ACCELERATING DISCOVERY
2009-2010 Progress Report

Featuring a Special Report on Our Advance on Washington
The Prostate Cancer Foundation (PCF) is a foundation without borders. Our advocacy for increased government and private support for prostate cancer research programs has helped build a global research enterprise of nearly $10 billion and made PCF a respected source of KNOWLEDGE, INTEGRITY and HOPE for more than 16 million men and their families who are currently afflicted with the disease.

PCF is accelerating the most promising research and discovery of better treatments and cures for prostate cancer. Since 1993, PCF has raised more than $415 million and funded more than 1,500 research projects at nearly 200 institutions in 12 countries.

PCF researchers are fast-forwarding breakthroughs in prostate cancer research that will enable us to achieve our vision for a world where no man suffers or dies from this disease.

About the Cover: A Rosetta Stone for Prostate Cancer
PCF-supported researchers at the University of Michigan identified 24 types (clonotypes) of prostate cancer; 23 are caused by specific gene fusions (erroneous pairings of genetic codes) and one is initiated by an overexpression of a gene called SPINK1. Like a Rosetta Stone, this historic decoding of prostate cancer opens a new world of understanding and will accelerate discovery of better early diagnostics and treatments. It permits differentiation between non-life-threatening and aggressive forms of prostate cancer and enables clinicians to match patients to treatments that are most effective for their particular clonotype. The discovery represents a pivotal moment in PCF’s mission to cure more and overtreat less, bringing an end to death and suffering from prostate cancer.

About the Graphs:
PCF’s expertise enables us to maintain revenue levels despite economic fluctuations. Agility allows us to fund crucial research immediately and ensure progress.
Dear Friends,

The exciting news from the front lines of cancer research is that the pace of scientific progress has accelerated, delivering more results in prostate cancer research in the past 12 months than in the past decade. This is translating into more advances and hope for the more than 16 million men and their loved ones affected by prostate cancer around the world. In the field of medical research against deadly diseases, prostate cancer stands out as an area delivering promising results for better and earlier diagnosis so we can cure more and overtreat less.

Our ability to reach this historic point in cancer research is built on the generosity of the more than 170,000 donors who have helped us raise over $415 million for game-changing research since 1993.

We reached several important milestones in 2010. The discovery of 24 types of prostate cancer by PCF-funded researchers at the University of Michigan is a breakthrough finding. As a Rosetta Stone for prostate cancer research, this important advance provides the key to one day being able to prescribe highly personalized treatment plans. The Michigan team’s gene fusion research identifies specific targets, so we can better decode cancer markers and distinguish between life-threatening tumors and indolent varieties that do not require aggressive treatments.

More great news is the approval of two new drugs for prostate cancer in 2010, Provenge® (immunotherapy), and Cabazitaxel (chemotherapy), and the pending approvals of Denosumab (fracture prevention) and Abiraterone (hormone therapy).

Provenge is the first immunotherapy shown to be effective in extending the lives of men with advanced prostate cancer. It is an important proof of concept demonstrating that we can harness the power of the body’s own immune system to fight cancers—a scientific concept that PCF began funding more than 10 years ago. PCF is pursuing additional research so we can better understand how immunotherapy works and why it is effective for some patients and not for others.

Cabazitaxel is an advance in secondary chemotherapy for advanced prostate cancer. This new agent is effective in men who become resistant to Docetaxel, a long-preferred chemotherapy. Furthermore, Denosumab, a drug used to maintain bone strength
and prevent fractures in men undergoing androgen deprivation therapy (ADT), represents an important advance for improved survivorship.

Following successful completion of Phase III clinical trials, Abiraterone is in the final evaluation and decision process at the Federal Drug Administration (FDA). It blocks the production of testosterone, the fuel for prostate cancer progression, and is targeted for use in men who have become resistant to current androgen deprivation drugs such as Lupron. It is already being cleared by the FDA for use on a case-by-case basis for patients who have no other treatment options. Abiraterone was initially discovered at the Institute of Cancer Research in London. PCF-funded investigators participated in its development and researched how it works.

A fifth potential new drug on the horizon for patients is Ipilimumab, another promising immunotherapy agent. It is currently pending approval at the FDA for melanoma patients and is in Phase III trials for prostate cancer patients with metastatic hormone-refractory disease. PCF funded much of the fundamental science and early clinical investigations for this promising treatment.

In addition to five new drug treatments, the stem “cell of origin” for human prostate cancer was identified. For decades, scientists believed that prostate cancer stem cells originated in luminal cells that line the top of the tiny ducts of the prostate. However, this year, UCLA researchers supported by PCF showed that basal cells, found at the base of the prostate ducts, are the source for prostate cancer. This finding directs researchers to the cancer’s source and will enable them to better understand the primary mechanisms for prostate cancer and identify new treatment targets.

We urgently need to build on this progress, which produces a host of new opportunities to turn lab discoveries into new and more effective medicines.

In 2009, PCF recorded its third-highest year for contributions despite the global recession. The $33.2 million you donated helped to fund 10 new Creativity Awards and allowed us to realize our goal of supporting more than 50 Young Investigators by the close of 2010. These new research awards are in addition to our support of 15 existing multi-million dollar, multi-year Challenge Award commitments and sponsorship of the Prostate Cancer Clinical Trials Consortium (PCCTC) that is partnered with the Department of Defense. Since 2005, the PCCTC has enrolled more than 2,400 patients in clinical trials that deliver innovative new treatments to patients. By the second half of 2010, 12 new Phase I and Phase II clinical trials were in the pipeline and seven new protocols were activated by the Consortium.

PCF advocates for more research in addition to funding it. In September 2010, PCF moved its 17th Annual Scientific Retreat to Washington, D.C. as part of a major Advance on Washington. In conjunction with three other prostate cancer organizations, this effort provided a week of scientific, advocacy, and government outreach meetings and events that stimulated much-needed media awareness and government attention in Congress and at the White House. We are pleased to include a special report on these activities.

With your continued support, we will further our progress. We will find an end to prostate cancer. Thank you for helping us make it happen.

With sincere appreciation,

Mike Milken
Founder and Chairman

Jonathan W. Simons, MD
President and Chief Executive Officer

David H. Koch Chair
THE PROMISE OF PERSONALIZED CURES
A Reality Within Reach

In 2010, prostate cancer research achieved an historic number of milestones. The progress made in the past year accelerates fundamental discoveries that will translate into cures. We are closer than ever to realizing our vision of delivering personalized cures for every patient who is diagnosed.

Decoding Cancer through Gene Fusions

PCF-funded researchers at the University of Michigan, led by Arul Chinnaiyan, MD, PhD, made a landmark discovery by identifying 24 types of prostate cancer. Of these, 23 are indicated by distinct gene fusions, and one is defined by an enzyme called SPINK1. Many of these gene fusions could disclose the Achilles’ heel of a distinct set of prostate cancers and markers for disease aggressiveness. Investigations to determine the function of each gene fusion will be essential to delivering new medicines designed to target specific types of prostate cancer.

University of California, San Diego researchers are building on the Michigan discovery by investigating the molecular mechanisms that mutate into recurrent gene fusions. The team, led by Michael Rosenfeld, MD, has developed a process that can artificially create these fusions in normal prostate cells in the lab to screen for compounds that prevent cancer.

Memorial Sloan-Kettering Cancer Center scientists, funded by PCF, identified a genomic signature of RNA and DNA codes for men who may not need surgery or radiation and those who most likely need aggressive treatment. With these signatures, doctors can potentially talk to their patients about whether or not they need additional therapy following surgery. The purpose of this continuing research is to integrate genomic information into a “barcode” for each patient that would match them with personalized, predictive and optimal treatments.
Discovering the Stem Cell of Prostate Cancer

Owen Witte, MD, at the University of California, Los Angeles, made a seminal discovery that was published in the journal *Science* this year. The paper’s authors identified prostate basal stem cells (found at the base of the prostate ducts) as the prostate cancer cell of origin, a surprise to the field that speculated only epithelial cells (that line the prostate ducts) could be the cell of origin. This finding elevates the level of stem cell knowledge for the research community and will aid in the discovery of new targeted medicines. They will be aimed at exterminating the elusive prostate cancer stem cell, a therapy-resistant cell capable of regenerating an entire tumor.

Harnessing the Power of the Immune System

Since 1993, PCF has funded innovative prostate cancer research aimed at harnessing the immune system to fight prostate cancer. In fact, PCF funded early dendritic cell based research, including the first research ever conducted on Provenge (sipuleucel-T). In April 2010, the FDA approved Provenge as the first immunotherapy for metastatic prostate cancer. For the first time in oncology, activating a patient’s immune system prolonged the survival of a patient with an advanced solid tumor. This new cell-based therapy is proof of principle that the immune system can be harnessed against advanced disease, even after cancer has emerged and spread. Today, PCF-supported scientists are at work on the next generation of vaccines and antibodies that re-task the immune system to unleash tumor-fighting cells.

Advancing Beyond the PSA Debate with Liquid Biopsies

Daniel Haber, MD, PhD, a PCF Challenge Award recipient, and his team at Massachusetts General Hospital is speeding the delivery of a liquid biopsy for prostate cancer patients. The newest device features a 10 to 1000 times greater detection rate for a single circulating tumor cell (CTC) in a drop of blood. This scalable device increases the probability of a CTC to interact and adhere to the walls of the capture device. This data will enable doctors to tell how aggressive the cancer is and how fast it is growing.

Fighting Androgen Deprivation-Resistant Cancers

The androgen receptor is one of the central drivers behind prostate cancer cell growth. Advances in blocking androgen receptor signaling are urgently needed for patients whose initial response to traditional androgen-blocking drugs is followed by a relapse from resistant cells. Thanks to $14.6 million in new seed funding from PCF, we now have two oral androgen receptor-blocking antagonists that can actually put patients back into remission: Abiraterone (Johnson & Johnson) and MDV3100 (Medivation, Inc.).

In Phase III clinical trials of Abiraterone, a PCF-supported team of clinical scientists in London, New York and San Francisco, reported a significant survival advantage in androgen deprivation-resistant prostate cancer. Abiraterone is an inhibitor of the enzyme CYP17 which is critical for the synthesis of intra-tumoral androgens. MDV3100, another novel anti-androgen, is in Phase III trials under the leadership...
of a PCF-supported team at Memorial Sloan-Kettering Cancer Center. Biomarkers for patient selection and rapid determination of outcomes are embedded in both of these studies. For example, CTC measurements are being tested as early indicators of remissions. New imaging techniques are being qualified as earlier biomarkers of treatment success.

Collaboration between Challenge Award recipients Steven Balk, MD, PhD, at Beth Israel Deaconess Medical Center, Peter Nelson, MD, at Fred Hutchinson Cancer Research Center, and investigators at Harvard, studied the inevitable development of Abiraterone resistance. Additional androgen metabolism inhibitors are being tested in combination with Abiraterone to eliminate residual androgen and disease recurrence. Furthermore, Trevor Penning, PhD, at the University of Pennsylvania discovered five new compounds that inhibit androgen synthesis differently than Abiraterone. His team is testing new androgen inhibitors and discovering new resistance mechanisms with the goal of further improving patient treatment.

Improving Survivorship

Challenge Award recipients Matthew Smith, MD, PhD, of Massachusetts General Hospital, Michael Pollak, MD, of McGill University, and Stephen Freedland, MD, of Duke University are focused on understanding and treating the side effects of androgen deprivation therapy (ADT). One significant outcome was the successful Phase III clinical trial of Denosumab that reported a reduction in bone fractures caused by ADT. An additional effect of this therapy is the onset of metabolic syndrome, a Type II diabetes-like disorder. Epidemiology studies show reduced incidence of prostate cancer in men taking Metformin for diabetes. A clinical trial of Metformin in patients receiving ADT, to prevent metabolic syndrome, will commence soon.

As a result of the rapid acceleration of discovery in prostate cancer research and greater participation in our clinical trials, we envision a day when every man will have access to better diagnostics that will enable physicians to prescribe treatments matched perfectly to their specific cancer type.
CREATIVITY & INNOVATION FOR CURES

Much of the progress that has been made in our efforts to end prostate cancer is the direct result of PCF’s commitment to funding innovative ideas and high-risk yet high-reward projects that are typically left unfunded by more traditional, government-supported programs.

The more we learn about prostate cancer, its origins and mechanisms, the more complex the remaining challenges become. PCF’s Creativity Awards support game-changing ideas, accelerating the world’s most promising research. PCF also invests in Young Investigators to build human capital and support a robust research enterprise. These grants are designed to attract the world’s brightest young scientific minds and encourage them to dedicate their research careers to solving the problem of prostate cancer.

Our commitment to creativity and innovation engages intellectual power and resources to find solutions from entirely new concepts and advances in immunotherapy, biomarkers like gene fusions and circulating tumor cells, and new targeted medicines.

2009 and 2010 Creativity Awards

Twenty-two new Creativity Awards were selected from 457 applications representing more than 100 institutions worldwide. Historically, 70 percent of these awards have leveraged additional multi-year funding from government, biotech and pharma. These new grants represent a total new commitment of $4.6 million.

Cory Abate-Shen, PhD (2009)
Columbia University Medical Center
The Gordon Becker Creativity Award

Gustavo Ayala, MD (2010)
Baylor College of Medicine

Brendan Curti, MD (2010)
Providence Portland Medical Center

Adam Dicker, MD, PhD, Karen Knudsen, PhD (2009)
Kimmel Cancer Center, Thomas Jefferson University
The Charlie Wilson Creativity Award

Jennifer Doll, PhD (2010)
NorthShore University HealthSystem Research Institute

Charles Drake, MD, PhD (2010)
The Sidney Kimmel Comprehensive Cancer Center at Johns Hopkins
The Evensen Family Creativity Award

Shelton Earp, MD (2009)
University of North Carolina
The Michael Vinecki Creativity Award

Barbara Graves, PhD (2009)
University of Utah

David Heber, MD, PhD (2009)
University of California, Los Angeles

Towia Libermann, PhD, Alan Rigby, PhD (2009)
Beth Israel Deaconess Medical Center
Harvard Medical School

James Marshall, PhD (2010)
Roswell Park Cancer Institute

David Nanus, MD (2009)
Weill Cornell Medical College
The Dan Fogelberg Creativity Award

Nora Navone, MD, PhD (2010)
The University of Texas MD Anderson Cancer Center
William Oh, MD (2010)  
Mount Sinai School of Medicine

Pier Paolo Pandolfi, MD, PhD (2009)  
Beth Israel Deaconess Medical Center  
Harvard Medical School

Renata Pasqualini, PhD (2010)  
The University of Texas MD Anderson Cancer Center

Kenneth Pienta, MD (2010)  
University of Michigan

Matthew Rettig, MD (2010)  
University of California, Los Angeles

Matthew Smith, MD, PhD (2010)  
Massachusetts General Hospital

Muneesh Tewari, MD, PhD (2009)  
Fred Hutchinson Cancer Research Center  
and University of Washington  
The Arnie's Army Creativity Award

John F. Ward, MD (2009)  
The University of Texas MD Anderson Cancer Center

Scott Williams, MD (2010)  
Peter MacCallum Cancer Centre, Australia

2010 Young Investigator Awards

With 27 new Young Investigators added to 23 from 2008, PCF is now funding 50 projects led by young and innovative researchers whose backgrounds include computer science, molecular biology, pharmacology, radiation oncology, medical oncology and endocrinology. Recipients receive three years of funding to test transformational research questions for prostate cancer patients. The 2010 Young Investigator Awards represent a $6.1 million investment in the global cancer research community.

Himisha Beltran, MD  
Weill Cornell Medical College  
The LeFrak Family Young Investigator Award

Justine Bruce, MD  
University of Wisconsin  
Carbone Cancer Center  
In Honor of Our Soldiers and the Department of Defense Congressionally Directed Medical Research Program for Prostate Cancer

Brett S. Carver, MD  
Memorial Sloan-Kettering Cancer Center  
The David H. Koch Young Investigator Award

Robert Den, MD  
Kimmel Cancer Center, Thomas Jefferson University  
The Ben Franklin Young Investigator Award

Felix Feng, MD  
University of Michigan  
The Republic of Tea Young Investigator Award

David S. Finley, MD  
University of California, Los Angeles  
The Lynda & Stewart Resnick Young Investigator Award

Isla Garraway, MD, PhD  
University of California, Los Angeles  
The Winter Vinecki Young Investigator Award, sponsored by Lori Milken

Hans Hammers, MD, PhD  
Johns Hopkins University Medical School  
The William Bikoff Young Investigator Award

Daniel Hamstra, MD, PhD  
University of Michigan  
The Charles Dolan & Mark Walter Young Investigator Award

Julia Hayes, MD  
Dana-Farber Cancer Institute  
The Ressler-Gertz Family Foundation Young Investigator Award

Hannelore Heemers, PhD  
Roswell Park Cancer Institute  
The Heritage Medical Research Institute Young Investigator Award

Andrew C. Hsieh, MD  
University of California, San Francisco  
Through the generosity of an anonymous donor

Joshua Lang, MD, MS  
University of Wisconsin  
Carbone Cancer Center  
The Dendreon Corporation Young Investigator Award

Stanley Liauw, MD  
University of Chicago  
The Brookdale Foundation Young Investigator Award
Prior to the start of our 17th Annual Scientific Retreat, PCF Young Investigators, mentored by PCF-supported scientists, spent a day identifying new challenges in our scientific agenda and innovative approaches that may deliver research solutions and cures.

For complete information on PCF’s 2009 and 2010 grant recipients and their projects, and to learn more about PCF research initiatives and strategies, scan this QR code with your smart phone, or go to: www.pcf.org/research.
REACHING PATIENTS & FAMILIES

PCF is committed to providing men and their families the best information available on the current best practices for treatment and the latest research findings. We fulfill this task by leveraging the benefits of online and social media, in addition to traditional methods of communication.

A New Web Presence with pcf.org

In 2009, PCF’s communications team undertook an extensive upgrade of pcf.org. Using input collected from surveys of patients, caregivers, researchers and other medical professionals, a new website was launched in April 2010. The new site features:

- Enhanced user interface and navigation
- Daily news feeds from Reuters and HealthDay
- Patient information provided according to patient disease status
- Rich video content
- Expanded survivor and researcher stories

A marketing program, designed to provide urologists with patient information materials and drive new visitors to the website, was launched in September, 2010. The first wave of materials was mailed to practitioners in the New York and Los Angeles metropolitan areas. This program will be monitored and assessed for further implementation in the coming year.

The Power of Social Networking

In 2009, PCF launched several social media initiatives. Within 12 months, the number of PCF Facebook friends grew by more than 1,000 percent to over 8,000. Since January 2010, PCF has attracted more than 1,500 Twitter followers. These tools deliver breaking news and information to PCF followers in a highly-visible and cost-effective manner. A pilot awareness program for pcf.org on widely-read WebMD® and a new prostate cancer blog, www.mynewyorkminute.org, are also helping to introduce patients and their caregivers to PCF, its mission and information resources.

Reaching a Disproportionately-Affected Population of Men

Understanding that African-American men are 60 percent more likely to be diagnosed with prostate cancer and 2.4 times more likely to die from it, PCF identified an urgent need to better reach this group of men with the important message of early detection and treatment. In 2009, PCF teamed with Grammy-nominated R&B artist and survivor Charlie Wilson and the Black Barbershop Health Outreach Program (BBHOP). Through his concert tours and media coverage, Wilson has delivered this important health message to more than three million American men and their families. PCF also provided BBHOP with a Communications Grant to support its 50 City Tour, bringing information on prostate cancer, diabetes and hypertension to inner-city African-American communities. To support these efforts, PCF produced a special brochure, Prostate Cancer: Straight Talk for African-American Men and Their Families, available at www.pcf.org/guides.
PCF mobilized the meeting and spearheaded a cooperative effort with ZERO—The Project to End Prostate Cancer, the Prostate Health Education Network (PHEN) and the Black Barbershop Health Outreach Program (BBHOP). The vision was to create a critical mass of events and meetings during September, National Prostate Cancer Awareness month.

The Advance on Washington was a highly visible and integrated program of media events and meetings focused on prostate cancer research, discovery, advocacy, healthcare disparities and overall awareness.

With more than 1,000 scientists, specialists, advocates and patients converging on our nation’s capital, PCF and the three partnering organizations were able to share program speakers and hold a joint press conference. This effectively advanced our message for increased government support to our nation’s leaders. During the press conference, PCF issued a Five-Point Call to Action for ending prostate cancer that was endorsed by 14 U.S. prostate cancer organizations.

PCF representatives were featured guest speakers at ZERO’s Advocacy Summit, the African-American Prostate Cancer Disparities Meeting sponsored by PHEN, and at the Congressional Black Caucus Meeting. The BBHOP, with sponsorship from PCF, concluded the week by conducting special informational events and health screenings for prostate cancer, hypertension and diabetes at 16 inner-city barbershops in Washington, D.C. and Baltimore.

The 17th Annual Scientific Retreat was the largest to date and received high marks for its content and context. Prostate cancer researchers and patients will benefit from the Advance on Washington for months to come.
In the U.S. alone, more than $1 billion is spent each year on overtreating men who are diagnosed with non-life-threatening varieties of prostate cancer, while more than 32,000 will die from the aggressive types of this cancer in 2010. By 2015, the number of new annual cases is predicted to rise beyond 300,000 from 218,000 in 2010, making prostate cancer the number one men’s health crisis in America.

With recent progress, prostate cancer is at an historic turning point. We believe we can soon reach our goal of curing more and overtreating less, ending death and suffering from this disease while returning billions of dollars to the American economy. However, we cannot let up on government and private investment for a cure.

The Five-Point Call to Action issued to our nation’s leaders is designed to free us from the burden of prostate cancer. The Call to Action is endorsed by PCF and 13 other prostate cancer organizations.

- American Urological Association
- The AUA Foundation
- Black Barbershop Health Outreach Program
- Malecare Prostate Cancer Support
- Men’s Health Network
- National Alliance of State Prostate Cancer Coalitions
- Prostate Cancer International
- Prostate Conditions Education Council
- Prostate Health Education Network
- The Prostate Net
- US TOO International
- Women Against Prostate Cancer
- ZERO—The Project to End Prostate Cancer

**PCF’s Five-Point Call to Action**

1. Increase the NCI’s $5 billion annual budget to accelerate basic and treatment sciences research for human prostate cancer from $294 million to a transparent $400 million.

2. Increase the appropriation for the Congressionally Directed Medical Research Program for Prostate Cancer at the Department of Defense to $120 million from $80 million.

3. Establish an Office on Men’s Health (OMH) in the Department of Health and Human Services equivalent to the Office on Women’s Health (OWH), established in 1991.

4. Create a Prostate Cancer Scientific Advisory Board for the Office of the Chief Scientist at the FDA to accelerate real-time sharing of the latest research data and accelerate movement of new medicines to patients.

5. Create human capital by launching more careers of the best and brightest scientists in the U.S. to solve the prostate cancer problem.

During the *Advance* week, Senate Bill S.3775—The Prostate Cancer Act of 2010—was introduced by Senator Jon Tester from Montana (pictured below). It calls for greater coordination and inter-agency research collaboration, and greater reach to rural patients. At the close of September, House Bill H.R. 6389, supporting prostate cancer research and education, was introduced by Representative Edolphus “Ed” Towns from New York.
Clockwise from top left: Jean Fogelberg speaks at PCF’s Survivors Breakfast • Tom Farrington of the Prostate Health Education Network and Dr. Stanley Frencher of the Black Barbershop Health Outreach Program answer questions at the Advance on Washington joint press conference • Dr. William Nelson, Senator John Kerry (D-MA) and PCF Chairman Mike Milken at the Congressional Reception on Capitol Hill • Dan Zenka, PCF VP of Communications, opens the Survivors Breakfast with PCF Young Investigators • Dr. Charles Sawyers shares his research at PCF’s Scientific Retreat • Movember founder
Adam Garone addresses attendees at PCF’s Retreat • Mike Milken and Senator Jeff Sessions (R-AL) at the Congressional Reception • PCF donor Stewart Rahr discusses the latest in scientific advances with PCF Young Investigators • PCF Young Investigators collaborate on innovative research prior to the opening of the Scientific Retreat • U.S. Speaker of the House, Nancy Pelosi and Mike Milken speak to members of the press on Capitol Hill • PCF President and CEO, Dr. Jonathan Simons speaks at the press conference • Reverend Rosey Grier, PCF director, and Senator Jeff Sessions meet on Capitol Hill
A SPECIAL THANK YOU

The Prostate Cancer Foundation would like to thank everyone who has supported us during the past seventeen years. We gratefully acknowledge the following individuals, foundations, corporations and others who have given at least $5,000 since our founding.

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EVENTS FOR CURES

Each year, PCF benefits from events that provide an opportunity to communicate PCF’s mission, support awareness for the cause and raise funds for research. These events provide our supporters with a broad range of opportunities to get involved for cures.

Clockwise from top left: PCF’s 2009 New York Dinner, featuring David Foster and Andrea Bocelli, raised more than $4 million for research and eight new Young Investigators • Major League Baseball’s 2010 All-Star 5K and Fun Run featured more than 9,000 participants and raised $50,000 • More Mo’ Bros and Mo’ Sistas are joining the fun each “Movember,” celebrating moustache growth for research. To date, Movember has raised more than $2.5 million for research • PCF’s annual Home Run Challenge brought our message to baseball fans across the country and raised almost $2 million from pledges in 2010
Dear Friend,

With recent breakthroughs in research, prostate cancer is at an historic turning point and we are closer than ever to eliminating death and suffering from this disease that affects more than 2.5 million American men and their families. This rate of progress would be unsustainable without your ongoing support.

Your investment in the Prostate Cancer Foundation is carefully deployed. Since 1993, virtually every important discovery in the battle against this disease has been stimulated and fast-forwarded by PCF funding or coordination. Moreover, every dollar you contribute to PCF is multiplied 20 to 30 times. Our activities set into motion a ripple that spurs research at government, biopharma and charitable institutions and, in effect, leverages the millions of dollars we raise into billions.

This past September in Washington, D.C., shoulder to shoulder with our partners in the prostate cancer community, we asked our nation’s leaders to rededicate themselves to scientific innovation and achieve freedom from prostate cancer through increased research funding and enhanced support services for men who are diagnosed.

Your continued generosity is still urgently needed so we can continue the momentum we have achieved and realize our ultimate goal—the end of prostate cancer as a lethal disease.

On behalf of patients, families, caregivers and our research scientists around the world, we appreciate your support and ask that you give now so PCF can “turn off the lights” soon.

With deepest gratitude and wishes for good health,

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

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

The Prostate Cancer Foundation welcomes gifts of cash, securities, non-cash assets and gifts by will or living trust. We also welcome contributions made in memory, in tribute or in honor of friends or loved ones.

Challenge Awards ($1,000,000+)

PCF supports transformational prostate cancer research to accelerate progress toward the reduction of 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 the solution of a significant problem in prostate cancer research. Ranging from $300,000 to $1,000,000 per year for three years, these awards will cover direct costs of the research.

Creativity Awards ($300,000)

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)

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 (35 years or less) who are committing their lives to a cure for prostate cancer.

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

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 on a life insurance policy

For more information, visit www.pcf.org/donate
## PROSTATE CANCER FOUNDATION

### STATEMENTS OF FINANCIAL POSITION

<table>
<thead>
<tr>
<th>December 31</th>
<th>2009</th>
<th>2008</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ASSETS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Current assets:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cash and cash equivalents</td>
<td>$30,510,823</td>
<td>$27,894,591</td>
</tr>
<tr>
<td>Pledges receivable</td>
<td>$6,334,109</td>
<td>$4,043,333</td>
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<tr>
<td>Marketable securities</td>
<td>$51,968</td>
<td>$25,312</td>
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<tr>
<td>Prepaid expenses</td>
<td>$58,523</td>
<td>$80,497</td>
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<tr>
<td>Other receivables</td>
<td>$120,547</td>
<td>–</td>
</tr>
<tr>
<td><strong>Total current assets</strong></td>
<td>$37,075,970</td>
<td>$32,043,733</td>
</tr>
<tr>
<td><strong>Furniture, equipment and improvements:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Furniture and fixtures</td>
<td>$37,180</td>
<td>$37,180</td>
</tr>
<tr>
<td>Office equipment</td>
<td>$210,672</td>
<td>$110,574</td>
</tr>
<tr>
<td>Leasehold improvements</td>
<td>$246,891</td>
<td>$246,891</td>
</tr>
<tr>
<td>Computer software</td>
<td>$385,464</td>
<td>$344,384</td>
</tr>
<tr>
<td><strong>Less accumulated depreciation</strong></td>
<td>($688,415)</td>
<td>($606,244)</td>
</tr>
<tr>
<td><strong>Investments</strong></td>
<td>$560,000</td>
<td>$960,000</td>
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<tr>
<td><strong>Long-term pledges receivable</strong></td>
<td>$2,086,917</td>
<td>$2,772,772</td>
</tr>
<tr>
<td><strong>Total assets</strong></td>
<td>$39,914,679</td>
<td>$35,909,290</td>
</tr>
</tbody>
</table>

| **LIABILITIES AND NET ASSETS** |             |             |
| **Current liabilities:** |             |             |
| Accounts payable | $130,614    | $76,830     |
| Accrued liabilities | $309,588   | $953,057    |
| Accrued payroll and payroll-related liabilities | $573,438 | $424,103   |
| Research awards payable | $13,238,378 | $10,356,378 |
| **Total current liabilities** | $14,252,018 | $11,810,368 |
| Long-term research awards payable | $3,115,000 | $8,106,377 |
| **Total liabilities** | $17,367,018 | $19,916,745 |
| **Unrestricted net assets** | $22,547,661 | $15,992,545 |
| **Total liabilities and net assets** | $39,914,679 | $35,909,290 |
## PROSTATE CANCER FOUNDATION
### STATEMENTS OF ACTIVITIES

<table>
<thead>
<tr>
<th></th>
<th>2009</th>
<th>2008</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Support and revenues:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Donations</td>
<td>$33,265,074</td>
<td>$36,720,708</td>
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<tr>
<td>Net realized and unrealized loss on investments</td>
<td>(415,074)</td>
<td>(3,805)</td>
</tr>
<tr>
<td>Interest and other income</td>
<td>329,244</td>
<td>520,254</td>
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<tr>
<td><strong>Total support and revenues</strong></td>
<td><strong>33,179,244</strong></td>
<td><strong>37,237,157</strong></td>
</tr>
<tr>
<td><strong>Program services:</strong></td>
<td></td>
<td></td>
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<tr>
<td>Research grants, association awards and donations</td>
<td>15,153,848</td>
<td>28,069,538</td>
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<tr>
<td>Scientific conferences</td>
<td>2,059,200</td>
<td>2,086,024</td>
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<tr>
<td>Public awareness and advocacy expense</td>
<td>2,194,062</td>
<td>2,529,047</td>
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<tr>
<td><strong>Total program services</strong></td>
<td><strong>19,407,110</strong></td>
<td><strong>32,684,609</strong></td>
</tr>
<tr>
<td>General and administrative expenses</td>
<td>2,714,456</td>
<td>2,887,230</td>
</tr>
<tr>
<td>Fund-raising expenses</td>
<td>4,502,562</td>
<td>4,403,510</td>
</tr>
<tr>
<td><strong>Total expenditures</strong></td>
<td><strong>26,624,128</strong></td>
<td><strong>39,975,349</strong></td>
</tr>
<tr>
<td>Increase (decrease) in net assets</td>
<td>6,555,116</td>
<td>(2,738,192)</td>
</tr>
<tr>
<td>Net assets at beginning of year</td>
<td>15,992,545</td>
<td>18,730,737</td>
</tr>
<tr>
<td><strong>Net assets at end of year</strong></td>
<td><strong>$22,547,661</strong></td>
<td><strong>$15,992,545</strong></td>
</tr>
<tr>
<td></td>
<td>2009</td>
<td>2008</td>
</tr>
<tr>
<td>------------------------</td>
<td>----------</td>
<td>----------</td>
</tr>
<tr>
<td><strong>Operating activities</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Increase (decrease) in net assets</td>
<td>$ 6,555,116</td>
<td>$ (2,738,192)</td>
</tr>
<tr>
<td><strong>Adjustments to reconcile increase (decrease) in net assets to net cash provided by operating activities:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Depreciation and amortization</td>
<td>82,171</td>
<td>63,787</td>
</tr>
<tr>
<td>Donation of marketable securities</td>
<td>(399,533)</td>
<td>(116,462)</td>
</tr>
<tr>
<td>Net realized and unrealized loss on investments</td>
<td>415,074</td>
<td>3,805</td>
</tr>
<tr>
<td>Proceeds from sales of marketable securities</td>
<td>384,459</td>
<td>237,758</td>
</tr>
<tr>
<td><strong>Changes in operating assets and liabilities:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pledges receivable</td>
<td>(1,604,921)</td>
<td>862,649</td>
</tr>
<tr>
<td>Marketable securities</td>
<td>(26,656)</td>
<td>(1,057,545)</td>
</tr>
<tr>
<td>Prepaid expenses</td>
<td>21,974</td>
<td>(21,281)</td>
</tr>
<tr>
<td>Other receivables</td>
<td>(120,547)</td>
<td>50,564</td>
</tr>
<tr>
<td>Accounts payable</td>
<td>53,784</td>
<td>(289,705)</td>
</tr>
<tr>
<td>Accrued liabilities</td>
<td>(643,469)</td>
<td>(109,955)</td>
</tr>
<tr>
<td>Accrued payroll and payroll-related liabilities</td>
<td>149,335</td>
<td>(59,745)</td>
</tr>
<tr>
<td>Research awards payable</td>
<td>(2,109,377)</td>
<td>9,812,755</td>
</tr>
<tr>
<td><strong>Net cash provided by operating activities</strong></td>
<td>2,757,410</td>
<td>6,638,433</td>
</tr>
<tr>
<td><strong>Investing activities</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Purchase of furniture, equipment and improvements</td>
<td>(141,178)</td>
<td>(19,104)</td>
</tr>
<tr>
<td><strong>Net cash used in investing activities</strong></td>
<td>(141,178)</td>
<td>(19,104)</td>
</tr>
<tr>
<td><strong>Net increase in cash and cash equivalents</strong></td>
<td>2,616,232</td>
<td>6,619,329</td>
</tr>
<tr>
<td>Cash and cash equivalents at beginning of year</td>
<td>27,894,591</td>
<td>21,275,262</td>
</tr>
<tr>
<td><strong>Cash and cash equivalents at end of year</strong></td>
<td>$ 30,510,823</td>
<td>$ 27,894,591</td>
</tr>
</tbody>
</table>
Board of Directors
Prostate Cancer Foundation

We have audited the statements of financial position of Prostate Cancer Foundation (the Foundation) as of December 31, 2009 and 2008, and the related statements of activities and cash flows for the years then ended. These financial statements are the responsibility of the Foundation’s management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States and the standards applicable to financial audits contained in Government Auditing Standards, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audits to obtain reasonable assurance about whether the financial statements are free of material misstatement. We were not engaged to perform an audit of the Foundation’s internal control over financial reporting. Our audits included consideration of internal control over financial reporting as a basis for designing audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Foundation’s internal control over financial reporting. Accordingly, we express no such opinion. An audit also includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements, assessing the accounting principles used and significant estimates made by management and evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the Foundation at December 31, 2009 and 2008, and the changes in its net assets and its cash flows for the years then ended in conformity with accounting principles generally accepted in the United States.

Ernst & Young LLP

Ernst & Young

August 27, 2010
PARTNERS FOR PROGRESS

PCF is grateful for the support of our Partners for Progress. These organizations’ major contributions and campaigns are enabling PCF to move closer to our goal of realizing a world without prostate cancer.

Platinum Partners

Supporting Partners

Biotechnology & Pharmaceutical Partners
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Vice Chairman
Roll International

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BR Ventures

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Stupski Foundation

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President and Chairman
Zenith National Insurance Corp.

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Chief Executive Officer
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Treasurer and Secretary

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Stuart Holden, MD
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Jan Haber
Vice President
Events, Donor Relations

Helen Hsieh
Vice President
Finance and Administration

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Vice President
Baseball and Sports Enterprises

Jan Wolterstorff
Vice President
Movember Initiatives

Dan Zenka, APR
Vice President
Communications

PCF’s research and outreach progress provides an important base for accelerating the end of suffering from prostate cancer.