Board of Directors

OFFICERS
Christopher A. Fausel, PharmD, MHA, BCOP — Chairman
Bert H. O’Neil, MD — Chief Medical Officer
Charles Fox — Secretary

MEMBERS-AT-LARGE
Sumeet Bhatia, MD
Kerry Bridges, MBA, RN, CCRC
Lawrence Einhorn, MD
Christopher LeMasters, MBA
Ziyue Liu, PhD (non-voting)
Patrick Loehrer, Sr., MD
Timothy Ratliff, PhD
Bryan Schneider, MD
Chairman’s Letter

Hoosier Cancer Research Network (HCRN), formerly known as Hoosier Oncology Group, began in 1984 as a unique partnership between the Indiana University School of Medicine and community oncologists throughout the state of Indiana to develop cancer clinical trials. Through the vision of its founders, Drs. Rafat Ansari, Lawrence Einhorn, William Fisher, Patrick Loehrer, Sr., RM Prasad Mantravadi, and Kenneth Pennington, and the hard work of physicians and staff, HCRN conducted a number of successful trials throughout the state of Indiana.

The organization’s reach has expanded, and today includes a network of more than 130 members, including nearly 40 prestigious academic medical centers across the country. HCRN has embarked on an even bolder partnership, serving as the administrative headquarters of the Big Ten Cancer Research Consortium, uniting the Big Ten cancer centers in a single network leveraging the cumulative clinical and laboratory expertise of these sites for clinical trial development.

As a result of this unprecedented growth, HCRN’s Board of Directors discussed the selection of a new organizational name that reflected both the heritage of its founding vision and its dynamic collaborations with oncology researchers across the country. Consequently, the Board of Directors voted unanimously to change the organization’s name from Hoosier Oncology Group to Hoosier Cancer Research Network effective May 2014.

The past year proved significant as well with regard to philanthropic partnerships. HCRN received a transformational gift from the estate of Margaret M. Weeks and a generous gift from business and civic leader Donald C. “Danny” Danielson through a grant established by the Walther Cancer Foundation. The immediate impact of these gifts will enable the organization to expand its biospecimen repository and fund translational research from young investigators such as Shadia Jalal, MD, and Safi Shahda, MD, from the IU Simon Cancer Center. HCRN is grateful for the support of its contributors, many of whom are recognized in this report.

In July 2013, HCRN signed a contract with Forte Research Systems to make OnCore the Clinical Trial Management System for all clinical trials going forward. The transition to OnCore will allow near complete management of clinical trials in one software package, including regulatory management, protocol management, electronic data capture, and site management. The agreement with Forte also includes biospecimen management and unified registries management components. In an effort to extend OnCore for the financial management of multicenter clinical trials, HCRN has entered into a collaboration with Forte to enhance OnCore’s current financial management capabilities. In the long run, the partnership with Forte Research Systems will provide substantial efficiencies for the management of HCRN’s clinical trials.

Through all of its clinical trials, HCRN intends to have a bench-to-bedside translational component to define precisely which patients benefit the most from specific treatment interventions. HCRN’s first clinical trial in OnCore, led by Dr. Bryan Schneider at the IU Simon Cancer Center, explores genomic sequencing to tailor treatment options for individual patients on study, with the goal of improving cure rates for these patients with triple negative breast cancer. It is one of the first trials of its kind in the country.

As HCRN enters its fourth decade, the organization is positioned to build on its rich history, expanding its reach to more patients than ever before through collaborations with a growing number of academic and community sites. With an increasing focus on its clinical trial portfolio to include highly translational studies such as mentioned above, its expansive community and academic collaborations, and its philanthropic partnerships, HCRN continues to explore the infinite possibilities in cancer treatment to drive toward our ultimate goal: cure for all patients.
Chief Scientific Officer Transition

Noah Hahn, MD, concluded his tenure as chief scientific officer of Hoosier Cancer Research Network and associate professor of medicine at the Indiana University Melvin and Bren Simon Cancer Center (IUSCC) in spring 2014. He joined the Johns Hopkins School of Medicine and the Sidney Kimmel Comprehensive Cancer Center as bladder cancer program director in April.

Dr. Hahn served at Hoosier Cancer Research Network since 2009 as chief medical officer on the board of directors, and since 2012 as chief scientific officer. During this time the organization experienced significant growth, including an increase in its network of members to more than 130 academic and community sites in early 2014. Dr. Hahn cultivated relationships with numerous pharmaceutical and biotech partners over the years.

Dr. Hahn also played a significant role in the Big Ten Cancer Research Consortium (BTCRC), serving as the organization’s first executive officer during a time that featured several milestone accomplishments following initial discussions to form the BTCRC in 2011.

At IUSCC, Dr. Hahn directed the clinical and translational research efforts of the prostate and bladder cancer programs. In that role, he delivered care to all advanced prostate and bladder cancer patients, established a clinical and biorepository database as a foundation for translational research, participated in regulatory oversight of prostate and bladder cancer trials, and worked to secure grant funding for research.

The HCRN Board of Directors appointed Bert H. O’Neil, MD, as chief scientific officer in 2014. Dr. O’Neil is the Joseph W. and Jackie J. Cusick Professor of Oncology and a professor of medicine at the Indiana University School of Medicine. He also is the Phase I director and director of the gastrointestinal cancer research program at the Indiana University Melvin and Bren Simon Cancer Center, and represents the cancer center on the Big Ten Cancer Research Consortium steering committee.

As the Phase I director at IUSCC, Dr. O’Neil oversees clinical trials that are the necessary first step in testing a new cancer treatment in patients. Phase I studies test the best way to give a new treatment (for example, by mouth, intravenous infusion, or injection) and the best dose.

Dr. O’Neil was most recently an associate professor of medicine and director of the gastrointestinal malignancies research program at the University of North Carolina at Chapel Hill. He also was the medical director of the UNC Lineberger Comprehensive Cancer Center’s clinical protocol office, where he designed and conducted clinical and translational studies.

He is a member of the American Association of Cancer Research and the American Society of Clinical Oncology. He also is a section reviewer for the journal Gastrointestinal Malignancies and an ad hoc reviewer for the Journal of Clinical Oncology, Cancer, Oncology, Lancet Oncology, Gastroenterology, American Journal of Oncology, and the Annals of Oncology, among others. He presents regularly at national scientific meetings.
2013 Highlights in Review

ASCO 2013 Highlights

Four HCRN studies were featured during ASCO 2013.

Trials in progress (abstracts/posters)

- A phase I/II study of the vascular disrupting agent BNC105P in combination with gemcitabine-carboplatin in partially platinum-sensitive ovarian cancer patients in first or second relapse: An international collaborative group trial of ANZGOG and Hoosier Oncology Group QL12-154
- The Pacific trial: A randomized phase II study of OGX-427 in men with metastatic castration-resistant prostate cancer (mCRPC) and PSA progression while receiving abiraterone acetate (AA): Hoosier Oncology Group GU12-159

Reported Phase I Results (abstract/poster)

- A phase I/II trial of BNC105P with everolimus in metastatic renal cell carcinoma (mRCC) patients: Updated phase I results of the Disruptor-1 trial. Hoosier Oncology Group GU09-145

Big Ten Cancer Research Consortium Kick-Off

Hoosier Cancer Research Network coordinated the public kick-off event for the Big Ten Cancer Research Consortium during ASCO 2013 in Chicago. The event yielded great interest from the research community as well as pharmaceutical and biotech companies, and was widely publicized through regional and national media. HCRN serves as the administrative headquarters for the BTCRC. For more information, visit www.bigtencrc.org.

Holiday Outreach

Each year, the HCRN staff joins together to provide holiday gifts for the family of a clinical trial participant. The tradition began in 2009 as a way to give back to brave oncology patients and their families who are facing the loss of a loved one.
We have audited the accompanying financial statements of the Hoosier Oncology Group, Inc., (the “Organization”) which comprise the statements of financial position as of June 30, 2013 and 2012, and the related statements of activities and cash flows for the years then ended, and the related notes to the financial statements.

Management’s Responsibility for the Financial Statements
Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor’s Responsibility
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 of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor’s judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity’s preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity’s internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion
In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Hoosier Oncology Group, Inc. as of June 30, 2013 and 2012, and the results of their operations and their cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Other Matter
Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplementary schedules of functional expenses are presented for purposes of additional analysis and are not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

Crowe Horwath LLP
Indianapolis, Indiana
October 24, 2013
Hoosier Oncology Group, Inc.
STATEMENTS OF FINANCIAL POSITION
June 30, 2013 and 2012

<table>
<thead>
<tr>
<th>ASSETS</th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash and cash equivalents</td>
<td>$2,256,786</td>
<td>$2,374,582</td>
</tr>
<tr>
<td>Accounts and grants receivable, net</td>
<td>1,979,428</td>
<td>1,872,855</td>
</tr>
<tr>
<td>Prepaid expenses</td>
<td>153,157</td>
<td>146,972</td>
</tr>
<tr>
<td>Investments (Note 2)</td>
<td>996,723</td>
<td>-</td>
</tr>
<tr>
<td>Bequest receivable (Note 3)</td>
<td>1,910,878</td>
<td>-</td>
</tr>
<tr>
<td>Property and equipment, net (Note 4)</td>
<td>24,550</td>
<td>25,435</td>
</tr>
<tr>
<td><strong>Total assets</strong></td>
<td><strong>$7,321,522</strong></td>
<td><strong>$4,419,844</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>LIABILITIES AND NET ASSETS</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Liabilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accounts payable</td>
<td>$330,327</td>
<td>$286,142</td>
</tr>
<tr>
<td>Affiliate sites payable (Note 1)</td>
<td>278,966</td>
<td>272,463</td>
</tr>
<tr>
<td>Accrued payroll and vacation</td>
<td>103,239</td>
<td>64,836</td>
</tr>
<tr>
<td>Deferred revenue</td>
<td>141,000</td>
<td>-</td>
</tr>
<tr>
<td><strong>Total liabilities</strong></td>
<td><strong>853,532</strong></td>
<td><strong>623,441</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Net assets</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Unrestricted</td>
<td>4,381,994</td>
<td>3,628,785</td>
</tr>
<tr>
<td>Temporarily restricted (Note 1)</td>
<td>2,085,996</td>
<td>167,618</td>
</tr>
<tr>
<td><strong>Total net assets</strong></td>
<td><strong>6,467,990</strong></td>
<td><strong>3,796,403</strong></td>
</tr>
</tbody>
</table>

| **Total liabilities and net assets** | **$7,321,522** | **$4,419,844** |

*The complete independent auditor’s report, including notes to financial statements, is available upon request.*
**Financial Statements (continued)**

Hoosier Oncology Group, Inc.  
STATEMENTS OF ACTIVITIES  
Year ended June 30, 2013 (with summary total for the year ended June 30, 2012)

<table>
<thead>
<tr>
<th></th>
<th>Unrestricted</th>
<th>Temporary</th>
<th>2013 Total</th>
<th>2012 Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Revenues</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>External support – research</td>
<td>$4,876,881</td>
<td>$</td>
<td>$4,876,881</td>
<td>$3,790,014</td>
</tr>
<tr>
<td>Federal research grants</td>
<td>42,640</td>
<td>-</td>
<td>42,640</td>
<td>133,993</td>
</tr>
<tr>
<td>Contributions and other grant support</td>
<td>322,064</td>
<td>1,918,378</td>
<td>2,240,442</td>
<td>381,636</td>
</tr>
<tr>
<td>Interest income from cash</td>
<td>6,572</td>
<td>-</td>
<td>6,572</td>
<td>7,542</td>
</tr>
<tr>
<td>Net investment loss (Note 2)</td>
<td>(3,277)</td>
<td>-</td>
<td>(3,277)</td>
<td>-</td>
</tr>
<tr>
<td>Other income</td>
<td>5,150</td>
<td>-</td>
<td>5,150</td>
<td>4,592</td>
</tr>
<tr>
<td>Releases from restriction</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>Total revenues</strong></td>
<td>5,250,030</td>
<td>1,918,378</td>
<td>7,168,408</td>
<td>4,317,777</td>
</tr>
</tbody>
</table>

| **Expenses**           |              |           |            |            |
| Program services       |              |           |            |            |
| Investigator initiated research | 2,359,217   | -         | 2,359,217  | 1,475,096  |
| Industry research      | 1,368,770    | -         | 1,368,770  | 1,275,466  |
| Government research    | 73,928       | -         | 73,928     | 275,702    |
| **Total program services** | 3,801,915   | -         | 3,801,915  | 3,026,264  |

| Supporting services    |              |           |            |            |
| Administration         | 694,906      | -         | 694,906    | 660,564    |
| Fundraising            | -            | -         | -          | 7138       |
| **Total supporting services** | 694,906     | -         | 694,906    | 667,702    |

| **Total expenses**     | 4,496,821    | -         | 4,496,821  | 3,693,966  |

| **Change in net assets** |    |           |            |            |
| Net assets, beginning of year | 3,628,785   | 167,618   | 3,796,403  | 3,172,592  |

| Net assets, end of year | $4,381,994 | $2,085,996 | $6,467,990 | $3,796,403 |

The complete independent auditor’s report, including notes to financial statements, is available upon request.
## Hoosier Oncology Group, Inc.
### STATEMENTS OF CASH FLOWS
#### Years ended June 30, 2013 and 2012

<table>
<thead>
<tr>
<th></th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Cash flows from operating activities</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Change in net assets</td>
<td>$2,671,587</td>
<td>$623,811</td>
</tr>
<tr>
<td>Adjustments to reconcile change in net assets to net cash from operating activities:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Depreciation</td>
<td>9,146</td>
<td>11,766</td>
</tr>
<tr>
<td>Unrealized losses on investments</td>
<td>4,187</td>
<td>-</td>
</tr>
<tr>
<td>Change in assets and liabilities:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accounts and grants receivable</td>
<td>(106,573)</td>
<td>(714,220)</td>
</tr>
<tr>
<td>Bequest receivable</td>
<td>(1,910,878)</td>
<td>-</td>
</tr>
<tr>
<td>Prepaid expenses</td>
<td>(6,185)</td>
<td>(69,565)</td>
</tr>
<tr>
<td>Accounts payable</td>
<td>44,185</td>
<td>146,533</td>
</tr>
<tr>
<td>Affiliate sites payable</td>
<td>6,503</td>
<td>27,511</td>
</tr>
<tr>
<td>Accrued payroll and vacation</td>
<td>38,403</td>
<td>(15,790)</td>
</tr>
<tr>
<td>Deferred revenue</td>
<td>141,000</td>
<td>-</td>
</tr>
<tr>
<td>Total net cash from operating activities</td>
<td>891,375</td>
<td>10,046</td>
</tr>
</tbody>
</table>

| **Cash flows from investing activities** | | |
| Purchase of property and equipment    | (8,261) | (2,730) |
| Purchase of investments               | (1,009,171) | - |
| Net cash from investing activities    | (1,009,171) | (2,730) |

Net change in cash and cash equivalents

<table>
<thead>
<tr>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>(117,796)</td>
<td>7,316</td>
</tr>
</tbody>
</table>

Cash and cash equivalents at beginning of year

<table>
<thead>
<tr>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>2,374,582</td>
<td>2,367,266</td>
</tr>
</tbody>
</table>

Cash and cash equivalents at end of year

<table>
<thead>
<tr>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>$2,256,786</td>
<td>$2,374,582</td>
</tr>
</tbody>
</table>

The complete independent auditor’s report, including notes to financial statements, is available upon request.
Network of Researchers and Collaborators

Our member network includes more than 130 sites, including 55+ academic and 80+ community sites.

HCRN provides management of trials and sample logistics for the Translational Breast Cancer Research Consortium.

HCRN serves as Administrative Headquarters for the Big Ten Cancer Research Consortium.
Our member network includes more than 400 physicians and clinical research practitioners.

International member sites are located in Australia, Canada, Peru, Singapore, and the United Kingdom.
Member Network: Academic Sites

ALABAMA
University of Alabama at Birmingham, Birmingham

ARIZONA
Mayo Clinic Cancer Center, Phoenix

CALIFORNIA
City of Hope, Duarte
University of California Los Angeles (TRIO), Pasadena
USC Norris Comprehensive Cancer Center, Los Angeles

COLORADO
University of Colorado Cancer Center, Aurora

FLORIDA
University of Florida, Gainesville
University of Miami, Miami

GEORGIA
Winship Cancer Institute, Emory University, Atlanta

ILLINOIS
Northwestern University Feinberg School of Medicine, Chicago
University of Chicago Medical Center, Chicago

INDIANA
Indiana University Melvin and Bren Simon Cancer Center, Indianapolis

LOUISIANA
LSU Health Care Center, Houma

MARYLAND
Johns Hopkins, Baltimore
University of Maryland, Baltimore

MASSACHUSETTS
Dana-Farber Cancer Institute, Boston
Tufts Medical Center, Boston

MICHIGAN
University of Michigan Comprehensive Cancer Center, Ann Arbor

MINNESOTA
Mayo Clinic Rochester (TBCRC), Rochester

MISSOURI
Washington University School of Medicine, St. Louis

NEW HAMPSHIRE
Dartmouth-Hitchcock Medical Center, Lebanon

NEW JERSEY
John Theurer Cancer Center at Hackensack University Medical Center, Hackensack
Memorial Sloan Kettering Cancer Center, Basking Ridge
Rutgers Cancer Institute of New Jersey, New Brunswick

NEW MEXICO
University of New Mexico Cancer Center (NMCCA), Albuquerque

NEW YORK
Memorial Sloan Kettering Cancer Center, Commack
Memorial Sloan Kettering Cancer Center, New York
Memorial Sloan Kettering Cancer Center, Rockville Centre
Memorial Sloan Kettering Cancer Center, Sleepy Hollow
New York University Clinical Cancer Center, New York
Roswell Park Cancer Institute, Buffalo

The Tisch Cancer Institute at Mount Sinai Medical Center, New York
University of Rochester Medical Center, Rochester

NORTH CAROLINA
Duke University Medical Center (TBCRC), Durham

OHIO
Cleveland Clinic, Cleveland
University Hospitals Seidman Cancer Center, Cleveland

OREGON
Oregon Health & Sciences University, Portland
Providence Portland Medical Center, Portland

PENNSYLVANIA
Fox Chase Cancer Center, Philadelphia
Thomas Jefferson University Hospital, Philadelphia
University of Pennsylvania, Philadelphia

SOUTH CAROLINA
Medical University of South Carolina, Charleston

TENNESSEE
Vanderbilt University Medical Center (TBCRC), Nashville

TEXAS
Baylor College of Medicine - Methodist Breast Center, Houston
Cancer Therapy & Research Center at UT Health Sciences, San Antonio
MD Anderson Cancer Center, Houston
The Methodist Hospital, Houston
UT Medical Branch at Galveston
UT Southwestern Medical Center, Dallas

WASHINGTON
University of Washington, Seattle

WASHINGTON, D.C.
Georgetown University Medical Center (TBCRC)

WISCONSIN
Froedtert & the Medical College of Wisconsin, Milwaukee
University of Wisconsin Carbone Cancer Center, Madison

CANADA
Cancer Care Manitoba, Manitoba
Centre Hospitalier de l’Université de Montréal, Quebec

PERU
Instituto de Enfermedades Neoplasicas, Lima

UNITED KINGDOM
Centre for Experimental Cancer Medicine, London

Research Networks

MUSC: Medical University of South Carolina
NMCCA: New Mexico Cancer Care Alliance
SCCA: Seattle Cancer Care Alliance
(under agreement with University of Washington)
TBCRC: Translational Breast Cancer Research Consortium
TRIO: Translational Research in Oncology
Member Network: Community Sites

ARIZONA
Yuma Regional Cancer Center, LLC, Yuma

ARKANSAS
Genesis Cancer Center, Hot Springs

CALIFORNIA
Central Coast Medical Oncology Corp. (TRIO), Santa Maria
Marin Cancer Center, Greenbrae
Prostate Oncology Specialists, Inc., Marina Del Rey
St. Jude Heritage Healthcare (TRIO), Fullerton
West Valley Hematology Oncology (TRIO), Northridge

DELAWARE
Christiana Care Health Services, Newark

FLORIDA
Memorial Breast Cancer Center (TRIO), Hollywood

ILLINOIS
Illinois CancerCare, PC, Galesburg

INDIANA
Community Healthcare - Primary Care Oncology, Munster
Community Hospitals of Indiana, Inc., Indianapolis
Floyd Memorial Hospital and Health Services, New Albany
Fort Wayne Medical Oncology & Hematology, Fort Wayne
Good Samaritan Hospital, Vincennes
Hope Center, Terre Haute
Horizon Oncology Research, Inc., Lafayette
IU Health Arnett Cancer Centers, Lafayette
IU Health at Ball Memorial Hospital Cancer Center, Muncie
IU Health Bloomington Hospital, Bloomington
IU Health Central Indiana Cancer Centers, Indianapolis
IU Health Goshen Center for Cancer Care, Goshen
Jasper Memorial Hospital, Jasper
Kosciusko Community Hospital Cancer Care Center, Warsaw
Northern Indiana Cancer Research Consortium, Inc., South Bend
Oncology Hematology Associates of SW Indiana, Newburgh
Providence Medical Group, Terre Haute
Radiation Oncology Associates, Fort Wayne
St.Vincent Health, Indianapolis

IOWA
Siouxland Hematology Oncology Associates, LLP, Sioux City

KANSAS
Cancer Center of Kansas, Wichita

MARYLAND
Meritus Health, Hagerstown

MICHIGAN
Metro Health Cancer Center, Wyoming
St. Joseph Mercy Hospital, Ann Arbor

MONTANA
Bozeman Deaconess Cancer Center (SCCA), Bozeman

NEBRASKA
Nebraska Methodist Hospital, Omaha

NEVADA
Comprehensive Cancer Centers of Nevada (TRIO), Henderson

NEW JERSEY
Fox Chase Hunterdon Regional Cancer Center, Flemington

NEW MEXICO
Hematology Oncology Associates (NMCCA), Albuquerque
Memorial Medical Cancer Center (NMCCA), Las Cruces
Presbyterian Medical Group (NMCCA), Albuquerque

NORTH CAROLINA
Hope Women’s Cancer Center (TRIO), Asheville

OKLAHOMA
Mercy Clinic Oklahoma Communities, Inc., Oklahoma City

PENNSYLVANIA
Allegheny General Hospital, Pittsburgh
Geisinger Medical Center, Danville
Gettysburg Cancer Center, Gettysburg
Grand View Hospital (Fox Chase), Sellersville
Magee-Womens Hospital of UPMC, Pittsburgh
Pennsylvania Oncology Hematology Associates (Fox Chase), Philadelphia
PinnacleHealth Cancer Care, Harrisburg
Reading Hospital Regional Cancer Center (Fox Chase), West Reading

SOUTH CAROLINA
Spartanburg Regional Healthcare System (MUSC), Spartanburg

TENNESSEE
The Jones Clinic PC, Germantown
The West Clinic, Memphis

TEXAS
Medicus Alliance Clinical Research, Houston
Texas Oncology PA, Dallas

VIRGINIA
Virginia Oncology Associates, Norfolk

WASHINGTON
Group Health (SCCA), Seattle
Seattle Cancer Care Alliance at Evergreen Health (SCCA), Kirkland

AUSTRALIA
Alfred Hospital, Victoria
Ashford Cancer Centre, South Australia
Austin Hospital, Victoria
Gallipoli Medical Research Foundation, Queensland
Launceston General Hospital, Tasmania
Peninsula Oncology Centre, Victoria
Prince of Wales Hospital, New South Wales
Princess Alexandra Hospital, Queensland
Royal Adelaide Hospital, South Australia
Royal Brisbane & Women’s Hospital, Queensland
Royal Perth Hospital, Western Australia
Royal Prince Alfred Hospital, New South Wales
Sydney Adventist Hospital LTD, New South Wales

CANADA
British Columbia Cancer Agency - Vancouver Centre, British Columbia
Cross Cancer Institute, Alberta
Juravinski Cancer Centre, Ontario
Tom Baker Cancer Centre, Alberta

SINGAPORE
National Cancer Centre Singapore, Department of Medical Oncology
In 2013, Donald C. “Danny” Danielson established the Danny Danielson Translational Innovation Award, granted by the Walther Cancer Foundation. The award, given twice each year, is given to investigators working in partnership with Hoosier Cancer Research Network to support the correlative components of clinical trial protocols when financial support is not otherwise available. The correlatives under investigation must have a future clinical application, such as development of new treatment strategies or identification of patient subsets for specific treatment therapies, and/or provide hypotheses for future clinical trials.

Danielson is well-known for his business leadership and generous support of individuals and organizations in the state of Indiana and beyond. He began a long and rewarding career with Modernfold, Inc., in 1948, in charge of sales, and later served as president of the company, based in New Castle, Ind. During his tenure at Modernfold, Danielson led the development of a new industry whose product, the Modernfold Door, transformed the way businesses, schools, and churches utilized interior space.

A career move in 1976 led Danielson to City Securities Corporation in Indianapolis, where he has served as vice chairman since 1981. At City Securities, he led a succession plan for CEO and president that selected leaders who have more than doubled revenues and earnings.

A graduate of Indiana University, Danielson has remained a lifelong champion of his alma mater, serving as a member of the Indiana University board of trustees from 1959-1980 and as chairman of the board for 11 years. He served as vice chairman of the Campaign for Indiana and co-chairman of the Endowment Campaign for Indiana University, both of which far exceeded fundraising goals.

Danielson has been deeply involved in his community and has served on the boards of numerous organizations. He served as chairman of the National Board of Trustees of the Fellowship of Christian Athletes from 1983-1987, during a time when the ministry more than doubled in size. He was appointed in 1990 by President George H. W. Bush to the Credit Standards Advisory Committee. He has received two Sagamore of the Wabash awards, and in 2009, Indiana Governor Mitch Daniels named him the recipient of the Sachem Award, the state’s highest honor given annually in recognition of a lifetime of excellence and personal virtue that reflects credit and honor upon the state. In 2010, he was inducted into the Junior Achievement of Central Indiana Business Hall of Fame. He was the Indianapolis Business Journal’s Healthcare Heroes Recipient in 2004. Together with his wife, Patricia, he led a $5.5 million campaign to build a new YMCA in New Castle, Ind.

Danielson was a friend and admirer of Dr. Joseph E. Walther. At age 94, he continues to serve on the board of directors of the Walther Cancer Foundation, which he joined at inception in 1985. He has been a great proponent of the Hoosier Cancer Research Network since its founding and, through the Foundation, a major contributor to the organization.

In 2013, Hoosier Cancer Research Network honored Safi Shahda, MD, as the inaugural recipient of the Danny Danielson Translational Innovation Award.

Dr. Shahda, a researcher at the Indiana University Melvin and Bren Simon Cancer Center, is a medical oncologist specializing in gastrointestinal malignancies and conducts phase I clinical trials. He will use the award to collect tumor samples from patients with pancreatic cancer. Samples will be collected before and after treatment, with the goal of learning why some patients benefit from treatment while others do not.
The Sandra Turner Excellence in Clinical Research Award was established in 2002 by Dr. William B. Fisher through the George and Sarah Jane Fisher Fund to honor the memory of Sandra Turner, the first executive director of Hoosier Cancer Research Network. Each year the organization selects individuals for the award who exemplify the qualities Sandra possessed and respected in others, such as sustained professional commitment, contribution to the progress of oncology care, and the unflinching touch of compassion.

“Sandra Turner brought a marvelous personality to her work,” said Dr. Fisher. “She was wonderful working with people and was fully committed to oncology. To recognize what she meant to us, and to recognize contributions made by non-physicians in the Hoosier Cancer Research Network who are so critical to the work we do, we began the Sandra Turner Awards.”

2013 Award Winners

Dori Olin
Study Coordinator
Medical & Surgical Specialists
Galesburg, Ill.

Theresa McGoff
Clinical Research Nurse
Metro Health Cancer Center

Previous Award Winners

Carol Young (2002)
Leslie Edgar (2003)
Jackie Brames (2004)
Kim Villain (2005)
Tammy Blauvelt (2006)
Kim Hahn (2007)
Lisa McVicker (2008)
Matt Burns (2009)
Maura Buckley (2011)
Patricia Hurst (2012)

Judy Sisk (2002)
Mary Jean Wasielewski (2003)
Diane Yoder (2004)
Denette Grider (2005)
Deb Estes (2006)
Anne Foster (2007)
Brenda Sloan (2009)
Mary Jean Wasielewski (2010)
Marietta Moore (2012)
In 2011, Dr. William B. Fisher generously endowed a new award through the George and Sarah Jane Fisher Fund to challenge the next generation of cancer researchers. The George and Sarah Jane Fisher Young Investigator Award honors Indiana University oncology fellows and faculty members who have made significant contributions to clinical or basic science research in collaboration with Hoosier Cancer Research Network. The award honors the memory of Dr. Fisher’s mother, Sarah Jane, and brother, George, both of whom died of cancer within the span of three years.

Dr. Fisher has dedicated his life to improving the lives of patients with cancer. As a practicing oncologist for more than 40 years, he has been a mentor to generations of residents and fellows at Ball Memorial Hospital in Muncie, Ind.

In 1984, Dr. Fisher co-founded Hoosier Cancer Research Network, and served as its vice chair until 2000. He has remained a strong supporter of the vision to bring together academic and community physicians to expand patient access to clinical trials throughout the state of Indiana.

Dr. Fisher’s interest in medicine began in childhood. His father was an internist in New Castle, Ind., and his older brother George also chose a career in medicine. Dr. Fisher studied pre-med at Wittenberg University. He attended medical school at the University of Pennsylvania, where his interest in oncology was sparked by Peter Nowell, MD, one of the co-discoverers of the Philadelphia chromosome, an abnormality associated with chronic myelogenous leukemia.

Fisher pursued a residency and fellowship at Case Western Reserve University where many of his mentors, including George Bernier, MD, were hematologists. Following his fellowship, Dr. Fisher entered the military and served for three years at Fort Carson in Colorado, where he practiced hematology/oncology. He strongly considered a career in the military, but his desire to return to the Midwest and establish roots in community practice led him to Ball Memorial Hospital in Muncie, Ind., in 1976, where he continues to practice today.

Over the years, Dr. Fisher has witnessed a transformation in cancer treatment. In the early years of his practice, drugs were developed and administered with little or no understanding of what led to the growth of cancer cells. “Of course, now we’ve evolved to the point where we know so much more about the growth and proliferation of a cancer cell, and the key driver mutations in some cancers,” he says. “We’re beginning to see that the future is going to be bright.”

Fisher believes strongly in the role individual contributors can play in furthering advances in research. Even small gifts, he says, when joined together can make a tremendous impact in the fight against cancer.

2013 Award Winner: Shadia Jalal, MD

Hoosier Cancer Research Network honored Shadia Jalal, MD, as the 2013 recipient of the George and Sarah Jane Fisher Young Investigator Award. Dr. Jalal attended the University of Jordan, where she earned her MD, and completed her residency and fellowship at the IU School of Medicine. She is a thoracic oncologist at IU Health and an accomplished investigator, with a number of publications to her credit. Jalal is a researcher at the IU Simon Cancer Center and the principal investigator for several trials at IUSCC.

Dr. Jalal plans to use the award to study the role that EME1, a DNA repair protein, plays in esophageal cancer development and resistance to therapy.
Terry Hoeppner Patient Advocacy Award

Terry Hoeppner, beloved Indiana University football coach, lost his battle with brain cancer in 2007. Coach Hep was known for his “never quit” attitude and determination to face challenges head-on. To honor his memory, his wife, Jane Hoeppner, created the Terry Hoeppner Patient Advocacy Award in 2008. The award honors individuals who embody Coach Hep’s spirit and determination to champion their cause.

2012 Award Winner: Mary Lou Smith, JD, MBA (co-founder, Research Advocacy Network)

Prior to co-founding the Research Advocacy Network, Mary Lou Smith was the director of patient, payer, and government relations for the Coalition of National Cancer Cooperative Groups. She serves as co-chair of the Eastern Cooperative Oncology Group’s Patient Representative Committee and as a community member of the Institutional Review Board at Rush Presbyterian St. Luke’s Medical Center in Chicago.

Smith is past president of Y-ME National Breast Cancer Organization, a member of the Cancer Leadership Council, a board member of the National Breast Cancer Coalition, and has served on numerous committees of the National Comprehensive Cancer Network.

Smith has chalked up more than 20 years in health care. Her experience includes leading the development of managed care products for the Blue Cross and Blue Shield Association, including a centers of excellence network for pediatric oncology, a women’s health initiative, clinical trials program, transplant medical review service, national second opinion consulting panel, case management network, and a national utilization management capacity.

Smith is a breast cancer survivor. She earned a JD with a Health Law Certification and an MBA.

2012 Award Winner: Elda Railey (co-founder, Research Advocacy Network)

Elda Railey specializes in working with patient advocacy organizations to forge collaborations and train individuals to be effective research advocates. Her interests include education programs that improve access to quality health care for all people, regardless of their background and socioeconomic status.

Prior to co-founding the Research Advocacy Network, Railey was director of grants for 12 years at the Susan G. Komen Breast Cancer Foundation, where she led one of the largest programs for private funding of breast cancer research. She has reviewed for Komen, Avon-NCI Partners in Progress, and the Centers for Disease Control and Prevention. She is a member of the Intercultural Cancer Council, the External Advisory Board of the UCSF Breast Cancer SPORE, and the Conference Committee for Healthcare Advocates at the University of North Carolina, Chapel Hill, School of Public Health. Railey is a patient advocate on the National Cancer Institute Early Detection Research Network, National Cancer Institute Clinical Proteomics Technologies for Cancer, and University of Texas Southwestern Medical Center/MD Anderson Lung SPORE. In her capacity with the Coalition of National Cancer Cooperative Groups, she was a contributing author on Module 3: Drug Development, and Module 6: Tissue and Its Use for the Patient Advocate Training Program. She has served on the patient advocate committee for the American College of Surgeons Oncology Group.

Railey has provided consulting services to a wide range of organizations, including The Coalition of National Cancer Cooperative Groups, The National Lymphedema Network, American Society of Colon and Rectal Surgeons, and the Colorectal Cancer Network.
Columbus North High School: Courage to Climb

As a choir director at Columbus North High School in Columbus, Indiana, Janie Gordon has long been known and respected throughout the community in her roles as a teacher and a performer. She never imagined that she would become known as a champion for cancer research.

Diagnosed with breast cancer in 2009, Gordon broke the news to her students during rehearsal for their summer musical production. Despite their shock, three students decided to do something to help. The students secretly planned a benefit concert in honor of Gordon and named the event “Courage to Climb,” based on a motto that Gordon had adopted for her battle against cancer.

“The next thing I know, there was an article on the front page of the paper, ‘Concert to benefit cancer victim Janie Gordon,’” she said.

Gordon recalls all the work the students gave to planning and producing the event. “When I walked into the theatre, the whole place was pink — pink balloons and pink cupcakes the parents had made,” she said. “They put on an amazing show, with songs they knew I loved. I was so blessed, and it helped me heal.”

Gordon quickly became known throughout the community as an advocate for cancer research. In 2010, Hoosier Cancer Research Network honored Gordon for her commitment by presenting her with the Terry Hoeppner Patient Advocacy Award during HCRN’s 25th Anniversary Gala, which included a performance of “Bridge Over Troubled Water” by Gordon’s choir students.

In its first year, Courage to Climb supported only breast cancer research. But Gordon knew the great need for funding in so many cancer types.

“There is so much awareness for breast cancer, but so many people are suffering from cancers that aren’t touched,” Gordon said. “So when the opportunity came to perform at the 25th Anniversary Gala, I felt like this was what we needed to put our money toward.”

Since then, Gordon has directed Courage to Climb proceeds to Hoosier Cancer Research Network. In 2011, Courage to Climb raised more than $5,000 for research, and HCRN has continued to benefit from generous contributions from Courage to Climb events.

Student Impact

Emma Terry, Courage to Climb’s 2013 student coordinator, had been a performer in the 2012 concert. When the time came to choose what she would do for her senior project — all Columbus North seniors are required to complete a project that benefits the community — it was an easy decision to coordinate the 2013 concert.

The concert included performances and stories by individuals who have been personally affected by cancer.

“That was a very important aspect to the show, where each person had a story,” Terry said. “I was so grateful to be part of an event that meant so much to so many people.”

A Life-Changing Experience

For all the pain and heartache cancer has brought to her life, Gordon is thankful for who she has become through the experience. “Sometimes I say it changed my life for the better,” said Gordon. “It helped me prioritize and realize I shouldn’t sweat the small stuff, and I think every cancer survivor feels that way.”
Our Contributors

Hoosier Cancer Research Network wishes to thank all those who have contributed to our mission, which is to form unparalleled relationships between academic, community, pharmaceutical, and biotech partners with the goal of advancing cancer research, education, and patient advocacy.

We are so fortunate to have friends and supporters who give of their time and resources to help us fulfill our mission.

CONTRIBUTIONS RECEIVED JULY 1, 2012 - JUNE 30, 2013
(The following gifts are included in the audited financial statements in this report)

Christopher Fausel
  in memory of Stephen D. Williams, MD
Noah Hahn
Chris LeMasters
Mary Lou Mayer and Stephen M. Martin
Ted Stansbury
  in memory of Bob Thorne
Tom Sibert
  in memory of Julia Allen
Pauline Waffle
  in memory of John Drysdale
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Noah Hahn
Chris LeMasters
Mary Lou Mayer and Stephen M. Martin
Columbus North High School
  in honor of Janie Gordon
Tom Sibert
Ted Stansbury
Infinite possibilities.