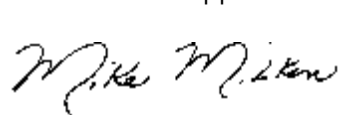
Thanks to generous support, last year PCF invested in 10 new Challenge Awards, 14 Creativity Awards and 24 new Young Investigator Awards. By early 2012, we announced 21 additional Young Investigators, bringing the total since 2007 to 95. The innovative thinking of our Young Investigators—and their drive to achieve the impossible—continues to accelerate progress against prostate and other cancers. We're proud to have cultivated one of the largest and most productive teams of cancer researchers ever assembled.

We Are Not Letting Up


We continue to advocate for increased national commitments to medical research where, with greater investment, we can save millions of lives and trillions of dollars. For example, the National Cancer Institute estimates that a 20 percent reduction in cancer mortality would be worth \$20 trillion to the U.S. economy—far more than the national debt.

PCF remains a *source of hope* for all men and their families. With your continued support, we will move patient-focused science forward even faster. Together, we can and will speed progress toward ending the suffering and death caused by this devastating disease.

With sincere appreciation,



Michael Milken
Founder and Chairman



Jonathan W. Simons, MD
President and
Chief Executive Officer
David H. Koch Chair



Jonathan Simons, MD (left), and Mike Milken at the launch of PCF China in Beijing

95 PCF YOUNG INVESTIGATORS IN 7 COUNTRIES

Changing the Future of Prostate Cancer Research

In 2011 and early 2012, through the generosity of its donors, PCF added 45 new Young Investigators (YIs) to its global research enterprise. These young scientists are bringing fresh ideas and approaches to bear on pivotal aspects of prostate cancer research. They represent the future leaders in research. In total, PCF has funded nearly 100 Young Investigators since 2007.

Advances in healthcare have accounted for as much as half of all economic growth in the past several decades. Today, investments in medical research promise the greatest long-term economic stimulus and the greatest hope for patients. As previously stated, the National Cancer Institute estimates that if research could reduce the cancer death rate by 20 percent, it would add \$20 trillion to the U.S. economy.

This kind of progress often emerges from the fertile minds of young researchers. Einstein, Salk, Curie, Watson, Newton, Galileo and others reshaped history by age 30. Yet, today's young medical investigators receive only one percent of federal research funding, down from 10 percent in 1980. Last year, more federal grants went to researchers older than 70 than to those younger than 30.

Since 1993, the Prostate Cancer Foundation has supported three generations of young investigators dedicated to accelerating scientific discovery. The first two generations, sponsored between 1993 and 2006, have been involved in every significant prostate cancer breakthrough. Many of them now lead major medical centers.

In 2007, PCF launched a third generation of YIs with a goal of funding 100 researchers by the end of 2012.

Young Thinkers Delivering Game-Changing Discoveries

PCF YIs, typically under age 35, are innovative research leaders who are moving prostate cancer research toward cures. Our Young Investigator Awards offer career and project support for early career researchers who have achieved junior faculty positions and are committing their lives to the field of prostate cancer. Each YI is mentored by a recognized senior investigator.

In the first part of 2012, we announced our first two YIs in China and four new YIs in Canada.

Three generations of PCF YIs have built a foundation of knowledge upon which future scientists and clinicians can expand discovery. They represent a distinguished community of scientific mentors who can guide and inspire the work of future generations of cancer researchers.

Here are a few recent examples of Young Investigator discoveries that are improving clinical practice for this disease.



- **Scott Tomlins, MD, PhD (2007 YI)**, at the University of Michigan, developed a simple urine test that can detect cancer earlier and eliminate thousands of unneeded biopsies each year.




- **Steve Cho, MD (2008 YI)**, at Johns Hopkins School of Medicine, created a molecular imaging technology that can see smaller tumors earlier than current CT and x-ray imaging systems.



- **Himisha Beltran, MD (2010 YI)**, at Weill Cornell Medical College, discovered an unanticipated pathway (aurora kinase) active in the most lethal variety of high-grade prostate cancer and is developing new specific treatments with drugs in development targeting prostate, colon and lung cancers.



- **Robert Den, MD (2010 YI)**, at Thomas Jefferson University, deciphered a cause of resistance to radiation therapy.

These are not just novel ideas. They are real, life-saving discoveries made possible by our generous supporters. 

45 NEW YOUNG INVESTIGATORS IN 2011 & 2012



Joshi Alumkal, MD – 2011

Oregon Health and Science University,
Knight Cancer Institute
Donors: John and Jana Scarpa–
The John F. Scarpa Foundation



David L. Bajor, MD – 2011

University of Pennsylvania
Donors: Reina and Emilio Bassini



Christopher Barbieri, MD, PhD – 2011

Weill Cornell Medical College
Donors: Peter and Laurie Grauer



Tarek Bismar, MD – 2012

University of Calgary
Donor: The Robbins Family



John Chadwick Brenner, MSc, PhD – 2011

University of Michigan, Ann Arbor
Donors: Cayre Family Foundation,
Mr. and Mrs. Albert Fuss, Robert Kraft



Dimple Chakravarty, PhD, DVM – 2012

Weill Cornell Medical College
Donor: Sternlicht Family Foundation



Yu Chen, MD, PhD – 2011

Memorial Sloan-Kettering Cancer Center
Donors: David H. and Julia Koch



Matthew Cooperberg, MD – 2011

University of California, San Francisco
Donors: Judy and Ronald Baron



Farshid Dayyani, MD, PhD – 2011

The University of Texas
MD Anderson Cancer Center
Donor: John H. Tyson



Junjie Feng, PhD – 2012

Wake Forest University
Donors: John A. and Carol Moran



Stephen Finn, MBBS, PhD – 2012

Trinity College Dublin, Institute of
Molecular Medicine
Donor: Steve Wynn



Terence Friedlander, MD – 2012

University of California, San Francisco
Donor: Lowell Milken



Matthew Galsky, MD – 2012

Mount Sinai School of Medicine
Donor: Mortimer Sackler



Andrew Goldstein, PhD – 2011

University of California, Los Angeles
Donors: Todd Boehly, Bonnie Pfeifer Evans,
Joe and Ali Torre



Michael Haffner, MD – 2011

Johns Hopkins School of Medicine
Donors: Ellen and Richard V. Sandler



Corinne Joshu, PhD – 2011

Johns Hopkins School of Medicine
Donor: Kovler Family Foundation



Anthony Michael Joshua, MBBS, PhD – 2012

Princess Margaret Hospital
Donor: Pier Luigi Tolaini



Kalpana Kannan, PhD – 2012

Baylor College of Medicine
Donors: Leon and Debra Black



Maria Karlou, PhD – 2011

University of Athens
Donor: PCF-Hellenic Fund



Stacey Kenfield, ScD – 2012

Brigham and Women's Hospital,
Harvard University
Donor: Michael Milken



Hung-Ming Lam, PhD – 2012

University of Cincinnati
Donor: Steve Wynn



Jihyun Lee, PhD – 2011

University of Pennsylvania
Donor: Ben Franklin Award



Richard Lee, MD, PhD – 2011

Massachusetts General Hospital Cancer Center
Donors: Alexandra M. and Steven A. Cohen



Barbara Lelj-Garolla Di Bard, PhD – 2012

Vancouver Prostate Centre
Donor: Pier Luigi Tolaini



Shyh-Dar Li, PhD – 2012

Ontario Institute for Cancer Research
Donor: Pier Luigi Tolaini



Tamara Lotan, MD – 2011

Johns Hopkins School of Medicine
Donor: Elaine Wynn



Heather Montie, PhD – 2012

Thomas Jefferson University,
Jefferson Medical College
Donors: John A. and Carol Moran



David Mulholland, PhD – 2012

University of California, Los Angeles
Donor: Lori Milken



Paul Nguyen, MD – 2012

Dana-Farber Cancer Institute,
Harvard University
Donor: Heritage Medical Research Institute



Kathryn L. Penney, ScD – 2011

Harvard Medical School
In Honor of Joel M. Pashcow



Antoinette Perry, PhD – 2011

Trinity College Dublin, Institute of
Molecular Medicine
Donor: The Handler Family Fund



Dana Rathkopf, MD – 2011

Memorial Sloan-Kettering Cancer Center
Donor: Lori Milken



Shancheng Ren, MD, PhD – 2012

Shanghai Changhai Hospital
Donor: Shmuel Meitar



Sameek Roychowdhury, MD, PhD – 2011

University of Michigan, Ann Arbor
Donor: Foundation 14



Luke Selth, PhD – 2012

University of Adelaide, Dame Roma Mitchell
Cancer Research Laboratories
Donor: Foundation 14



Karen Sfanos, PhD – 2012

Johns Hopkins School of Medicine
Donors: R. Christian B. and Felicia Evensen



Yusuke Shiozawa, MD, PhD – 2011

University of Michigan, Ann Arbor
Donor: Todd Boehly



Timothy Showalter, MD – 2011

Thomas Jefferson University
Donor: Ben Franklin Award



Abhishek Srivastava, MD – 2011

Weill Cornell Medical College
Donor: The Richard S. and Karen LeFrak
Charitable Foundation



Barry Taylor, PhD – 2011

Memorial Sloan-Kettering Cancer Center
Donor: Reggie's Team



Hans David Ulmert, MD, PhD – 2012

Memorial Sloan-Kettering Cancer Center
Donors: David H. and Julia Koch



Alexander Wyatt, PhD – 2012

Vancouver Prostate Centre
Donor: Pier Luigi Tolaini



Kexin Xu, PhD – 2011

Dana-Farber Cancer Institute, Harvard University
Donor: Progenics, in Honor of Dr. Stephen Morris



Timothy Yap, MBBS, PhD – 2011

The Institute of Cancer Research,
The Royal Marsden Hospital
Donors: The Honorable Earle I. and Carol Mack,
B. Scott Miner



Yuxi Zhang, MD, PhD – 2012

First Hospital of China Medical University
Donor: Shmuel Meitar

For more information on PCF Young Investigators
and their funded projects, go to:
www.pcf.org/YoungInvestigators

PCF'S VENTURE PHILANTHROPY AND GLOBAL CLINICAL TRIALS NETWORK DELIVER THE PROMISE OF MDV3100

MDV3100 (Enzalutamide) recently moved out of Phase III clinical trials at the close of 2011 and is awaiting approval from the U.S. Food and Drug Administration (FDA). This new therapeutic for inhibiting the androgen receptor has five times the affinity of Casodex for binding to androgen receptors and holds promise for men who have failed hormone and chemotherapies. PCF support through every step of development—from idea through clinical trials—is helping this new drug make its way to castration-resistant patients in record time. It is a unique story of investing in and fostering academic and commercial cooperation.

Fast on the heels of five new prostate cancer drugs approved for patients with advanced disease in the past two years, a promising new drug, MDV3100 (developed by Medivation and partner, Astellas) could soon be approved by the FDA. The development of MDV3100 began with a PCF Board of Directors meeting at UCLA where the world's top cancer scientists in leukemia were invited to apply for funding and work on prostate cancer. What ensued was a 2002 competitive CaP CURE (PCF) research award to Owen Witte, MD, Michael Jung, PhD, and Charles Sawyers, MD. There, Michael Jung, a professor in organic chemistry, discovered the compound after working with Dr. Sawyers on the mechanisms of androgen resistance.

MDV3100 has a novel mechanism of action, inhibiting the androgen receptor (AR) at three distinct points in the signaling pathway. MDV3100 directly blocks the activity of the androgen receptor, the engine of prostate cancer progression. In its Phase III clinical study, MDV3100 increased median survival by 4.8 months, providing a 37 percent reduction in the risk of death compared to placebo. Some patients have very durable remissions well beyond average, while some do not respond. Thus, the median survival is a statistical description for the FDA and clinical researchers.

The MDV3100 clinical trial marks the second time the trial of a prostate cancer drug was stopped early and the drug was offered to patients in the placebo arm due to its effectiveness and patient tolerance. The first incidence was with Zytiga (abiraterone) which was approved in April 2011. Zytiga affects prostate cancer progression by shutting off the supply of fuel—testosterone. Having both drugs available to patients will represent an important advance in patient treatment.

“The clinical advancement of MDV3100 is one of the most important events in the history of prostate cancer research and PCF,” says Howard Soule, PCF's chief scientist. “For men whose disease has progressed since receiving hormone and chemotherapies, MDV3100 should provide a new treatment option to extend survival.”

Both MDV3100 and Zytiga are being evaluated in Phase III trials in patients who have failed hormone therapy but have not undergone chemotherapy. Results are not yet available, but the trend will be to investigate both medications earlier in the natural history of the disease. They are also being tested in the pre-surgical setting (funded by PCF Challenge Awards) with curative intent for primary high-risk prostate cancer.

Many additional clinical trials are needed to determine the optimal sequence or combination of Zytiga and MDV3100 and to determine if combinations of MDV3100 with other experimental targeted therapies are synergistic.

From Test Tube to Patients Urgently

The research and development period for MDV3100 has been a comparatively short nine years. PCF's total investment of \$14.75 million in MDV3100, supported by the PCF's investment in the Prostate Cancer Clinical Trials Consortium and the guidance of PCF-funded researchers, Dr. Howard Scher (Memorial Sloan-Kettering Cancer Center, New York) and Dr. Johann de Bono (The Royal Marsden Hospital, London), accelerated the Phase III development of the drug. FDA approval of MDV3100 is expected within a year. 🇺🇸



Photography: Paul Bliese

Michael Jung, PhD,
at UCLA's Molecular
Sciences Center



CHINESE SCIENTISTS JOIN PCF'S GLOBAL RESEARCH ENTERPRISE

In a part of the world that has historically experienced low rates of prostate cancer—including entire regions where prostate cancer appeared to be nonexistent—China is now reporting increases in incidence in China's urban areas. In Shanghai alone, new cases are increasing at a rate of 13 percent annually. This, coupled with a government commitment to stem the rise of new cases, makes China a unique area in which PCF can support research and expand its investments in human capital.

In August 2011, the Prostate Cancer Foundation launched its PCF China initiative. The program is designed to identify, fund and promote innovative research projects within China. Working with leading Chinese organizations, such as the Chinese Urological Association, PCF China will stimulate and help build the prostate cancer research enterprise in China as well as encourage sustainable collaborations throughout the PCF worldwide knowledge exchange. In March, PCF China hosted its first Annual Prostate Cancer Symposium at Peking University's Wu Jieping Urology Center, featuring scientific presentations and discussions with Chinese cancer scientists and their American counterparts.

PCF China also announced its first Young Investigator (YI) awards in China featuring three-year grants for two Chinese scientists, Shancheng Ren, MD, PhD, at Shanghai Changhai Hospital and Yuxi Zhang, MD, PhD, at The First Hospital of China Medical University. These two YIs are sponsored by Shmuel Meitar, a PCF Board member who saw the potential of China to contribute important solutions to prostate cancer research.

"PCF-supported Young Investigators have changed the scope of prostate cancer research, advancing treatment sciences and improving the lives of patients worldwide. It is an honor to support PCF's expansion and sponsor these scientists in China," says our donor. "They will help accelerate our mission of responding to the ever-changing research landscape and to fund high-risk, high-patient benefit programs that also facilitate data sharing through PCF's global scientific network."



Chinese cancer research scientists met with PCF Chief Science Officer, Howard Soule, PhD, at the first Annual PCF China Scientific Symposium Awards Ceremony in Beijing, China.

Dr. Ren has identified a novel gene fusion in prostate cancer patients in China that results in the juxtaposition of the SDK1 and the AMACR genes. He proposes to study the relative prevalence and clinical significance of this SDK1-AMACR gene fusion in Chinese patients and to investigate this gene fusion as a novel, non-

invasive marker for the detection of prostate cancer in Chinese patients. TMPRSS2-ERG gene fusions that are a hallmark of prostate cancer in approximately 50 percent of Caucasian patients occur at a much lower frequency of approximately 15-20 percent in prostate cancer patients in China.

Dr. Zhang will investigate why most prostate cancer patients ultimately become resistant to hormone therapy. This stage of prostate cancer is termed castration-resistant prostate cancer (CRPC) and increases risk for death. Recently identified prostate cancer-specific stem cells (PrCSC) may play a major role in the development of treatment resistance and progression of prostate cancer.



Studies of PrCSCs have shown that they are capable of self-renewal, possess enhanced tumor-initiating capabilities, do not rely on androgens for growth and survival and are more resistant to treatment than other cancerous cells. Dr. Zhang has identified a sub-population of PrCSCs that increase in numbers upon treatment with androgen deprivation therapy (ADT). Dr. Zhang proposes to study prostate cancer-specific stem cells that lead to the development of disease progression and treatment resistance. These studies will help in the identification of potential drug targets that prevent CRPC development. 



Image Credit: Shanghai skyline at night - shuiyuansu, istock photography

Yuxi Zhang, MD, PhD, at The First Hospital of China Medical University in Shenyang City (left) and Shancheng Ren, MD, PhD, at Shanghai Changhai Hospital 

IRISH YOUNG INVESTIGATORS PURSUE BIOMARKERS OF AGGRESSIVE CANCERS

First-time PCF Young Investigators in Ireland are researching molecular differences between aggressive and low Gleason-grade cancers.

From its inception, PCF has focused heavily on investing in human capital, particularly in the form of young scientists with innovative approaches and tenacity. Our support of nearly 100 young investigators around the world since 2008 underscores this commitment.

One of the biggest challenges in diagnosing and treating the more than 27 known varieties of prostate cancer is discerning between the most aggressive forms of this cancer, varieties that represent intermediate levels of aggressiveness, and those that are indolent, or non-life-threatening. The ability to distinguish between these would greatly reduce overtreatment, sparing men from the side effects of treatment, and enable us to deliver personalized treatments that are best suited to a specific genotype or variety.

Two of PCF's newest Young Investigators, the first ever in Ireland, are working on this very problem at Trinity College in Dublin.

Antoinette Perry, PhD, at Trinity College's Institute of Molecular Medicine—using an award sponsored by The Handler Family Fund—is working to address the critical, unmet need of identifying aggressive tumors at an early stage while they are potentially curable and distinguishing them from indolent, low-grade tumors which can be treated with proactive surveillance to avoid overtreatment of clinically insignificant disease. To this aim, Dr. Perry is studying the chemical modifications to DNA's outer shell, known as epigenetics.

Prostate cancer is driven by several epigenetic alterations and genetic abnormalities. Epigenetic alterations can be detected non-invasively with high sensitivity in peripheral blood and urine. Therefore, detecting prostate cancer-specific epigenetic alterations holds potential for both improved prostate




Drs. Stephen Finn, and Antoinette Perry, at Trinity College's Institute of Molecular Medicine in Dublin

cancer diagnostics and patient risk stratification. Dr. Perry is developing new blood and urine biomarkers for the non-invasive detection of aggressive prostate cancer. Dr. Perry's goal of identifying epigenetic patterns of DNA alterations that are specifically associated with aggressive prostate cancers holds promise for alleviating the burden of overtreatment for indolent disease.

Another PCF Young Investigator at Trinity College's Institute of Molecular Medicine is Stephen Finn, MBBS, PhD, sponsored by PCF donor Steve Wynn. Genetic information flows outward from our genes on DNA as follows: gene (DNA) to RNA to protein. This sequence of genetic transcription is known as the Central Dogma. RNAs, the products of DNA, either give rise to proteins called coding RNAs or non-coding RNAs. Despite their name, non-coding RNAs (ncRNAs) are functional molecules that perform specialized roles in the cell, such as regulation of gene expression. Recent reports have provided evidence for the role of small, non-coding RNAs in the development and progression of prostate cancer.

Dr. Finn proposes to identify those non-coding RNAs that are associated with aggressive prostate cancer as defined by failure to respond to Androgen Deprivation Therapy (ADT), disease-specific mortality and other factors. His research will identify the role of non-coding RNAs in aggressive prostate cancer and correlate these to prostate cancer-specific outcomes, laying the groundwork for the design of new therapeutics that will target specific non-coding RNAs.

These studies may provide reliable biomarkers of aggressiveness which can help in patient stratification for treatment and more efficient disease monitoring. 

View a video on the work of Drs. Perry and Finn at: www.pcf.org/2011progress



Photography: Jeff Becker

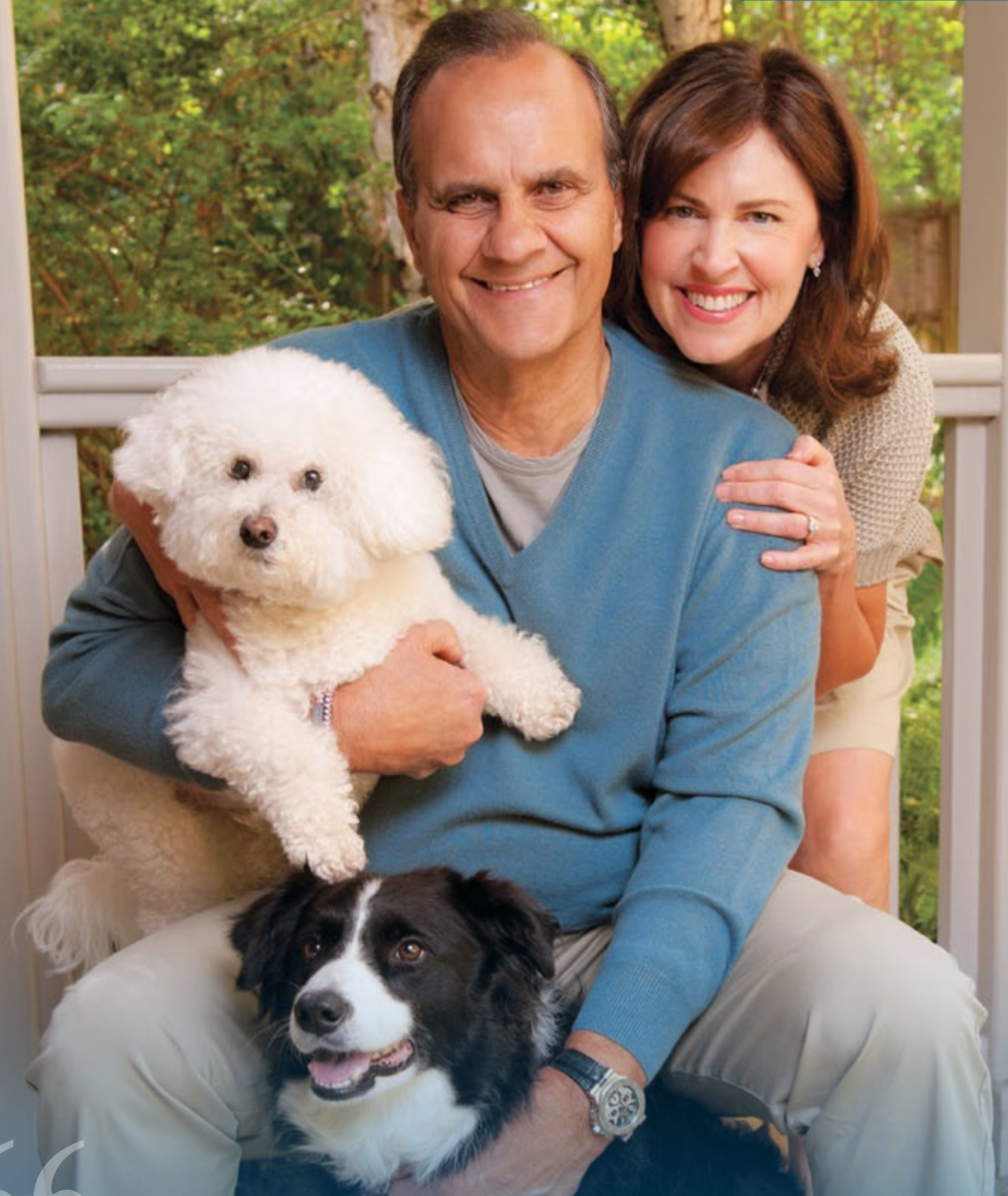
Antoinette Perry, PhD, and Stephen Finn, MBBS, PhD, at Trinity College, Dublin



PCF 2011 IMPACT BY THE NUMBERS

- 2 more FDA-approved drugs for advanced disease
- 7 engaged and active PCF Board of Directors committees
- 15 countries with PCF-funded research scientists
- 22 languages spoken within the walls of PCF
- 28 "clonotypes" of prostate cancer identified for precision treatment
- 28 Board members from 3 countries
- 43 research team awards receiving funding
- 71 Journal Clubs with PCF scientist data exchanges
- 96 PCF Young Investigators funded since 2008
- 200 cancer centers funded globally by PCF since 1993
- 200 golf tournaments held
- 425 2011 Scientific Retreat attendees
- 500 Athletes for a Cure participants
- 1,600 PCF-supported research projects (1993-2011)
- 5,180 Jean Fogelberg holiday cards sold
- 8,335 donated media placements
- 13,100 miles run by Athletes for a Cure participants
- 13,416 PCF Facebook community members
- 30,000 prostate cancer blue wristbands distributed
- 32,000 individual donors
- 60,000 readers of PCF's www.mynewyorkminute.org
- 144,479 U.S. moustaches grown for Movember
- 987,554 PCF.org website visitors
- 1.8 MILLION viewers of Movember's Google Chrome video
- 2.6 MILLION PCF direct mail pieces distributed in 49 states
- 5 MILLION friends of PCF Facebook community members
- 9.8 MILLION PCF Home Run Challenge media impressions
- 16 MILLION men and their families benefiting

 DONOR PERSPECTIVE
Joe & Ali Torre



“Prostate cancer can be managed. It’s treatable and you can often survive it... but if you can prevent it from ever happening, that’s all the better. PCF is working on all fronts. That is why we are proud to support the Foundation’s work and that of their talented researchers.”

View a video with Ali Torre at:
www.pcf.org/2011progress

Photography: Paul Bliese

A DECADE OF SAFEWAY SUPPORT

There Is No Such Thing as Small Change

For more than 10 years, Safeway customers have been given an opportunity to make donations in support of PCF-sponsored research. The fundraising campaign occurs each June at stores across the U.S. and in Canada. Whether rounding up to the nearest dollar or donating several dollars, Safeway shoppers have collectively given new meaning to the phrase, "There Is No Such Thing as Small Change."

Not only has the annual Safeway campaign raised important funding for game-changing research, it has raised awareness for prostate cancer among Safeway customers and employees nationally. The following is a discussion with Steve Burd, Chairman, President and Chief Executive Officer of Safeway.

Q. Why did Safeway choose to become involved in raising money to support cancer research?

A. We got involved because we saw an opportunity to make a difference with diseases that impact a significantly large part of our customer and employee populations. Prostate cancer affects 1 in 6 American men. Breast cancer affects 1 in 8 women. By supporting both causes, we believe we are making an impact on the science of finding a cure, saving lives and contributing to our nation's overall health.

Q. Since the annual campaign for Prostate Cancer began, Safeway customers and the Safeway Foundation have raised more than \$75 million to support research for a prostate cancer cure. Does this surprise you?

A. Not really. Over the years we've engaged our customers on charitable activities, and are always impressed with their generosity. In the first year of our June prostate cancer campaign, we raised

\$800,000. Last year, during that same period, we raised more than \$10 million. The numbers are both a testimony to the system we have put in place to raise funds and to the generosity of our customers. We've created a unique model that allows us to leverage the considerable foot traffic that gets generated in a grocery store, and doesn't burden the donor. Most of our in-store donations are relatively small.

Q. How did Safeway choose to partner with the Prostate Cancer Foundation?

A. The organization is widely regarded as the leading private funder of prostate cancer research. It is highly respected in the cancer research community and viewed as a catalyst for accelerating

"...we are making an impact on the science of finding a cure, saving lives and contributing to our nation's overall health."

the science of cancer research closer to a cure. Since we started our fundraising the prostate cancer death rate has been reduced 40 percent from what was once projected, and nearly 200,000 American men are alive today because of advances in treatments. That is encouraging.

Continued on page 16 ▶



“We’ve created a unique model that allows us to leverage the considerable foot traffic that gets generated in a grocery store, and doesn’t burden the donor.”

Q. Is PCF different from similar organizations?

A. We are careful about only funding charitable organizations that operate efficiently. PCF has developed a reputation for their entrepreneurial approach to doing things. They keep overhead costs low and there is a sense of urgency to everything PCF does. I serve on their Board, so I understand how funds are allocated and the organization’s focus on science. PCF’s CEO, Jonathan Simons, MD and his team hold their funding recipients to a high standard and insist that sponsored work and resulting data are shared broadly with other funded institutions doing similar work.



Q. Until recently, prostate cancer has long remained in the shadows. Is that changing?

A. We think we’ve had a hand in bringing the disease out into the open. However, Mike Milken and his PCF team deserve the real credit for creating a public dialog about the disease. He has surrounded himself with a gifted team of scientists who also happen to be exceptional communicators. PCF has also done a great job creating awareness and getting messages out to mass audiences through the sports and entertainment industries.

The organization has a growing presence in the social media world. I’m told they had more than 5 million “Friends” on Facebook—which is an impressive number in that space.

Q. Safeway is known for its progressive employee health programs. Is there a parallel between those and some of the work of PCF?

A. PCF’s research correlating diet and exercise with disease prevention tracks with the work we have been doing at Safeway. We provide our employees with a range of incentives to improve their overall health while reducing their out-of-pocket healthcare costs. PCF research provided early input for our understanding of lifestyle and its connection to cancer prevention.

Q. Do you believe that together we are making progress against prostate cancer?

A. We most certainly believe we are making progress. As I indicated earlier, mortality rates have declined dramatically in the time we’ve been connected to the cause. Men are living longer, more

productive lives. At Safeway, we look forward to building on our partnership going forward so we can overtreat less and cure more. 📌

“PCF research provided early input for our understanding of lifestyle and its connection to cancer prevention.”

View a video on Safeway’s campaigns at:
www.pcf.org/2011progress



“The Prostate Cancer Foundation and Michael Milken have placed prostate cancer ‘on the map’ in bringing dramatically increased attention to this major killer as well as broad knowledge to men, enabling more to effectively fight prostate cancer. At the same time, the PCF approach to aggressively raising seed money and creatively stimulating research has ‘changed the game’ in how rapidly research can be completed, shared and advanced. As a direct result, the best researchers are now being attracted to the field of prostate cancer and new drugs are coming out of the laboratory at a record pace, revolutionizing the fight against this once ignored disease. We are pleased to be able to support such an extraordinary organization.”

Photography: Frank DeChirico

MOVEMBER'S UNIQUE DNA

Changing the Face of Men's Health—One Mo at a Time

Movember first took root in 2003, when a group of men in Australia decided to have some fun by bringing the Mo (Aussie slang for moustache) back for 30 days. They chose the month formerly known as November and enlisted 30 men to grow moustaches. They not only had a great time doing it, they were amazed by the conversations generated by the growth of a simple moustache.

Movember's four co-founders—Adam Garone, Travis Garone, Luke Slattery and Justin Coghlan—recognized that the Mo could be the “hairy ribbon” to raise awareness and funds for prostate cancer and other health issues affecting men. Thus, a movement was born. We asked Adam Garone, CEO and co-founder of Movember, to reflect on the success and future of the global movement.

Q. Looking back on that initial discussion about bringing back the Mo, did you have any idea what you were starting?

A. The initial discussion about bringing back the Mo was between my brother, Travis, and friend Luke, who pondered why the moustache had never made a fashionable comeback. As part of the original 30 Mo-growers, we initially grew for fun, but quickly realized that the moustache was an incredible conversation starter. For the entire month, from bosses to girlfriends and strangers, everyone had an opinion about our Mos.

In 2004, Movember became an official charity and 450 Mo Bros and Mo Sistas raised \$54,000 for the Prostate Cancer Foundation of Australia. It was the largest donation they had received up until that time. As a result we truly appreciated the power of the moustache to raise awareness and funds for men's health issues. We realized there was a lack of resources and charitable endeavors focused on men's health. Inspired by the women around us, and all they had done for breast cancer, we knew we had to strive to bring the same kind of awareness to the health issues affecting men, such as prostate cancer.

Q. How did a small local program grow into an international cultural phenomenon?

A. In 2007, the movement went global, with official Movember campaigns introduced beyond Australia in New Zealand, Spain, UK, Ireland, Canada, and the U.S. Today, official Movember campaigns are held in 14 countries. In each country, we partner with the very best men's health organizations, and we've enjoyed a long-standing relationship with the Prostate Cancer Foundation in the U.S.

More than \$10 million has gone to research programs supported by PCF. Globally, since 2004, more than 1.9 million participants have raised \$281 million to change the face of men's health.

“...we initially grew for fun, but quickly realized that the moustache was an incredible conversation starter.”

Q. How does the Mo raise awareness and raise funds?

A. Movember participation begins by registering at Movember.com. On their own or as part of a team, men grow and women support a moustache for the 30 days of Movember. Much like the commitment to do a charity run or walk, Movember participants commit to changing their appearance by growing a



Photography: Paul Bliese

Adam Garone (standing), with Movember colleague, Donny Killian, in front of Movember U.S. headquarters in Venice, CA

Continued on page 20 ▶

“We partner with the very best men’s health organizations, and we’ve enjoyed a long-standing relationship with the Prostate Cancer Foundation in the U.S.”

moustache. Along the way, they get their family, friends, and colleagues to donate to their Mo-growing efforts. Team building and managing your personal campaign is handled easily on the Movember website, where each participant has their own personalized fundraising page.

During Movember, each Mo Bro becomes a walking billboard for men’s health. Globally in 2011, our participants had over 800,000 face-to-face conversations about Movember, with a reach of over 65 million. Mo Bros and Mo Sistas actively communicated our men’s health messaging, totaling nearly four billion conversations via social media, in person, phone calls, emails, texts, and blogs.

Q. How do women participate in Movember?

A. While not Mo-growers, women are a very important part of the success of the Movember campaign. Sixty percent of our donors and many Movember team captains are women. As women often act as the “Chief Medical Officer” of their households, they have an integral part in engaging men to participate in the campaign, as well as helping to spread awareness and education about men’s health causes.

Q. When Movember began in the U.S., how did it decide to select the Prostate Cancer Foundation as its men’s health partner?

A. In countries where Movember runs official campaigns, we look to partner with charities that are aligned with Movember’s vision to have an everlasting impact on the face of men’s health. We choose our men’s health partners based on their corporate governance policies, cost ratios, leadership within the area, and most importantly, their achievements funding world-class programs and research.

Once our U.S. partner assessment was complete, it was abundantly clear that PCF was the right

fit. As the leading national prostate cancer charitable organization, PCF is funding and accelerating prostate cancer research globally.



Q. How would you characterize Movember’s partnership with PCF?

A. We are very proud of the research programs we’ve helped PCF fund. We are honored to have had a hand in helping scientists discover the 27+ types of prostate cancer and in sequencing the prostate cancer genome, edging us closer to a world where no man should die from prostate cancer.

Movember’s vision is to have an everlasting impact on the state of men’s health by funding programs focused on awareness and education, survivorship, and research. PCF has provided invaluable insights and results for research.

“Sixty percent of our donors and many Movember team captains are women.”

Together, I believe we will end death and suffering as a result of prostate cancer. 🍷

View a video about Movember at: www.pcf.org/2011progress

2011 DONOR ROLL

The support of our generous donors makes all that we do at PCF possible. This honor roll acknowledges actual gifts of \$1,000 or more, exclusive of pledges, made to PCF during calendar year 2011. We thank you, our friends and supporters, for making 2011 PCF’s best year yet.

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*Special partnerships or
hosted events that raised
\$1,000 or more*

6th Annual Tom Dawes "We'd
Be Fools Not To" Function
7th Annual Faith Love Hope
Win Foundation Golf
Tournament
9th Annual Philadelphia
Prostate Cancer Fundraiser,
Hosted by Neal Rodin and
Clay Hamlin
91X Blue September
Fundraiser
Alpha Omicron Pi
Artidote
AV Men's Senior Baseball
League
ACC Men's Golf League
Be Bold, Be Bald
The Charles Evans PCF Pro-
Am Tennis Tour
Coon Rapids-Bayard
Crusaders "Kick Cancer"
football game
Chesapeake Men's Senior
Baseball League
Derric's Day at Thunder Hill
Raceway
Detroit MSBL
Doherty Men's Soccer Program
Friends of Eastern Bag and
Paper Group
Friends of James Reyburn
Golfers Against Cancer
International Stunt Association
(ISA) 3rd Annual Charity
Paintball Tournament
Kilted to Kick Cancer
Let's Hit a Grand Slam for the
Cure of PC
Mediven Socks for Men

Men's Senior Baseball Leagues
Newton Running Company
Northland College Men's
Hockey
Pennies for Pete
Play For Blue
Quinnipiac University Men's
Hockey Team
Robert W. Baird & Co.
Incorporated's Denim Day
Scituate Beach Association
Team Winter
UNC School of Medicine Class
of 2014
Western Maine Baseball
Umpire Association (WMBUA)
"Blues Go Blue"
Wycliffe Country Club Men's
Golf Association

Arnie's Army Battles Prostate Cancer Golf Tournaments

*Arnie's Army Golf
Tournaments that raised
\$1,000 or more*

Addison Reserve Tournament
Aliso Creek Inn and Golf
Course (2nd Annual W.R.
Manese Memorial Golf
Tournament)
Alta Mesa Golf Club Charity
Tournament
Arnie's Army Golf Tournament
(Arkansas)
Artesia Country Club
Aspetuck Valley Country Club
Battle at BallenIsles Country
Club
Battle at Bella Vista
The Beech Mountain Club (Pink
& Blue)
Bella Vista Country Club (AR)
Bent Tree Country Club
Blue Ridge Trail Pink & Blue
Tournament
Battle at Boca Woods
Boobs & Balls Against Cancer
Golf, Inc.
Broken Sound Golf Club
Brown's Run Country Club
Bruce Alan Hupfer Memorial
Burlington Country Club
(Arnie's Army & Rally for the
Cure)

C.A.R.E. (Cancer Alzheimer's
Research Event)
Cahokia Fire Department at
Prairies Golf Course
Calabasas Country Club
(Arnie's Army and We Spark)
Canoe Brook Country Club
Carolina Trace Country Club
(Annual Stag Day)
Cherokee Country Club (Stan
Camp Golf Tourney)
The Club at Admiral's Cove
Concordia Men's Golf Club
Cotton Creek Men's Golf
Association, Inc. at Craft
Farms Golf Resort
Country Club of Beloit (Donny's
Revenge)
Country Club of Roswell
Battle at Dublin Ranch
El Conquistador
Battle at Estero Country Club
at the Vines
Forest Glen Golf and Country
Club (Golf for US - Men's PC
Tournament)
Golfer's Club at Fort
McPherson
Golfing Fore The Cure
Golfview Golf & Racquet Club
Grandfather Golf & Country
Club
Greenbriar-Whittingham Golf
Association
Greenbriar Woodland Golf Club
(Greenbriar Golf Association)
Hawthorn Woods Ladies 9-Hole
Group
Heron's Glen Country Club
Battle at Hershey's Mill Golf
Club
High Meadow Ranch Golf Club
Highland Meadows Golf Club
(Rally for A Cure-Arnie's
Army)
The Members of Highland
Woods Golf & Country Club
HLT Texas Shootout
Battle at Iron Lakes Country
Club
Jonathan's Landing Golf Club
KBK Charity Golf Tournament
Lago Vista Men's Golf
Association
Lake Spivey Golf Club
Legends Men's Golf Association

“Supporting PCF research was an easy decision. They drive cutting-edge research and their ability to build global collaboration delivers results for millions of men, like our long-time friend who is affected by this disease and in whose honor we made our donation.”

— Tony & Laura Nethercutt

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Lobster Classic
Lords Valley Country Club
Maple Leaf Country Club
McCanless Golf Club
Battle at the Meadow Club
Meadowlark Country Club (7th Annual Turf & Surf Golf Tournament)
Minebrook Golf Course (Shakey Jakes Golf Outing)
Mt. Kisco Country Club (Senior Championship and Super Senior Championship)
North Ranch (Westlake Village Sunrise Rotary)
Northgate Ladies Golf Association (Toni Jones Memorial Tournament)
Old Course of Loveland (Edward Jones Putts for Prostate)
Battle at Old York Road
Palatine Hills Golf Association (PHGA Prostate Cancer Drive)
Palm Beach Polo & Country Club
Palm-Aire Country Club at Sarasota
Paupack Hills Golf and Country Club
Pebblecreek Men's Golf Association (Battle at Eagle's Nest at Pebble Creek)
Pelican Point Golf & Country Club
The Peninsula Club Men's Golf Association (Three Kings and a Queen Golf Tournament)
Battle at Persimmon Woods
Pink & Blue at Balcones Country Club
Putting for Prostates
Quail West Golf Club
Rancho Bernardo Golf Club
Rarity Bay Golf Club
Rio Verde 18-Hole WGA-Rio Verde Country Club
Riverwood Golf Club (Riverwood Men's Club)
Roffin Country Club
San Carlos Golf Course (Halftime Lounge and Sports Bar Fights Cancer)
Sandbulte Memorial Golf Tournament

Sawgrass Country Club (Irish Open)
Silverado (Napa Swing for a Cure)
Stan Camp Golf Outing
Steamboat Golf Club
Sterling National Country Club (Eastern Bag & Paper)
Stonebriar Country Club (Annual Community Benefit Golf Classic)
Strand Country Club (Hairy Knuckles Tournament)
Sugarloaf Country Club (Jay Moody Memorial)
Sunny Hill Resort
Terravita Golf Club
Texas Propane Gas Association-Pros4Care Tournament
Vasari Country Club (Vasari Golf & Tennis Tournament for Cancer)
Wycliffe Golf & Country Club (Wycliffe Country Club Men's Golf Association)
Zylka's Red Bull Bar & Grill Golf Tournament

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Funds that contributed \$1,000 or more

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Ron and Mary Anne Barnes
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"I support PCF because they continually advance important lines of translational research for the direct benefit of prostate cancer patients. They also encourage innovative and often risky projects that could not be funded elsewhere. These approaches will lead to improved patient treatments and better outcomes."
— R. Christian B. Evensen

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Represents annual donations as of December 31, 2011.

A SURVIVOR'S APPEAL FOR SUPPORT

Dear Friends,

Ten years ago, at age 49, I was diagnosed with advanced metastatic prostate cancer throughout my body. On the day I was given my news, I was certain I had but two to three years left in my life. I was wrong. I am now in my fifth remission.

Despite the aggressiveness of my prostate cancer, I was able to help my wife raise three young children to become fine teenagers, join the Army Reserve (perhaps making me the only metastatic cancer patient to ever do so) and serve in Iraq. Later, I became Assistant U.S. Secretary of Defense for Health Affairs. I have also started two companies that employ thousands of people. In short, despite the challenges presented by advanced prostate cancer, I am leading a longer and more productive life—something I didn't think was possible years ago.

I've been blessed to reap many of the benefits made possible by research and clinical trials supported by the Prostate Cancer Foundation and to have been treated all this time by Dr. Christopher Logothetis, a brilliant PCF-sponsored scientist at MD Anderson Cancer Center. It is because of this combination that I am alive today and able to make a very personal appeal to you for your continued support of the work of PCF.

As a member of the PCF Board of Directors, I can assure you that 79 percent of every dollar that comes into PCF is deployed rapidly to support game-changing programs. It is



research that—stewarded effectively by PCF—delivers results and much needed advances in treatment science for patients like me and millions of others around the world.

Money is research and research is the key to cures for a disease that affects so many men, their families and friends.

With sincerest appreciation for your continued support,

Hon. S. Ward "Trip" Casscells, MD (COL, USAR)
John E. Tyson Distinguished Professor of Medicine and Public Health, University of Texas at Houston

View a 30-minute documentary on Trip's remarkable journey through prostate cancer diagnosis and treatment at:
www.pcf.org/2011progress

SUPPORTING CURES

Continuing our momentum in finding better treatments and cures for prostate cancer requires the support of our more than 170,000 donors from across the globe. It enables PCF to identify the most promising research ideas and attract brilliant individuals and teams of junior and senior scientists to PCF's research enterprise, moving discovery forward and ensuring continued progress.

To support this urgent need, the Prostate Cancer Foundation offers individuals and charitable foundations various options for becoming involved and supporting crucial research. We welcome gifts of cash, securities, non-cash assets and gifts by will or living trust. We also welcome contributions made in memory or in honor of friends or loved ones.

Challenge Awards (\$1,000,000 and above for 2-4 year programs)

PCF supports transformational prostate cancer research to accelerate progress toward reducing death and suffering due to advanced prostate cancer. Teams may be assembled from one or several institutions and should include at least three investigators capable of providing unique scientific expertise to solve a significant problem in prostate cancer research. These awards cover direct costs of the research.

Creativity Awards (\$300,000 for 2 year programs)

PCF supports innovative and daring research with Creativity Awards. Paid over a two-year period, these awards, totaling \$300,000, support exceptionally novel projects with great potential to produce breakthroughs for detecting and treating prostate cancer. They are complementary and integrated with other PCF award programs.

Young Investigator Awards (\$225,000 for 3-year career investment)

PCF provides these three-year awards, totaling \$225,000, to keep the field of prostate cancer research vibrant with new ideas. The awards, matched by recipients' institutions, offer career and project support for young but proven investigators (typically 35 years old or younger) who are committing their lives to a cure for prostate cancer.



PCF has received a Four Star rating from Charity Navigator, the highest honor attained by fewer than 25 percent of U.S. public charities.

Donations

Please mail your check to:

Prostate Cancer Foundation
1250 Fourth Street
Santa Monica, CA 90401

To make an online contribution, please visit our website:
www.pcf.org

If you prefer, you can make a donation by phone by calling toll-free (800) 757-CURE (2873).

Memorial or Tribute Gifts

- Honor the memory of a loved one or celebrate the accomplishments of a friend or family member by helping others
- Make a memorial or tribute gift and PCF will send an acknowledgement card to the family or honoree
- PCF can also set up an 'in memory of' webpage to honor your loved one

Monthly Giving

- Set up recurring donations for a convenient and manageable gift process that fits your monthly budget

Other Gift Suggestions

- Assets or property including appreciated stock and real estate
- Bequest – remember PCF in your will
 - Name PCF as the primary or contingent beneficiary for your individual retirement account or a life insurance policy

For more information, visit: www.pcf.org/donate

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CONSOLIDATED STATEMENT OF FINANCIAL POSITION

December 31	Unrestricted	Temporarily Restricted	2011 Total	2010 Total
ASSETS				
Cash and Cash Equivalents	\$ 30,768,686	\$ 800,000	\$ 31,568,686	\$ 17,501,144
Investments	-	-	-	12,555,258
Pledges Receivable (Net)	13,442,463	5,150,000	18,592,463	15,442,076
Prepaid Expenses and Other Assets	192,221	-	192,221	121,975
Property and Equipment (Net)	643,867	-	643,867	593,827
Total Assets	\$ 45,047,237	\$ 5,950,000	\$ 50,997,237	\$ 46,214,280
LIABILITIES AND NET ASSETS				
Liabilities				
Accounts Payable	\$ 280,776	\$ -	\$ 280,776	\$ 217,575
Accrued Liabilities	1,166,584	-	1,166,584	632,827
Grants Payable	19,001,183	-	19,001,183	15,063,044
Total Liabilities	20,448,543	-	20,448,543	15,913,446
Net Assets				
Unrestricted	24,598,694	-	24,598,694	23,860,990
Temporarily Restricted	-	5,950,000	5,950,000	6,439,844
Total Net Assets	24,598,694	5,950,000	30,548,694	30,300,834
Total Liabilities and Net Assets	\$ 45,047,237	\$ 5,950,000	\$ 50,997,237	\$ 46,214,280

CONSOLIDATED STATEMENT OF ACTIVITIES

December 31	Unrestricted	Temporarily Restricted	2011 Total	2010 Total
Revenue and Public Support				
Grants and Contributions	\$ 41,162,099	\$ 1,950,000	\$ 43,112,099	\$ 40,219,226
Interest and Dividends	322,190	-	322,190	214,678
Realized Loss on Investments	(349,600)	-	(349,600)	-
Net Assets Released from Purpose Restrictions	2,439,844	(2,439,844)	-	-
Total Revenue and Public Support	43,574,533	(489,844)	43,084,689	40,433,904
Expenses				
Program Services	33,841,169	-	33,841,169	24,749,774
Supporting Services:				
Management and General	3,217,658	-	3,217,658	3,261,488
Fundraising	5,778,002	-	5,778,002	4,669,469
Total Expenses	42,836,829	-	42,836,829	32,680,731
Change in Net Assets	737,704	(489,844)	247,860	7,753,173
Net Assets – Beginning of Year	23,860,990	6,439,844	30,300,834	22,547,661
Net Assets – End of Year	\$ 24,598,694	\$ 5,950,000	\$ 30,548,694	\$ 30,300,834

CONSOLIDATED STATEMENT OF CASH FLOWS

December 31	2011	2010
CASH FLOWS FROM OPERATING ACTIVITIES:		
Change in Net Assets	\$ 247,860	\$ 7,753,173
Adjustments to Reconcile Change in Net Assets to Net Cash Provided by (Used in) Operating Activities:		
Uncollectable Pledges Receivable	575,000	-
Realized Loss on Investments	349,600	-
Depreciation and Amortization	239,332	134,750
(Increase) Decrease in:		
Pledges Receivable	(3,725,387)	(7,021,050)
Prepaid Expenses and Other Assets	(70,246)	57,095
Increase (Decrease) in:		
Accounts Payable	63,201	86,961
Accrued Liabilities	533,757	(250,199)
Grants Payable	3,938,139	(1,290,334)
Net Cash Provided by (Used in) Operating Activities	2,151,256	(529,604)
CASH FLOWS FROM INVESTING ACTIVITIES:		
Purchase of Property and Equipment	(289,372)	(536,785)
Proceeds on Sale of Investments	12,205,658	-
Purchase of Investments	-	(11,728,612)
Reinvested Interest and Dividends	-	(214,678)
Net Cash Provided by (Used in) Investing Activities	11,916,286	(12,480,075)
Net Increase (Decrease) in Cash and Cash Equivalents	14,067,542	(13,009,679)
Cash and Cash Equivalents – Beginning of Year	17,501,144	30,510,823
Cash and Cash Equivalents – End of Year	\$ 31,568,686	\$ 17,501,144

REPORT OF INDEPENDENT AUDITORS

To the Board of Directors
Prostate Cancer Foundation

We have audited the accompanying consolidated statement of financial position of the Prostate Cancer Foundation (the Foundation) as of December 31, 2011, and the related consolidated statements of activities, functional expenses and cash flows for the year then ended. These consolidated financial statements are the responsibility of the Foundation's management. Our responsibility is to express an opinion on these consolidated financial statements based on our audit. The prior year summarized comparative information has been derived from the December 31, 2010 financial statements of the Foundation and in our report dated April 11, 2011, we expressed an unqualified opinion on those financial statements.

We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the consolidated financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the consolidated financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall consolidated financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the consolidated financial position of the Foundation as of December 31, 2011, and the changes in its net assets and its cash flows for the year then ended in conformity with accounting principles generally accepted in the United States of America.

Green Hasson & Janks LLP

**Green
Hasson
Janks**

April 24, 2012
Los Angeles, California

PCF SUPPORTING PARTNERS

PCF is grateful for the support of our corporate partners. These organizations' contributions and campaigns are enabling PCF to move closer to our goal of realizing a world without prostate cancer.



Signature & Premier TAKE AIM Partners



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We Are Not Letting Up

While many men affected by prostate cancer are living longer, more productive lives as a result of the advances we have made in the fight against this disease, too many are still dying. And, too many are being overtreated. The Prostate Cancer Foundation—our Board of Directors, leadership team and staff—remain committed to finding and supporting the most innovative researchers around the world, building global collaboration and engaging with effective partners to accelerate discovery. Through this commitment, we will, sooner than later, arrive at a day when all men can receive the precision medicine they require for their level of prostate cancer and we can overtreat less and cure more.

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