

# **Patrick Mulvey**

Interview # 69

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# Patrick Mulvey

Interview # 69

## Interview Profile

### Interview Information:

Two interview sessions: 11 May 2015, 19 May 2015.

Total approximate duration: 1 hour 40 minutes.

Interviewer: Tacey A. Rosolowski, Ph.D.

Note: At the Interview Subject's request, this interview was focused to collect institutional history rather than any biographical information.

For a biosketch, and other support materials, contact:

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### About the Interview Subject

Patrick Mulvey came to MD Anderson in 1985 as Assistant Director of the Office of Development. Today he is Vice President of Development, a role he has served since 2000. Mr. Mulvey is best known for running MD Anderson's capital campaigns. He has overseen the growth of the Office of Development into a very successful team that has raised over one billion dollars for the institution.

### Major Topics Covered:

Coming to MD Anderson

The Office of Development under presidents Charles A. LeMaistre, John Mendelsohn, and Ronald DePinho

Working with MD Anderson presidents

The evolution of fundraising as a practice

Changes in MD Anderson's donor base

MD Anderson's capital campaigns

Mechanisms for making appeals for donations

The Moon Shots Program and fundraising

The MD Anderson mission and culture

## **Patrick Mulvey**

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*The Development Office: Expansion under John Mendelsohn  
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Segment 00B

*How Donations are Made to MD Anderson –In the Past and Today*

Segment 05 / B: Building the Institution;

*A Brief History of Donations to MD Anderson*

Segment 06 / A: Overview;

*Technology and Social Media: Impact on MD Anderson Fundraising*  
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*The Office of Development: What Has Been Achieved  
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Segment 09 / B: Institutional Mission and Values;

# Patrick Mulvey

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## Segment Summaries

Interview Session One: 11 May 2015 [about 50 minutes]

Segment 00A  
*Interview Identifier*

Segment 01  
*The Development Office in the Eighties*  
B: An Institutional Unit;  
about 18 minutes

Story Codes  
B: MD Anderson History;  
B: MD Anderson Culture;  
A: Professional Path;  
A: Joining MD Anderson;  
A: Overview;  
D: On Philanthropy and Volunteerism;  
C: Donations, Gifts, Contributions;  
C: Portraits;

Mr. Mulvey recounts how he came to MD Anderson in 1985 as an Assistant Director of Development Services. He then describes the Office of Development and its operation under institution president, Charles A. LeMaistre, MD [Oral History Interview].

Mr. Mulvey explains how development became a more significant factor in MD Anderson's growth at that time, leading Dr. LeMaistre to provide support and resources for the Office's growth. He describes the two issues of focus for fundraising at that time: patient care and cancer prevention. He describes the first major comprehensive campaign, the Fulfill the Promise Campaign, and the increased targets for fundraising that resulted.

Segment 02  
*Philanthropy in the United States and at MD Anderson*  
B: Overview;

Story Codes  
D: Cultural/Social Influences;  
D: On Texas and Texans;  
C: Patients  
C: Patients, Treatment, Survivors  
D: On Philanthropy and Volunteerism;

C: Donations, Gifts, Contributions;  
C: Professional Practice;  
B: MD Anderson History;  
C: Discovery and Success;

Mr. Mulvey begins by observing that development work is focused on building relationships with people. He explains that the United States is a very “giving society” then comments on building philanthropic support for a non-profit institution.

Mr. Mulvey then explains that philanthropic dollars for MD Anderson first came primarily from the state of Texas, but now come from around the country and the world, a change that has followed the expansion of the patient base.

Mr. Mulvey says that donors to the institution want to believe in its mission and its leaders.

### Segment 03

#### *The Development Office: Expansion under John Mendelsohn and an MD Anderson Way of Fundraising*

B: Building the Institution;

#### Story Codes

D: On Philanthropy and Volunteerism;  
C: Donations, Gifts, Contributions;  
C: Professional Practice;  
B: MD Anderson History;  
C: Portraits;  
B: Building/Transforming the Institution;  
B: Growth and/or Change;  
C: Discovery and Success;  
B: The Business of MD Anderson;  
B: The MD Anderson Brand, Reputation;

Mr. Mulvey explains the dramatic expansion of the Development Office when John Mendelsohn, MD [Oral History Interview] came to MD Anderson as third president of the institution in 1996.

He explains the increased resources directed to the Development Office. He also describes how Dr. Mendelsohn made himself available to travel with a development team when they needed him to fundraise.

Mr. Mulvey then explains that the Making Cancer History Campaign arose from Dr. Mendelsohn’s concept of the Cancer Care Cycle. He talks about how this bold campaign, which raised one billion dollars, differentiated MD Anderson from other institutions on a national stage.

He also explains how the dramatic success of this campaign transformed the Development Office. Each team member is now seen as a major gifts fundraiser. Mr. Mulvey comments on how difficult it is to recruit good fundraisers and that the Office is considering a program of in-house training.

Segment 04

*The Development Office: Management Changes, Working with Faculty Gifts, and Thoughts on Ronald DePinho*

B: An Institutional Unit;  
about 9 minutes

Story Codes

D: On Philanthropy and Volunteerism;  
C: Donations, Gifts, Contributions;  
C: Professional Practice;  
B: MD Anderson History;  
C: Portraits;  
B: Building/Transforming the Institution;  
B: Growth and/or Change;  
C: Discovery and Success;  
B: The Business of MD Anderson;  
B: The MD Anderson Brand, Reputation;  
C: Research, Care, and Education;  
C: Donations, Gifts, Contributions;

Mr. Mulvey sketches initiatives he took as Director of Development to expand the Office.

He observes that, in the eighties, he and his team were coming to understand what a fundraising office could do for the institution and undertook methodical growth, also gathering evidence to demonstrate good return on the investment of philanthropic dollars.

Mr. Mulvey then describes the process of gaining the trust of faculty members who had attracted philanthropic investment in their work. He notes that mechanisms are now in place for faculty to partner with a fundraiser.

Mr. Mulvey then talks about the role of fundraising since Dr. Ronald DePinho took over as the institution's fourth president. He notes that Dr. DePinho is an experienced fundraiser with a bold vision for the institution and for development.

Interview Session Two: 19 May 2015, about 50 minutes

Segment 00B

*Interview Identifier*

Segment 05

*How Donations are Made to MD Anderson –In the Past and Today*

B: Building the Institution;  
about 18 minutes

Story Codes

B: MD Anderson History  
D: On Philanthropy and Volunteerism;



- C: Donations, Gifts, Contributions;
- C: Professional Practice;
- B: MD Anderson History;
- B: Building/Transforming the Institution;
- B: Growth and/or Change;
- C: Discovery and Success;
- B: The Business of MD Anderson;
- B: The MD Anderson Brand, Reputation;
- C: This is MD Anderson;

Mr. Mulvey provides an overview of mechanisms used to solicit funds to MD Anderson in the past and today. He notes that donations have increased from about \$12,000 annually in the eighties to \$130,000 - \$140,000 per year. He discusses how the Development Office establishes trust and credibility with donors and explains mechanisms for making appeals: the direct mail program, the acquisition program, the planned giving program. He talks about different populations that Development approaches and explains the restrictions that donors often place on their gifts. He explains what makes MD Anderson unique among health institutions.

#### Segment 06

##### *A Brief History of Donations to MD Anderson*

A: Overview;  
about 5 minutes

#### Story Codes

- B: MD Anderson History
- D: On Philanthropy and Volunteerism;
- C: Donations, Gifts, Contributions;
- C: Professional Practice;

Mr. Mulvey explains why, in the eighties, fundraising in southern institutions was less sophisticated than in the north. He talks about the effect that MD Anderson's state-supported status had on fundraising in those years.

#### Segment 07

##### *Technology and Social Media: Impact on MD Anderson Fundraising*

B: Building the Institution;  
about eight minutes

#### Story Codes

- B: MD Anderson History
- D: On Philanthropy and Volunteerism;
- C: Donations, Gifts, Contributions;
- B: MD Anderson History;
- B: Building/Transforming the Institution;
- B: Growth and/or Change;
- B: The MD Anderson Brand, Reputation;

Mr. Mulvey talks about the impact of social media on MD Anderson fundraising efforts. He mentions e-philanthropy, Facebook, and email appeals. He notes that the Development Office must take full advantage of all avenues of communication with donors, but proceed methodically, so that gifts can be properly serviced. He also explains that the institution must establish formal policies for such online activities.

Mr. Mulvey also talks about the impact of computer analyses, not available when he began in the eighties, and which now allow manipulation of data for better targeting of donors.

#### Segment 08

*The Office of Development: What Has Been Achieved and Today's Focus on the Moon Shots Program*

B: Building the Institution;  
about eight minutes

#### Story Codes

A: The Administrator  
A: Career and Accomplishments;  
C: Donations, Gifts, Contributions;  
B: MD Anderson History;  
C: Portraits;  
B: Building/Transforming the Institution;  
B: Growth and/or Change;  
C: Discovery and Success;  
B: The Business of MD Anderson;  
B: The MD Anderson Brand, Reputation;

Mr. Mulvey reflects on what the Development Office has achieved under his leadership. He notes that the Office has raised over three billion dollars to fund research, care, and capital development. It also has great credibility and understands the MD Anderson's stakeholders.

Next he explains that the Office will be expanding from thirty two fundraisers to fifty-five plus individuals to meet the needs for the institutional priority: Dr. Ronald DePinho's Moon Shots Program. He explains the process of identifying the best way to communicate with donors about the Moon Shots. He lists individuals involved in this collaborative process today and over the years.

#### Segment 09

*The Positive Effects of Institutional Growth*

B: Institutional Mission and Values;

#### Story Codes

C: This is MD Anderson;  
B: MD Anderson History;  
B: Building/Transforming the Institution;  
B: Growth and/or Change;  
C: Discovery and Success;  
C: Personal Reflections, Memories of MD Anderson;

Mr. Mulvey comments on the growth of MD Anderson since the 1980s and notes the overall positive effects of expansion.

Mr. Mulvey says he has been privileged to work at MD Anderson.

## Patrick Mulvey

Interview Session 01 – Interview Date: May 11, 2015

Chapter 00A

*Interview Identifier*

***Tacey A. Rosolowski, PhD***

[00:00:02]

All right, the counter is moving. I'm Tacey Ann Rosolowski, and today is—oh, my goodness—the 13<sup>th</sup> of May, 2015.

***Patrick Mulvey***

I think it's the 11<sup>th</sup>.

[00:00:11]

***Tacey A. Rosolowski, PhD***

Is it? The 11<sup>th</sup> of May—it is. I don't know how I lost two days in the week. I'm glad I have them back.

[00:00:13]

***Patrick Mulvey***

[00:00:16]

Time goes by fast.

***Tacey A. Rosolowski, PhD***

[00:00:17]

[laughs] It does. I'm glad I have them back. Today is May 11<sup>th</sup>, 2015, and the time is about 3:08. And I am in the Office of Development in the Fannin/Holcombe Building on the main campus of MD Anderson. And today I'm interviewing Mr. Patrick Mulvey for the Making Cancer History® Voices Oral History Project, run by the Historical Resources Center at MD Anderson Cancer Center in Houston, Texas. Mr. Mulvey came to MD Anderson in 1985, as an assistant director of development services. Today he is vice president for development, a role he has served since the year 2000. This session is being held in a conference room in the Office of Development, and this is the first of three planned interview sessions.

So, I wanted to thank you for participating in our project.

***Patrick Mulvey***

[00:01:09]

You're welcome.

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## **Chapter 01**

### ***The Development Office in the Eighties***

#### **B: An Institutional Unit;**

#### **Story Codes**

B: MD Anderson History;

B: MD Anderson Culture;

A: Professional Path;

A: Joining MD Anderson;

A: Overview;

D: On Philanthropy and Volunteerism;

C: Donations, Gifts, Contributions;

C: Portraits;

#### ***Tacey A. Rosolowski, PhD***

[00:01:09]

All right. And I wanted to start, if it's all right with you, with your role in development, or how you came to work in development when you were working at St. Thomas University. Can I ask you about that?

#### ***Patrick Mulvey***

[00:01:28]

I came here in October of 1985 as an assistant director for development services, after a thirteen year stint with the University of St. Thomas. And after thirteen years of St. Thomas, it seemed like it was the time to look elsewhere. And I had heard about this position, and applied for it.

#### ***Tacey A. Rosolowski, PhD***

[00:01:56]

Can I ask you, during your time—because, I mean, one of the things that struck me when I was looking at your background information is that you did development in an academic institution, and then you switched to another academic institution. Is there something about development—did that experience in St. Thomas, as an academic institution, help prepare you for the role here?

#### ***Patrick Mulvey***

[00:02:19]

Well, at St. Thomas—I would consider St. Thomas—University of St. Thomas as an academic institution, from a development side of the coin. I would consider MD Anderson as a health-related—

#### ***Tacey A. Rosolowski, PhD***

[00:02:34]

Okay.

#### ***Patrick Mulvey***

[00:02:34]

—institution. Of course, it's academic. I understand that. But its mission is health versus education—

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***Tacey A. Rosolowski, PhD***

[00:02:41]

Okay.

***Patrick Mulvey***

[00:02:41]

—in the greater sense of the word. And my role at St. Thomas was not so much to raise funds there. But I was associated with the need to raise funds as the dean of student affairs there, with the student affairs committee of—its board, that needed to go out and raise \$4 million at that time, to create what's now known as the Jerabeck Athletic Center. And so, I worked closely with the Development Office in those plans and things of that sort. But my role was not to raise funds there. But I was actually introduced to that type of activity, that type of profession, which intrigued me. And then, when this opportunity came available, I took it.

***Tacey A. Rosolowski, PhD***

[00:03:35]

What did you—what was it that intrigued you about fundraising? What was it that you felt that role enabled you to do for an institution?

***Patrick Mulvey***

[00:03:43]

Well, it's to serve mankind. It's to identify the needs of the institution and the wishes of an individual who might want to donate to that institution, and make those needs possible.

***Tacey A. Rosolowski, PhD***

[00:04:00]

How did you hear about the role at MD Anderson?

***Patrick Mulvey***

[00:04:02]

You know, that was a long time ago. [laughter] That was a long time ago, and I don't specifically remember. Probably somebody within our professional organizations talked about it, would be my guess on that.

***Tacey A. Rosolowski, PhD***

[00:04:17]

Mm-hmm. And tell me about that process of coming to MD Anderson, learning about it, learning more about what the role would entail.

***Patrick Mulvey***

[00:04:25]

Well, it's like applying to any state institution. You gotta go through human resources and go through a number of interviews to see if you were a worth candidate for that position. And then, after we got through all the human-resource issues, then came over and interviewed with the director of development at that time. And—

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***Tacey A. Rosolowski, PhD***

[00:04:47]

Who was that?

***Patrick Mulvey***

[00:04:47]

That was a lady by the name of Andrea Morgan. And then we eventually received a phone call saying that they wanted to offer me the position, which I accepted.

***Tacey A. Rosolowski, PhD***

[00:04:58]

Mm-hmm. And what did that role entail, when you came in?

***Patrick Mulvey***

[00:05:02]

Oversight of all development-services activities, which is receiving gifts, acknowledging gifts, grant writing, proposal writing—things of that sort, and all the services that go along with it.

***Tacey A. Rosolowski, PhD***

[00:05:18]

Mm-hmm. And who was institution president at that time?

***Patrick Mulvey***

[00:05:22]

Dr. [Charles A.] LeMaistre.

***Tacey A. Rosolowski, PhD***

[00:05:22]

Dr. LeMaistre. And what—one of the topics that I want to explore with you is just how different MD Anderson presidents have had—have integrated development into their vision of the institution differently. So, what was Dr. LeMaistre's vision of what development could do, and how did he rely on the Development Office, at that time, to meet those goals?

***Patrick Mulvey***

[00:05:48]

Well, back in the 1980s, fundraising—for many state institutions, especially in the South—was somewhat of a new phenomenon, unlike the Northeast and what have you, where they've been doing things for many, many times. And as a state institution, MD Anderson, as I understand it under Dr. [R. Lee] Clark, and somewhat under Dr. LeMaistre, you now, really heavily dependent on the state appropriation. But as the state appropriation began to decline, or not become as large a percentage of the operating budget, over the years it became obvious that development fundraising—private philanthropy—would play an important role in the institution's being able to carry out its mission. And Dr. LeMaistre understood that very well, coming from the Chancellor's Office and coming from the University of Texas, and began to build a team here that, fortunately, involved me, to really create the foundations that we then built from, to make it what it is today. He was clearly a superb fundraising CEO [chief executive officer].

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***Tacey A. Rosolowski, PhD***

[00:07:03]

Was he?

***Patrick Mulvey***

[00:07:03]

Mm-hmm.

***Tacey A. Rosolowski, PhD***

[00:07:04]

Mm-hmm. I've heard it said that he was sort of an ambassador kind of president, you know? That he was really good at making connections.

***Patrick Mulvey***

[00:07:13]

He was superb, at all of the above.

***Tacey A. Rosolowski, PhD***

[00:07:17]

Mm-hmm. So tell me more about the Development Office at that time. You know, how big was it? You know, what was the scope of—you know, what—how—what was the team like, and then, what was it going to be, in those early years?

***Patrick Mulvey***

[00:07:30]

You know, in those early years, we were on the ninth floor of the Houston Main Building. We took up a—I don't even know if it was a half a floor. Maybe a little bit less than that. There was, perhaps, as many as twelve people in the office. I think it was more of a—it was more of an annual-fund type of program versus major gifts, if you will. And, you know, it was a quite-young office that was making its way. And probably back in the '80s—mid-'80s—it was raising, perhaps, \$9-10 million dollars a year in that time, with 30—maybe 30,000 gifts, if that many. I can't remember the number of gifts. But it was a young organization.

***Tacey A. Rosolowski, PhD***

[00:08:24]

Mm-hmm. Now, I was talking to Stephanie Fulton, the director of the library, just before I came over here. And, you know—and we were remarking, you know, the world of development is just so different from the world of the library. You know, like, you do different things. And one of the things that we were very interested in is how do you go about doing what you do? You know, how—so how did this young office and this young, growing teen, set about turning itself into a well-organized force in the institution?

***Patrick Mulvey***

[00:09:02]

Well, you know, it all circles and revolves around a strategic vision of the institution. And then, development business plans come out of that. So, working closely with the administration to identify



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what the strategic plan is; what its needs are relative to philanthropy, to achieve that strategic vision; and then developing a program to secure those funds, is the way that we went about it over all of those years. And we continued to do that on a very regular basis under all the presidents we have served.

**Tacey A. Rosolowski, PhD**

[00:09:45]

What was Dr. LeMaistre's strategic plan?

**Patrick Mulvey**

[00:09:49]

I believe—I believe that, if one was to characterize him, was—he was a strong patient-care advocate, and also a strong—and actually the pioneer for cancer prevention. And those two themes were strong in his strategic vision. He didn't ignore the research, and it continued to grow underneath him. But I believe that the emphasis was in those two areas.

**Tacey A. Rosolowski, PhD**

[00:10:30]

Mm-hmm. And so, how did you take that as a mandate for your activities?

[00:10:40]

**Patrick Mulvey**

Well, he saw the need for expansion. He saw the need for outpatient care. He saw the need for prevention. And he saw the need for the research and education in those areas—not necessarily in all those orders. And, in fact, under his leadership we conducted probably the first major comprehensive campaign of the institution, certainly since the early '70s. And that was the "Fulfill the Promise" campaign. And if you take a look at that campaign, and you take a look at the funding objectives within that campaign, I think it very clearly tells you what his strategic vision was for the institution, which was outpatient care, cancer prevention, education, and research.

**Tacey A. Rosolowski, PhD**

[00:11:31]

Mm-hmm. And what were the results of that particular campaign? And how long did the campaign last?

**Patrick Mulvey**

[00:11:35]

It was designed to go five years and raise \$151 million. And it raised more than that. It was a focused campaign, meaning that that \$151 million went to very specific objectives. We made a commitment to the faculty at that time to continue to raise funds outside of the campaign, and the \$151 million was raised actually in two and a half years, rather than five years. And over that time period we actually raised another \$90-100 million for other needs. So, about a quarter of a billion dollars was raised in that two-and-a-half to three-year period, for focused-campaign needs as well as general faculty needs.

**Tacey A. Rosolowski, PhD**

[00:12:26]

Mm-hmm. And when you say "general faculty needs," what would come in under that heading?

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***Patrick Mulvey***

[00:12:31]

Any type of disease-site needs, any type of research-program needs, some endowment, and some education programs.

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## **Chapter 02**

### ***Philanthropy in the United States and at MD Anderson***

#### **B: Overview;**

#### **Story Codes**

D: Cultural/Social Influences;

D: On Texas and Texans;

C: Patients;

C: Patients, Treatment, Survivors;

D: On Philanthropy and Volunteerism;

C: Donations, Gifts, Contributions;

C: Professional Practice;

B: MD Anderson History;

C: Discovery and Success;

#### ***Tacey A. Rosolowski, PhD***

[00:12:44]

Well, tell me about how—we've talked about the institution side. Tell me about reaching out to potential donors and to donors. How did you operate to identify people? Have there been changes? Were there changes over the course of the campaign, and who you felt you could reach out for? How did that all work?

#### ***Patrick Mulvey***

[00:13:07]

Well, you're asking how does one identify a prospect—

#### ***Tacey A. Rosolowski, PhD***

[00:13:11]

Mm-hmm.

#### ***Patrick Mulvey***

[00:13:12]

—and one identifies prospects in a number of ways. Number one, prospects identify themselves in making contributions to the institution. We identify prospects through direct-mail programs, through special events, through referrals, through board contacts. And then, you also find it through journals for things like foundations or corporations and things of that sort. And then there's the idea of identifying those individuals, and then, like any other relationship, building upon that relationship to the point where they wish to invest in the institution.

#### ***Tacey A. Rosolowski, PhD***

[00:13:57]

Was there any kind of surprise among individuals you contacted? I mean, I was just wondering if, since MD Anderson had been identified as a state institution, I wonder if there was kind of a challenge there in communicating with people and letting them know that, yes, it was—MD Anderson was interested in philanthropic support for a variety of purposes.

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***Patrick Mulvey***

[00:14:23]

You know, the United States is unique in the world, and—as it relates to voluntarism, and as it relates to philanthropy—and it's a very giving society. And so, the idea of giving to a not-for-profit is not foreign to most people. There would be an issue at times that would come up—people wanting to make sure that a dollar in the front door, philanthropically, isn't a dollar out the back door, state-wise. And you can make that case, and you can show them every way that that is not the case—that it's not a zero-sum game in that instance. So there were times, back in those early days, when we had to have those kind of discussions with people, to assure them that it was additive—philanthropy was—to the budget and to making things happen here like that. But I don't—*surprise* is—I'm not sure about the word *surprise* in that regard.

***Tacey A. Rosolowski, PhD***

[00:15:30]

Yeah, well, I mean—yeah, I mean, your—I word use your words, if you were to correct that, yeah, yeah.

***Patrick Mulvey***

[00:15:39]

You know, the way I've always said it is, our business is like your significant other. If you think about it. You meet, you date, you become engaged, you marry, or however that goes. And so, we're all about that—about meeting people. And some of those people, then, we're going to get more involved in as major gifts, and eventually to the estate plans and things of that sort. So it's all about relationship-building, and it's all about facilitating relationships. And so, our business in development is to facilitate relationships. Our business is to be behind the curtain, not on stage. And that's why, when I said things to you earlier, it's—we're not the main show. The main show is across the street with the doctors and with the patients, which we call the common denominator here at MD Anderson. And so, we facilitate relationships.

***Tacey A. Rosolowski, PhD***

[00:16:38]

Now, as I was doing my background research, I noticed that there were really a huge range of different types of individuals that you contact for different purposes, different ways in which they can give to MD Anderson. And I'm wondering if that has expanded and become more elaborate over the years. So, what was that like in the '80s when you were assistant director? Who were you reaching? What kinds of individuals were you reaching out to? And then, how did those populations differentiate later on?

***Patrick Mulvey***

[00:17:17]

Well, you know, I don't think—I don't think donors have changed that much in thirty years. And the fact that people are still interested in the cause—they want to invest in an institution that they consider of great quality, that they believe, in their heart of hearts, has the opportunity to change the world of cancer. And that's a basis right there. Now, how do we go about that and things of that sort? You know, there were times when we used five-by-eight cards, you know, and mimeograph machines and things of that sort, and yellow stickies. All of that's changed, of course. The technology's all changed. But it's still—it's a human interaction, and people come to this institution because they're in need. And people give to this

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institution because they want to give back, or because—that they believe that they can—they can have a good effect on the outcome of this terrible disease. So, in that regard many—the donors are the same.

**Tacey A. Rosolowski, PhD**

[00:18:32]

I'm wondering, though—have the percentages, for example, of MD Anderson staff who give money—has that changed over the years? You know, have the—as the research program has evolved at MD Anderson, has there been a different way of presenting that to specific donors, to capture a different kind of dollar for the institution's benefit?

**Patrick Mulvey**

[00:19:00]

Well, back in the early days we were probably much more of a state-of-Texas institution, as it relates to philanthropy. Most of the—most of our efforts and most of our giving came from the state of Texas. And so, in that regard, we have changed. We've become much more of a national, international fundraising machine, if you will, in that regard. To where, now, clearly, I would think in any one year half of the—at least half of the money that comes into this institution philanthropically comes from outside the state of Texas. So if you take a look at the patient flow of this institution—a third from the Greater Houston area; another third from the state of Texas; and then, clearly a third, maybe as much as forty percent, from outside the state of Texas—donor dollars flow in the very same fashion. And you can imagine why. Because people that are directly affected by this institution are clearly going to be those individuals who might have the greatest wish to give to this institution. And so, very much prospecting goes along in that regard, too.

Technologically, we've changed in that, you know, you're doing so much more e-philanthropy, and—

**Tacey A. Rosolowski, PhD**

[00:20:22]

What does that mean?

**Patrick Mulvey**

[00:20:24]

Well, it means, you know, raising money over the inter—raising money over the web, be it from Facebook or any type of social media, if you will. But, at least for now, I think—and I don't see this changing—I mean, major-gift fundraising is one-on-one. And it's gonna—it's gonna remain that way. It's a personal activity. And so, people want to get to know the institution. People want to get to know the leaders of the institution. People want to understand the strategic vision, and they want to believe in its leaders. And when all those kind of things happen, then magic happens after that, too. And I don't think all that kind of magic happens over the Wide World Web [*sic*], [laughter] if you would, in that regard.

So—but the people still want to give to the disease site that directly affected them. A number of those people are gonna continue to give in that fashion. A number of those people become institutional givers. And it's our job, as facilitators, to identify those people and then bring them along to a much more meaningful relationship, as it relates to philanthropy.

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### **Chapter 03**

#### ***The Development Office: Expansion under John Mendelsohn and an MD Anderson Way of Fundraising***

#### **B: Building the Institution;**

#### **Story Codes**

D: On Philanthropy and Volunteerism;  
C: Donations, Gifts, Contributions;  
C: Professional Practice;  
B: MD Anderson History;  
C: Portraits;  
B: Building/Transforming the Institution;  
B: Growth and/or Change;  
C: Discovery and Success;  
B: The Business of MD Anderson;  
B: The MD Anderson Brand, Reputation;

#### ***Tacey A. Rosolowski, PhD***

[00:21:42]

Tell me about changes in the Development Office when John Mendelsohn came in to take over as president in 1996.

#### ***Patrick Mulvey***

[00:21:52]

John Mendelsohn, too, was a super fundraising CEO, and he would admit to you that he came in not knowing very much about fundraising, coming from the Division—the head of the Division of Medicine at Memorial Sloan Kettering. But he was eager to learn. He understood the value of philanthropy. And he understood that if his vision was gonna be accomplished, then clearly—that philanthropy would have to play a role. And so, he even went above and beyond the great resources that Dr. LeMaistre provided the Development Office, to grow it. And that's where the real growth began in the Development Office. And you see the increase in giving over the years that he—that he was here.

#### ***Tacey A. Rosolowski, PhD***

[00:22:50]

Tell me about those resources, and what happened to the Development Office with them. How did it expand?

#### ***Patrick Mulvey***

[00:22:57]

Well, it expanded in all ways. Personnel—support as well as professional personnel. Capital, allowing us more office space and the capital resources necessary for computers and this and that and the other. Money, to be able to build a program and to travel and do the things we needed to do to nationalize this institution as it relates to philanthropy. And then, his own time. He would—he would give us, in the early days, three full days a month to take him anywhere that we need to take him. And we added these up from time to time, and in any one year, he would give us all or a part of perhaps as many as 130 days.

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***Tacey A. Rosolowski, PhD***

[00:24:02]

Wow.

***Patrick Mulvey***

[00:24:02]

So he, clearly, was a fundraising president, and showed it with the time that he gave us there. So—

***Tacey A. Rosolowski, PhD***

[00:24:11]

Now, what—how would you work with John Mendelsohn on these trips? What would—what were the kinds of activities that you involved him in?

***Patrick Mulvey***

[00:24:21]

Well, in all different kinds, from end—we would—we would—normally, if you took a president out on a day-or-two trip, clearly the day was full, with four or five meetings with individuals or foundations or corporations—usually a mixture of those. So, you know, five meetings in a day is a lot. And then, usually that would end with either a reception at night or a dinner at night. And we would—we, the Development Office, would develop that whole trip. And we would certainly brief him deeply on each one of these visits, and together we could build strategies of approach to individuals as to what we would ask them for, how we would ask them, and things of that sort like that. So, we'd build a whole trip out in that regard, like that.

***Tacey A. Rosolowski, PhD***

[00:25:20]

Mm-hmm. Now, when I interviewed Dr. Mendelsohn, he talked about his concept of the cancer-care cycle, you know, and the system of institutes that he wanted to put together, which I think went on a little later on in his presidency. And I was really struck, in that conversation, about, you know, how it really took a lot of work to put together [laughs] the communications strategy. Because this was a fairly complex idea—

***Patrick Mulvey***

[00:25:44]

Mm-hmm, it was.

***Tacey A. Rosolowski, PhD***

[00:25:46]

—to communicate to people. So I'm wondering, you know, did you, in the Development Office, kind of partner with him? You know, I guess I'm trying to get a sense of how you worked together to figure out a way to communicate what this new MD Anderson vision was gonna be about.

***Patrick Mulvey***

[00:26:03]

Well, he actually drew the picture. I'm sure you've seen it.

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***Tacey A. Rosolowski, PhD***

[00:26:06]

Oh, yeah, I have it in his transcript. [laughs]

***Patrick Mulvey***

[00:26:07]

Yeah, yeah.

***Tacey A. Rosolowski, PhD***

[00:26:09]

Yeah.

***Patrick Mulvey***

[00:26:10]

So—and then it was our job to try to figure out what it meant and how to communicate it.

***Tacey A. Rosolowski, PhD***

[00:26:14]

Yeah.

***Patrick Mulvey***

[00:26:14]

And he did a very good job of that. I'm kidding you. But it was the Development Office's job, the Public Affairs Office's job, and the Communications Office's job, to come together around that principle, and be able to describe it verbally as well as in writing. And out of that idea came the billion-dollar campaign, Making Cancer History. Out of that idea came significant brochures and cases for support. And out of that concept came a significant volunteer force headed by Harry Longwell, as chairman—volunteer chairman for our campaign—to actually go out and raise over a billion dollars in less than five years—

***Tacey A. Rosolowski, PhD***

[00:27:12]

Wow.

***Patrick Mulvey***

[00:27:12]

—for that. So, it wasn't any one office. It was a group of offices that came together and worked very closely to make this happen.

***Tacey A. Rosolowski, PhD***

[00:27:23]

Yeah, it's just kind of an incredibly marshalling of resources. Now were there—was this kind of a new MD Anderson that was being presented to people? You know, I was—I was really struck by sort of the innovative—it was a very—it seemed like a very innovative way to present the identity of an institution. And I'm—you know, I'm wondering how that dovetailed with any changes in MD Anderson's reputation nationally, you know, with sort of different positioning of the institution as it—one cancer center among others. Was that part of Dr. Mendelsohn's strategic plan, as well?



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**Patrick Mulvey**

[00:28:11]

Hm. What did he tell you?

**Tacey A. Rosolowski, PhD**

[00:28:12]

I actually didn't ask him that question, [laughter] because we were really focused on—

**Patrick Mulvey**

[00:28:16]

You know, that's probably a question for him.

**Tacey A. Rosolowski, PhD**

[00:28:18]

Yeah.

**Patrick Mulvey**

[00:28:19]

But it—you know, any time one has a bold vision—which this was—that could be articulated well, it differentiates you. And I think it did differentiate us from, clearly, any institution or any, quote, unquote, “cancer center” in this area. And I think it clearly differentiated us in most all comprehensive cancer centers in the nation. And, you know, MD Anderson always remained number one or number two—mostly always number one—during his tenure. And I think it clearly outpaced Memorial Sloan Kettering at that time, clearly to be the largest center in the country. You know, by the numbers, you could tell in that regard. But it also allowed us to truly go about making this a national resource. And I think that type of message resonated well, not only with our local stakeholders, but also from our national and international stakeholders. And I think that's where the real difference is.

**Tacey A. Rosolowski, PhD**

[00:29:40]

And how did that show itself? I mean, simply in a change in demographic of the individuals who wanted to have a giving relationship with MD Anderson? Or were there kind of other tonalities there, as well?

**Patrick Mulvey**

[00:29:54]

You know, from a philanthropic point of view, it's where their dollars come from, you know? And then, of course, the demographics would be where your patients come from. In that regard, from an academics point of view, I think you need to leave that to the academicians to tell you that, regard—that there. But it was a story that could be told across the country, that presented no boundaries. And, to me, that's what changes the demographic in that regard. It's not a local story any longer.

**Tacey A. Rosolowski, PhD**

[00:30:28]

I wanted to ask you a little bit about, then, what happened after the Making Cancer History campaign. You know, did that—the experience of running that campaign change the way—what were your lessons learned for development? You know, how did the office change any practices after that campaign?

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***Patrick Mulvey***

[00:30:56]

Well, it—I think that is the time that it truly became a major-gift shop. And, you know, it clearly showed—and we’ve always shown this—but the magnitude of—to be able to have an institution like MD Anderson run a billion-dollar campaign successfully sets you off in a class different than most institutions. Now, of course, we’re talking a number of years ago, and now you see six-billion-dollar campaigns and eight-billion-dollar campaigns and all these crazy numbers. But there were very few institutions at that time that had the prowess or the fortitude to run a—to announce a billion-dollar campaign. And so, it sets you apart. And so, that it also—that also, then, speaks well about the development operation, that you could actually pull something like this off. And to do that, it created a tight organi—it required a tight organization. It required all hands on deck. And it required people to think bigger, you know, than anyone had ever thought about before. Or you just don’t ever get to those kind of numbers, without that.

And so, I think—and the attitude changes. And I think the view, you know, that people have of the place changes. And so, the office, necessarily, changes. And we’re gonna continue to run a major direct-mail program. We’re gonna continue to do major special events and things of that sort. But major-gifts fundraising and planned giving is where the rubber really hits the road. And I think that that campaign helped prove that.

***Tacey A. Rosolowski, PhD***

[00:32:52]

Hm. Okay. So, with major gifts and planned giving—excuse me [coughs]—that became where your center of gravity of focus began to rest. And was that kind of a new learning from that campaign?

***Patrick Mulvey***

[00:33:09]

It wasn’t so much new, but it certainly became the focus.

***Tacey A. Rosolowski, PhD***

[00:33:12]

Okay, okay.

***Patrick Mulvey***

[00:33:15]

Certainly became the focus.

***Tacey A. Rosolowski, PhD***

[00:33:15]

So how did that change your business? I’m not—you know, I’m not sure, as a person who doesn’t do development kind of work, how that would translate into a different way of spending your time, and the individuals in your office spending their time.

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**Patrick Mulvey**

[00:33:29]

Well, you—again, the basics are always gonna be the same, you're always gonna have to identify people that can make major contributions to the institution. But the focus of your work changes, and your organization changes, so that you have a nucleus of individuals who do just that. You're not all over like you—we may have been in the past. And it raises the sights of everyone to where you can say that each person here that's a fundraiser is a major-gifts fundraiser. So it just—it's—you know, it's kind of like a—I don't know. It's kind of like a professional football team or something, that finally starts winning a division. It—all things change. Or a college program, when you finally get to that certain pinnacle, recruiting is different, you know? Commercialization is—it just—it changes the dynamic, just as the institution changes its dynamic when it becomes as big as it has become, you know? And as formidable a force as it has become, it's in a different league.

[00:34:51]

**Tacey A. Rosolowski, PhD**

Yeah, yeah. How has recruiting changed? What do you look for now?

**Patrick Mulvey**

[00:34:58]

The—one of the biggest issues for any development office, no matter what institution it is, is finding good fundraisers. It's very difficult to do. So that dynamic remains constant—

**Tacey A. Rosolowski, PhD**

[00:35:12]

Hm. Why is it—

**Patrick Mulvey**

[00:35:13]

—in that regard.

**Tacey A. Rosolowski, PhD**

[00:35:13]

Why is it so difficult to find good fundraisers?

**Patrick Mulvey**

[00:35:15]

[inaudible] great question. That's a great question. You know, it—this is not an easy business. People see you out with your tux on and having a cocktail with Mr. Jones and things. So that—that's probably about two percent of what we do. The rest is a lot of trench work, so it's a tough business. And most people find it uncomfortable asking somebody for money. And so, it takes a—it takes a certain personality. It takes a certain breed of people to be good at this business, to be sensitive to people's needs, but to also be focused on the needs of the institution, and marrying the two like that. And so, it's a—it's politics and diplomacy and many other things all put into one. So it's a—it's a unique personality that can do this kind of job.

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***Tacey A. Rosolowski, PhD***

[00:36:19]

Hm. Where do you tend to find individuals who are skilled in those areas?

***Patrick Mulvey***

[00:36:23]

Oh, goodness. You know, it used to be that we would try to find people in other shops that were good, that already had the experience to come in. But I think things are changing now to where we're gonna have to start growing our own.

***Tacey A. Rosolowski, PhD***

[00:36:38]

Oh, really?

***Patrick Mulvey***

[00:36:39]

So, finding people that come right out of college with the personality that you can, then, teach them the art and the science of fundraising. So I think that's another change that you were asking about, that's coming in this profession. And it truly is a profession now. There's no question about it. But I think that we're gonna see a whole lot more of our growing our own than trying to recruit somebody from across the street or across the nation or things of that sort.

***Tacey A. Rosolowski, PhD***

[00:37:10]

Now, is that because—I shouldn't put words in your mouth. Why is that? Why grow your own?

***Patrick Mulvey***

[00:37:17]

Well, because of the things I've just said. I mean, it's tough to find good fundraisers at good—to put into good programs. And so, perhaps the best way to do that is, then, to not try to change people who may not be able to be changed to the way you do it, and to locate and find the right personalities and then train them to your program.

***Tacey A. Rosolowski, PhD***

[00:37:49]

Hm. Because it's sounding like there's an MD Anderson way of doing this work?

***Patrick Mulvey***

[00:37:56]

Well, we like to think so. We like to think that we're different. We like to think that we are an aggressive, in the good sense of the word, development shop. And that we have high expectations of our development officers, as there's high expectations for all 20,000 employees of this institution. We're no different in that sense. But I think that we are focused, and we are driven. And I think that does differentiate us from a number of other shops. And so, that's why just not anybody should come to work here, in this office.

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## **Chapter 04**

### ***The Development Office: Management Changes, Working with Faculty Gifts, and Thoughts on Ronald DePinho***

#### **B: An Institutional Unit;**

#### **Story Codes**

D: On Philanthropy and Volunteerism;  
C: Donations, Gifts, Contributions;  
C: Professional Practice;  
B: MD Anderson History;  
C: Portraits;  
B: Building/Transforming the Institution;  
B: Growth and/or Change;  
C: Discovery and Success;  
B: The Business of MD Anderson;  
B: The MD Anderson Brand, Reputation;  
C: Research, Care, and Education;  
C: Donations, Gifts, Contributions;

#### ***Tacey A. Rosolowski, PhD***

[00:38:40]

Mm-hmm. Tell me about some other initiatives that you worked on. Oh, well, I guess maybe I should ask you, there have been some changes in your title, obviously, since you arrived in 1985. So, you became director of development services in 1986. And then, in 1989, you became director of development. So, two changes. And I'm curious of—at that point, with those changes in title, how your view on the power of the office changed, and any significant kind of initiatives that you took to develop the inst—the office at that time, at those moments.

#### ***Patrick Mulvey***

[00:39:30]

Well, there was—the was—there were some management changes during those times, too. Andrea Morgan, who was director of development, left about six months after I arrived, and Dr. Joe Painter oversaw the development operation for a while there. And they brought in a gentleman to be executive director of the University Cancer Foundation, Don Squibb. And Don and I had a very, very close working relationship. He came out of banking, and didn't have a whole lot of background in development, but had a great background in executive banking and that type of leadership there. So, we developed a very, very strong working relationship, and built the program.

And during that time, I got to work much, much closer with Dr. LeMaistre, as you can imagine. And then, when Don left, then that's when they began to call on me to take on some leadership positions. But we had grown the insti—the office over all of those years. And then, when I took over, the—we really—you know, those positions, that's when we really began to understand the depth and the breadth of what a major fundraising office could be for the institution. And working closely with Dr. LeMaistre, we talked about what we wanted this office to be, and what we wanted it to be able to provide to the institution. And then, began to develop the working plans and the business plans around that, to make it what it became.

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***Tacey A. Rosolowski, PhD***

[00:41:32]

And how did you talk about it at that time? I mean, when you were in conversation with Dr. LeMaistre, I mean, what was it—what was the vision you presented to him?

***Patrick Mulvey***

[00:41:42]

Well, the vision was—is to—is to create a professional organization that had, at its focus, the target of philanthropic dollars coming into this institution to fund those elements of his—the strategic plan that he felt most important to advance the institution. And then we could do these things—this on a number of levels that you and I have discussed here in the last fifty or so minutes. And then, we just began to form that office, and growing—grow it very methodically, and always looking, and always being able to present, in a convincing way, the return on investment that the institution was making in us it related to—and then working closely with the faculty to see to it that they understood what the role of development was; that they played an important part in that development, and that it would be a true partnership to achieve all the targets that we set for ourselves.

***Tacey A. Rosolowski, PhD***

[00:43:01]

Tell me about working with the faculty. What did—was that kind of a new thing for the Development Office to do at that time?

***Patrick Mulvey***

[00:43:08]

You know, the—probably the most important thing that we had to do when—this being the late '80s, was to gain the trust of the faculty as it relates to prospects that they would consider theirs. Meaning that, if we were gonna go and work with the faculty and said, okay, well, tell us about Mrs. Jones or something of that sort, and go raise money from Mrs. Jones, it was important that it got back to Dr. Smith. And that wasn't always the case in—beforehand. And so, we went about making sure that the faculty was a true partner in building this program, and that we would—we would deliver what we promised, and that they would not be left out of that equation. And over time, that credibility grew, and we take it very seriously here today. And because of that, I think that that's one of the real reasons for our success.

***Tacey A. Rosolowski, PhD***

[00:44:36]

Interesting. So, I mean, I really have no idea how such a process would work. I mean, are there institutional rules? I mean, if a patient or family member of a patient approaches a particular physician and says, "I would like to support your research philanthropically," is the faculty member obliged to contact your office and report that? I mean, how does that all—how do you find out?

***Patrick Mulvey***

[00:44:57]

They're not obliged to, but we weren't trained to be physicians and they weren't trained to ask for money, you know? And so, it's a real strong partnership. And most faculty—and we even trained faculty today—have training sessions to go over this with them, on how to do these things. But they know that

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giving to their program, in all likelihood, will be enhanced if they bring a development officer into the equation. And so, it's to their benefit to do that. Plus, they don't have the time to do this. And, plus if this is one of their patients, they may feel a bit awkward about it. And so, let somebody else speak for them, and let somebody else facilitate that for them. So, when Mrs. Jones comes and says, "Dr. Smith, I'm so happy with what you've done. What can I do to repay you?" Many times they now know it's, "I have some important research going on, and could I have somebody from the Development Office call you?"

***Tacey A. Rosolowski, PhD***

[00:46:07]

Oh, I see. Okay.

***Patrick Mulvey***

[00:46:08]

But that kind of relationship builds over time, and it builds in a deliberate fashion. And we take that very seriously.

***Tacey A. Rosolowski, PhD***

[00:46:15]

Mm-hmm. So, as you're telling me this story of these different dimensions of setting in place, as you said, growing very methodically and addressing all these different areas, I can see that you positioned yourself so when John Mendelsohn came in, in 1996, you had a kind of machine happening that was gonna be able to respond to this much broader vision of what the insti—of the Development Office could do, as the institution grow. What about changes now that Dr. [Ronald] DePinho has come in, and we have a change in administration?

***Patrick Mulvey***

[00:46:52]

Well, I—you know, I think it mirrors the other two gentlemen, in that he now has a bold vision, and Anderson deserves a bold vision. I mean, this—you know, Anderson is not what it is today because of somebody not having those type of bold visions. And so, there was one under Dr. LeMaistre. There was one under Dr. Mendelsohn. And now we have this Moon Shots vision under Dr. DePinho. And it's our business to go about developing that strategic vision of his, in a philanthropic manner, to be able to go out and secure the funds that are needed for that vision. And we've been successful. In the last two and a half years we've raised about \$240 million for the Moon Shots Program. And it's our target to try to raise about \$100 million a year for it over the next few years.

And so, I think that the public has received this very well, to think that, you know, you've got these Moon Shots that deal with eight cancers, and these platforms, and this organization that looks at life a little bit differently than it had before, as it is to MD Anderson. And people have embraced that bold vision. And so, I think he is very closely following in the footsteps of his predecessors in setting a tone for this institution that's gonna take it to its next level.

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***Tacey A. Rosolowski, PhD***

[00:48:28]

What is Dr. DePinho's involvement in the development activities? I mean, you mentioned John Mendelsohn's—

***Patrick Mulvey***

[00:48:35]

Absolutely. He's right—he's right there in the middle of it, too. He's a good fundraiser also. And he's worked very closely with us to hone our business plan. He has continued to provide significant resources for the development operation. And he gives us a significant amount of his time, too, to go out all over this country to see those individuals that are—that need to be seen, to hear his vision, and then to share their resources with us. So, he's become an excellent fundraiser in his own right, absolutely.

***Tacey A. Rosolowski, PhD***

[00:49:11]

So has that been a kind of learning curve for him, as well?

***Patrick Mulvey***

[00:49:15]

I think that he was more educated in fundraising than Dr. Mendelsohn was, because of his work up at Dana-Farber, and with the Belfer Institute, and things of that sort. So I don't know if—I don't think he had as quite a strong a learning curve as Dr. Mendelsohn did.

***Tacey A. Rosolowski, PhD***

[00:49:38]

Has he provided you with any insights about fundraising, I mean, in that partnership, as you have evolved a partnership with him? Have you learned something from him? [laughter]

***Patrick Mulvey***

[00:49:52]

Think big. You know? Think big—that's always—and that's always good. And he challenges us, and that's good too, you know? To take it to the next level—you know, the Nobel Prize business plan of a development office and things like that. So we've learned from him, absolutely, to be bold and to set out your strategic vision, and then to make sure that we put the resources that are necessary there to accomplish that, absolutely.

***Tacey A. Rosolowski, PhD***

[00:50:21]

Now, when you say “the Nobel Prize business plan,” what—in what sense do you mean that? [laughs]

***Patrick Mulvey***

[00:50:26]

Well, you know, just a—just a—the best business plan you can put together, you know?



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***Tacey A. Rosolowski, PhD***

[00:50:32]

[inaudible], yeah.

***Patrick Mulvey***

[00:50:33]

Yeah.

***Tacey A. Rosolowski, PhD***

[00:50:33]

Yeah.

***Patrick Mulvey***

[00:50:34]

Yeah.

***Tacey A. Rosolowski, PhD***

[00:50:35]

That's neat.

***Patrick Mulvey***

[00:50:36]

Yeah.

***Tacey A. Rosolowski, PhD***

[00:50:36]

Well, we're almost at four o'clock.

***Patrick Mulvey***

[00:50:39]

Okay, very good.

***Tacey A. Rosolowski, PhD***

[00:50:40]

And I thank you for your time today.

***Patrick Mulvey***

[00:50:43]

Well, my pleasure, too. Thank you for asking me those kind of questions and not—

***Tacey A. Rosolowski, PhD***

[00:50:48]

Sure.

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***Patrick Mulvey***

[00:50:48]

—other kinds of questions. I like talking about the institution much more than I do about anything else.

***Tacey A. Rosolowski, PhD***

[00:50:51]

Sure. Well, I want to thank you for your time today—

***Patrick Mulvey***

[00:50:54]

My pleasure.

***Tacey A. Rosolowski, PhD***

[00:50:55]

—Mr. Mulvey.

***Patrick Mulvey***

[00:50:55]

Pleasure to meet you. Pleasure to meet you.

***Tacey A. Rosolowski, PhD***

[00:50:56]

And I'm turning off—I'm turning off the recorder at 3:58.

## **Patrick Mulvey**

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### **Chapter 00B**

#### ***Interview Identifier***

***Tacey A. Rosolowski, PhD***

[00:00:00]

All right, all right, our counter is moving. It is two o'clock on May 19<sup>th</sup>, 2015. I'm Tacey Ann Rosolowski, and today I'm in the Office of Development in the Fannin/Holcombe Building for my second session with Mr. Patrick Mulvey. So, thanks very much for agreeing to speak with me again.

***Patrick Mulvey***

[00:00:21]

You're welcome.

Patrick Mulvey  
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## **Chapter 05**

### ***How Donations are Made to MD Anderson –In the Past and Today***

#### **B: Building the Institution;**

##### Story Codes

B: MD Anderson History  
D: On Philanthropy and Volunteerism;  
C: Donations, Gifts, Contributions;  
C: Professional Practice;  
B: MD Anderson History;  
B: Building/Transforming the Institution;  
B: Growth and/or Change;  
C: Discovery and Success;  
B: The Business of MD Anderson;  
B: The MD Anderson Brand, Reputation;  
C: This is MD Anderson;

#### ***Tacey A. Rosolowski, PhD***

[00:00:23]

And, you know, I was thinking a lot after our last session together about something you said about, kind of, the craft of development work, which is establishing a connection with someone on the basis of, kind of, what's important to them. You know, how to involve them in the mission of MD Anderson, which is something that's very profound, and which touches on a lot of really basic values about caring and the need for discovery. I mean, all of those good things. And, for me, who doesn't know very much about development work, and a great many people who are going to be listening to this interview who aren't real familiar with that, it makes sense to me, or I kind of understand how that connection might be made with really big donors. When you think of philanthropists you think of people who are very wealthy who are endowing buildings and providing large sources of funds for an institution to do things. But one of the things I was curious about is, What about all the other folks? How do we—how do you and your office reach out to a very wide range of individuals, to appeal to them to get involved with MD Anderson?

#### ***Patrick Mulvey***

[00:01:35]

Well, like you and I mentioned last time we met, Anderson is fortunate to receive one hundred and thirty or forty thousand gifts a year.

#### ***Tacey A. Rosolowski, PhD***

[00:01:47]

Wow.

#### ***Patrick Mulvey***

[00:01:48]

And that's many, many individuals who are investing, at whatever level they can, in the mission of this

Patrick Mulvey

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institution to end cancer. And one of the mantras that we have here in our office is that we should never have a jaded view of a size of gift, because every gift is important to this institution. And I would say to anyone—and have, publicly, in speeches and things like that—that sometimes a twenty-five dollar gift from an individual may be a greater sacrifice than a \$25 million gift from another individual. So numbers are always relative. But I think the significance of this is that the numbers of individuals who choose to give of their resources freely to support the mission of this institution, it's just staggering. It's just—it's awe-inspiring when you begin to think about it.

And so, each of those individuals has a story to tell of their own, as to why they've chosen to pull out the checkbook or their credit card or their wallet to contribute to this institution, at whatever level they're capable and most comfortable in doing. And we should—we should be always thankful for each and every one of those gifts. And so, we should recognize those individuals in appropriate manners. Thank them, at whatever level we can. And to thank them as many times as we can. And then, also, we should feed back to them information on how those gifts were used. And we do that through the—through a number of means.

But from the group—the audience that you're talking about now, you know, many of these individuals give through our direct-mail program, and they'll give five dollars or ten dollars or twenty-five dollars, or whatever the number might be. And we make sure that, in addition to the thank-you letters and welcome packages and things of that sort that they're gonna receive, that every August we send to them a letter giving them examples of how those unrestricted dollars were used at this institution.

So I think that that's a donor right, to know that. And I think that it's an obligation on the institution's part to try to give back to those individuals as much information as we can, on how we utilize those gifts.

***Tacey A. Rosolowski, PhD***

[00:04:33]

Now, you mentioned that there are a hundred and thirty to a hundred and forty thousand gifts per years. How—what were the numbers when you came to the Development Office in the '80s?

***Patrick Mulvey***

[00:04:46]

You know, there was probably about 12,000 gifts—

***Tacey A. Rosolowski, PhD***

[00:04:49]

Wow.

***Patrick Mulvey***

[00:04:49]

—back in the '80s, something like that. I'm stretching on my memory, but—

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***Tacey A. Rosolowski, PhD***

[00:04:56]  
[inaudible].

***Patrick Mulvey***

[00:04:56]  
—you know, eight to ten to twelve thousand gifts raising, you know, \$8-10 million, perhaps. And we've been fortunate to be able to grow that number over the years.

***Tacey A. Rosolowski, PhD***

[00:05:09]  
And the strategies for making that grow? I mean, some of it, obviously, has been that working with high-dollar—people who are capable of high-dollar donations.

***Patrick Mulvey***

[00:05:19]  
Mm-hmm.

***Tacey A. Rosolowski, PhD***

[00:05:19]  
But what about expanding that message? The direct mail, for example—when did—was that instituted?

***Patrick Mulvey***

[00:05:25]  
We started that program in the late '80s on a limited basis, small basis. And we've grown—we grew that through just three years ago to about three million pieces a year, that would raise anywhere from—depending on the year—\$8-10 million a year, versus the \$300,000 or \$400,000 a year back in the '80s. And then, in our current business plan, we have intent to actually increase that mailing from three million pieces a year to twenty-five million pieces a year, over about a five-year period.

***Tacey A. Rosolowski, PhD***

[00:06:12]  
Now how do you identify the individuals who receive that mail?

***Patrick Mulvey***

[00:06:15]  
Well, there's two—there's two segments to that direct-mail program. One is for people who are current donors to the institution. Now, we will mail them a closed-face envelope letter that's different from an acquisition piece, and it will give a little bit more information. So it's more of a high-end type of piece. And so, there's probably 700,000 to 900,000 of those individuals that will get those kind of letters, maybe four to five times a year.

And then there's an acquisition part of a direct-mail program. Those names are individuals who have never given to the institution before, whose names we acquire through brokered lists. And we've done

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this long enough to know what kind of lists work for us. And those examples might be *Texas Monthly* magazine. It might be *Better Homes and Gardens*. Might be *The Economist*, and other sources of brokered lists, that then we—then we're able to mail to on a one- or a multiple-time basis.

And then, out of those mailings, if you look nationally, if you get a one-percent return on an acquisition program, you're doing really well. And if you're able to do an acquisition program that costs less than a dollar to raise a dollar, that's even better. And then, of course, then the other program I spoke about, there's a much greater return on those that have already given to MD Anderson. But the real value in a direct-mail program is not only the unrestricted monies that you raise today, but it's the long-term value of those individuals who become your donors. And, over time, you might find, in a ten-year period, 1,500 or 2,000 or 3,000 of those individuals who were acquired ten years ago are still giving to the institution.

Well, those are the individuals that you remember I was—talked about meeting, dating, become engaged, and marry. Those are the type of individuals, then, that we're talking to differently, and we're developing different relationships with. And they become—not all of them, but many of them become major-gift donors to the institution over time because of the relationship that you build with them. And then, eventually, many of those people will leave you in their estate plans. And so, it's that art and that science.

And so, again, as—referring back to last time we visited, you know, there's a number of ways that you meet people to get them to become friends of the institution at the level of investing in the institution through their contributions. And the direct-mail program is one of those where you meet new friends. Special events is another way where you meet new friends. Referrals from our Board of Visitors is another way. And on and on. And then, of course, the patients that come to MD Anderson. Those individuals have been directly touched by this institution, and many, many, many of them want to give back. They want to give back because this money—this resource that they have—may be really the only tool that they have to fight that disease. Because of the rest of it is in the hands of the good doctors and the researchers at the institution. But they do have a tool to fight that disease, and it's the money that they contribute to support those individuals who do the research. And that translates into the care that they receive.

***Tacey A. Rosolowski, PhD***

[00:10:08]

Now you mentioned the late '80s for the direct-mail program. When did the Development Office begin to look at patients, for example, as a significant possible source of donations?

***Patrick Mulvey***

[00:10:20]

Well, I think patients themselves have looked at themselves as major resources for—to be prospects and donors. And it's just a natural outflow of individuals who are grateful for the treatment that they received here. And so, many times, they raise their own hand, which we're thankful for in that regard.

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***Tacey A. Rosolowski, PhD***

[00:10:46]

You mentioned last time that—talking to the faculty, and working with the faculty—

***Patrick Mulvey***

[00:10:50]

Right, right, right.

***Tacey A. Rosolowski, PhD***

[00:10:50]

—they've been approached by patients.

***Patrick Mulvey***

[00:10:51]

And so, faculty will identify those individuals. Individuals will identify themselves to the faculty. And so forth. So it's a—it's certainly a two-way street in all of that type of activity there. But we need to pay attention to that, because that's a—that's a significant resource as it relates to philanthropy and other things for this institution, you know?

***Tacey A. Rosolowski, PhD***

[00:11:10]

Mm-hmm. And I imagine, as the flow of patients has dramatically increased, the opportunities for that have increased as well.

***Patrick Mulvey***

[00:11:17]

That's right, that's right.

***Tacey A. Rosolowski, PhD***

[00:11:18]

Now, so, are there special materials that you would use for patients that are a little bit different? I mean, do you wait for them to raise their hand, or do you approach patients?

***Patrick Mulvey***

[00:11:31]

You know, we develop cases for support for all the institutional priorities as they relate to philanthropy. And when individuals are interested in a specific disease site, you know, hopefully we have some material that we can share with them in that regard. If not, and they have an interest in Dr. Jones, we can always work with Dr. Jones to prepare whatever the prospect might need to consider, as a proposal to them. Of course, all of this is done within all HIPAA [Health Insurance Portability and Accountability Act] regulations. And any type of legality issues that there are, we stay well within the parameters of that. But we certainly want to give them avenues to give back if they want to—if they—if they so choose to do so.



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***Tacey A. Rosolowski, PhD***

[00:12:22]

What about working with organizations, corporations—how has that evolved over the years?

***Patrick Mulvey***

[00:12:30]

Well, if you look—if you look at giving on a national level in the United States, you're first gonna find that, of the sources of philanthropic gifts, eighty-plus percent of giving in the United States comes from individuals. So that's where you're gonna spend a significant amount of your time. And the way—and that's the way that we've designed our programs here. Corporations and foundations may give perhaps as much as seven percent each, respectively speaking, to the total amount of money given in the United States, which is, you know, over \$300 billion a year. So, certainly, that's an important part of a program, but it's not the major part of a program. So we certainly want to pay attention to our corporate friends, which we do. And as I mentioned to you before, all of our prospect portfolios carry all donor types. And so, we have individuals, foundations, and corporations in our donor type—in our pro—in our portfolios.

And then, of course, the foundations—big and small—are certainly important to the institution, too. But where the real rubber meets the road is gonna be the individuals, and that type. So we don't—we don't discount corporations or foundations. They're an important part. We place those appropriate foundations and corporations and individuals portfolios. But individuals is where the real rubber meets the road.

***Tacey A. Rosolowski, PhD***

[00:14:06]

I can—last time you said America is a very giving society. And, you know, now when you tell me those numbers—about eighty percent—I mean, I can understand why. I mean, this is just kind of a side question, but do you have any insight into why it is that Americans are so willing to give freely of their funds in this way?

***Patrick Mulvey***

[00:14:27]

Gosh, it goes back to—it goes back to Thanksgiving Days. [laughter] You know, it goes back to the Pilgrims. I mean, I think it's something that's bred into Americans, and it came here from overseas, and we brought on to it. I think it—this—when the Pilgrims came here, they were grateful and decided to give back. And I think that it's grown ever since, and has become a fabric of our being as Americans, that they give back in that regard. You're beginning to see that in other countries, but nothing like you see in the United States. Nothing like you see in the United States.

***Tacey A. Rosolowski, PhD***

[00:15:07]

That's interesting. What about two other—[coughs] excuse me—two other kind of mechanisms that I was thinking about. One is, tapping employees to give to MD Anderson. How did that evolve?

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***Patrick Mulvey***

[00:15:23]

Well, in all of my time here, we've only done one family campaign, if you want to call it that. And that was back in the Fulfill the Promise days, when we did a campaign back in the early 1990s. And so, we, as an institution, at least up to this point in time, have chosen not to actively pursue, in a formal program, pay—employee giving.

***Tacey A. Rosolowski, PhD***

[00:15:58]

Why is that?

[00:15:59]

***Patrick Mulvey***

I just think it's just—it's just the way Anderson is looked upon, the way that people dedicate their service to the institution. And it's just something that they haven't chosen to do in a formal way. That's not to say that employees do not give. They do. They give in many, many ways, from volunteering their time, to United Way type of activities, to giving directly to the institution. I don't have the specific statistics for you, but I do know that we have—we have a good number of individuals who give on a regular basis, and we do have a number of faculty who not only give but include MD Anderson in their estate plans. Many of them do that confidentially and anonymously, because they don't—it makes them uncomfortable if that was public knowledge. And so, we just don't advertise it. But we do work with them quietly, and we work with them respectfully, in whatever manner that they wish to—wish to work to give back.

***Tacey A. Rosolowski, PhD***

[00:17:15]

Now you said that there was a formal appeal during the Fulfill the Promise campaign.

***Patrick Mulvey***

[00:17:21]

Mm-hmm.

***Tacey A. Rosolowski, PhD***

[00:17:21]

And what were the results of that?

***Patrick Mulvey***

[00:17:24]

We had about thirty-five percent of the workforce at that time give. And I believe the total amount given back in those days—that was about 800,000, maybe \$850,000 that was given, which I think is extraordinary given the fact that just about during that time there was about—there was layoffs of about 1,000 people during that time. And so, it was not an easy time to do a family campaign. But they came up and they donated a significant amount of money. And over a third of the employee force gave, so I think that's significant.

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***Tacey A. Rosolowski, PhD***

[00:18:01]

What do you think—I mean, it might be obvious, but what do you think that says, particularly at that time, when it was a time of stress in the institution?

***Patrick Mulvey***

[00:18:10]

That these people wake up every day with one thing on their mind, and that's to come here and make life better for the patients and the families in this institution. Single-minded, single focus, making sure that we make—do it right for those people that we serve.

***Tacey A. Rosolowski, PhD***

[00:18:28]

Yeah. A lot of people talk about how deeply committed they are to the institution. I hear that all the time in my interviews.

***Patrick Mulvey***

[00:18:35]

There's no question about it. No question about it. No question about it. It's a unique institution. It's a unique institution, and people are proud to work here, and people take their business very, very seriously.

***Tacey A. Rosolowski, PhD***

[00:18:48]

What—how would you characterize what's unique about MD Anderson?

***Patrick Mulvey***

[00:18:53]

You know, think—just think about an institution that is solely dedicated to one disease. And, you know, you don't birth babies, and you don't fix broken ankles. I mean, every day, 20,000 people wake up and come to this institution with one common enemy, and that's cancer. And one purpose, and that is—is to defeat this disease and to make life better for the patients and their families that come here. I mean, that—it's—it is a—you can—you can tell somebody your purpose in life very quickly in an elevator when you have—wake up and go to that kind of place to work every day. That's what it means to me.

***Tacey A. Rosolowski, PhD***

[00:19:41]

Mm-hmm. So you take that very personally, too?

***Patrick Mulvey***

[00:19:43]

Absolutely.

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***Tacey A. Rosolowski, PhD***  
[00:19:42]  
Yeah.

***Patrick Mulvey***  
[00:19:44]  
No question about it. No question about it.

***Tacey A. Rosolowski, PhD***  
[00:19:48]  
Tell me about the planned-giving program. When did that start?

***Patrick Mulvey***  
[00:19:54]  
We started that program formally probably in the early '90s. And brought a—one or two individuals in to focus on that, and to develop that. Anderson had not really focused that—focused on that type of giving at that time. But as many things—as you become better at what you do, and you become more sophisticated at what you do, you continue to strive to do things better and to expand your horizons. And that is certainly a giving vehicle for individuals that is important to people. I mean, people—you hear it every day, you know? You want to get your things in order, no matter if you're ill with cancer or, or you're a forty-year-old at the same time. So it's important that you put those things in order. And many times people don't have an opportunity to make outright contributions, because they may not be financially able. Or they are financially able to, but in your estate plan, I mean, the power of being able to give a gift through your estate to endow something that would equal your annual gift every year is magnificent.

So, you know, the opportunity there presents itself to individuals, that not only want to have a lasting contribution, but then there's other opportunities. The IRS [Internal Revenue Service] helps us, you know, in, in the tax laws on that. And people give through their estate for so many different personal reasons. But the fact of the matter is, is that this generous citizenry is going to leave institutions like MD Anderson in their estate plans. And so, we owe it to ourselves to make sure that we have—provide that service to them at whatever level we can.

***Tacey A. Rosolowski, PhD***  
[00:22:11]  
And what are the kinds of activities, or how is their money used in the institution?

***Patrick Mulvey***  
[00:22:19]  
Well, most people—I mean, just like right now, probably eighty to ninety percent of all gifts that MD Anderson receives are restricted by the donor to a specific purpose—maybe breast cancer research, or an endowment, or the Moon Shots Program, or what have you. So when someone leaves you in their estate, they can do the same there. And they can say, I'm leaving you x number of dollars upon my death, and it

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is my desire that these dollars be used for whatever it is, like that. So they can restrict a purpose through their estate plan, and many times do.

***Tacey A. Rosolowski, PhD***

[00:22:59]

Hm. So I'm sure it's all over the board, depending on—

***Patrick Mulvey***

[00:23:02]

Right.

***Tacey A. Rosolowski, PhD***

[00:23:02]

—on their priorities and experience.

***Patrick Mulvey***

[00:23:04]

Right.

***Tacey A. Rosolowski, PhD***

[00:23:05]

Like you said, every gift has a story.

***Patrick Mulvey***

[00:23:06]

Absolutely.

***Tacey A. Rosolowski, PhD***

[00:23:07]

Yeah.

***Patrick Mulvey***

[00:23:07]

Every—every one of them does.

***Tacey A. Rosolowski, PhD***

[00:23:09]

Yeah.

***Patrick Mulvey***

[00:23:09]

Every one of them does.

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**Chapter 06**  
*A Brief History of Donations to MD Anderson*  
**A: Overview;**

**Story Codes**

B: MD Anderson History  
D: On Philanthropy and Volunteerism;  
C: Donations, Gifts, Contributions;  
C: Professional Practice;

***Tacey A. Rosolowski, PhD***

[00:23:10]

Interesting. Now, last time when we spoke, you mentioned that when you came on in the '80s, that, you know, MD Anderson wasn't nearly as sophisticated in terms of development work as it is now. And you said something about that being kind of the case in the South. And I was wondering what that was about. You know, why were there differences regionally in this?

***Patrick Mulvey***

[00:23:32]

Well, you just think of—you think of—well, we're much younger down here than they are in the Northeast, first. And so, you have the great institutions in the Northeast that were created before many of the universities or not-for-profits here in the South and West. And so, they just got at it f—quicker, and became good at it sooner than we did. But that doesn't mean that we didn't catch up, and we have caught up. And if you just take a look at the University of Texas system itself, it's one of the largest philanthropic recipients, you know, in the country.

***Tacey A. Rosolowski, PhD***

[00:24:14]

Really?

***Patrick Mulvey***

[00:24:14]

Maybe behind University of Southern Calif—I mean, California and a few others like that. So, the UT [University of Texas] system is a significant—and Anderson is certainly one of—one of the largest within the system as it relates to philanthropic dollars. But I think it's more timing than it is anything else. For MD Anderson—and many public institutions, I would say, but I can't speak for them; but for Anderson I can—is that, you know, when Anderson was created as part of the University of Texas system, much—a large portion of its operating budget came from a state appropriation. And so, perhaps—and this would be a time before I ever came here—the need for philanthropy was not as great as it is today, or as it was in the Northeast for other institutions and all that. And so, not as much attention was placed on it as it is right now, too. So I think there's a number of reasons for that. There's not just one reason. But I think, historically, if you take a look back, you'll see that institutions in the Northeast and all that were certainly hard at this before we were.

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***Tacey A. Rosolowski, PhD***

[00:25:32]

Hm. I know from speaking with—

***Patrick Mulvey***

[00:25:33]

In this region, I mean. Not just Anderson.

***Tacey A. Rosolowski, PhD***

[00:25:35]

Mm-hmm. I know from speaking with people I know in development in Northern academic institutions, they said that often they have a real challenge, if they're working with a state institution, for example, to convince people to give. Because the assumption is, well, this institution is being supported by my tax dollars. I'm already supporting it. Why should I, basically, do double duty on that? So, it's a communication—you know, there's a communication issue. So that makes sense, you know, if it's—

***Patrick Mulvey***

[00:26:04]

We face that issue from—

***Tacey A. Rosolowski, PhD***

[00:26:06]

Do you?

***Patrick Mulvey***

[00:26:06]

—time to time, too. You know, you have some—there are—there are individuals who you need to convince that a philanthropic dollar in the front door isn't a state dollar going on out the back door—

***Tacey A. Rosolowski, PhD***

[00:26:14]

Right.

***Patrick Mulvey***

[00:26:14]

—or vice versa, and things of that sort. And that's only natural. I understand that. But when you begin to talk about the mission and the vision of an institution like MD Anderson, and its real purpose, that becomes a minor discussion, if a discussion at all. But in the earl—I do remember, in the early days, us having to deal with that all the time.

***Tacey A. Rosolowski, PhD***

[00:26:36]

Really? Yeah?

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***Patrick Mulvey***

[00:26:37]

Yeah. Not so much now.

***Tacey A. Rosolowski, PhD***

[00:26:38]

And what were your responses at that time? I mean, how did you make the case?

***Patrick Mulvey***

[00:26:45]

Philanthropy raises the plateau, and it allows to create the excellence that would not come through normal funding channels, be that the state and things of that sort. That if we were going to move the needle on an institution like this, philanthropy plays a very important part. And to assure people that it's a not a zero-sum game, you know, which you can do on paper, and statistically, and things like that. Again, not that if you get a dollar philanthropically the state's going to take a dollar away from you. But I understand that concern, and we were able to, as you say, use appropriate communication to prove that that point was moot.

***Tacey A. Rosolowski, PhD***

[00:27:36]

And I'm sure having those discussions is a really important step in building that trust, that helps add another dimension to the value of the institution—that you can trust—

***Patrick Mulvey***

[00:27:47]

No question.

***Tacey A. Rosolowski, PhD***

[00:27:47]

—the individuals who are inter—you're interacting with.

***Patrick Mulvey***

[00:27:49]

No question.

***Tacey A. Rosolowski, PhD***

[00:27:49]

Yeah, yeah.

***Patrick Mulvey***

[00:27:50]

Absolutely, absolutely. Remember, these people are giving you something with no expectation of return other than to advance the science and the care of individuals. They're not getting a coffee maker or—



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***Tacey A. Rosolowski, PhD***  
[00:28:04]  
Right.

***Patrick Mulvey***  
[00:33:09]  
It wasn't so much new, but it certainly became the focus.

***Tacey A. Rosolowski, PhD***  
[00:33:12]  
Okay, okay.

***Patrick Mulvey***  
[00:28:04]  
You know what I'm saying?

***Tacey A. Rosolowski, PhD***  
[00:28:05]  
Yeah.

***Patrick Mulvey***  
[00:28:06]  
So, I mean, it's a very special act.

[00:28:08]  
***Tacey A. Rosolowski, PhD***

It's very special. And, you know, it seems, too, being offered the opportunity, you know, like the theme line of MD Anderson, Making Cancer History—I mean, to participate—

***Patrick Mulvey***  
[00:28:18]  
That's right.

***Tacey A. Rosolowski, PhD***  
[00:28:19]  
—in this historical task.

***Patrick Mulvey***  
[00:28:21]  
That's the opportunity in front of them, absolutely.

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***Tacey A. Rosolowski, PhD***

[00:28:23]

Yeah, yeah, yeah. It is very beautiful, yeah.

Patrick Mulvey  
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**Chapter 07**  
***Technology and Social Media: Impact on MD Anderson Fundraising***  
**B: Building the Institution;**

**Story Codes**

B: MD Anderson History  
D: On Philanthropy and Volunteerism;  
C: Donations, Gifts, Contributions;  
B: MD Anderson History;  
B: Building/Transforming the Institution;  
B: Growth and/or Change;  
B: The MD Anderson Brand, Reputation;

[00:28:23]+

***Tacey A. Rosolowski, PhD***

Tell me a bit about how technology and social media, for example, have changed the way development operates. Has that—

***Patrick Mulvey***

[00:28:41]

That's a good question. No, that's a good question. I mean, we all must employ all of those opportunities now, from—that would be the big umbrella e-philanthropy, from social media to Facebook to all the different type of avenues that you have where people give. And, clearly, this new generation of individuals grew up with all of this technology, if you can think of it. My daughter, who's twenty-six years old, has never known a world different than with computers. Whereas me—I can't speak for you, but me—I can't say that. And so, it is a way of life. And so, an institution like ours and an office like this one needs to—needs to stay fresh and informed and take full advantage of all of those avenues of communication.

And we do that. Now, we've gone—we've done this very deliberately, and have moved into it in not as fast a fashion as some others have, or as some might want. But I always remember that commercial about those young people sitting around the table, and they finally put their website out, and they get one click and two clicks and three, and all of a sudden there's thousands of clicks and they're all breathing into paper bags because now they can't service what they—what they've presented out there on the web. And so, we've very deliberately gone into it to make sure that as we move into these new avenues, that we're able to service those avenues, too. Meaning to receive gifts, to thank people for gifts, to communicate, to answer their questions, and do all of those kind of things that I believe are necessary to continue to achieve the credibility that an institution like MD Anderson has and deserves.

And so—but we are definitely in that, but we also know that there are still some significant generations out there that do things the old way. And so, we're going to make sure that what we do is, we have a combination of direct mail, and email, and e-philanthropy, and make it a package, so that we can touch all

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different kinds. I doubt that an eighty-five-year-old man or woman right now is necessarily waiting for our next email. But they may be waiting for our next direct-mail piece.

***Tacey A. Rosolowski, PhD***

[00:31:24]

Right.

***Patrick Mulvey***

[00:31:24]

And so, we need to be sensitive to that audience, as well as sensitive to this audience that we're discussing right now.

***Tacey A. Rosolowski, PhD***

[00:31:30]

I'll confess, I'm not familiar with the term *e-philanthropy*. How is that different from email?

***Patrick Mulvey***

[00:31:35]

Well, see, it—electronic philanthropy. I mean, you know, so any type of activity such as that, where people can donate.

***Tacey A. Rosolowski, PhD***

[00:31:45]

Directly through a website?

***Patrick Mulvey***

[00:31:47]

Through a website, that's right. Push the "give now" button, you know? And if you look at Facebook, people are raising monies on Facebook: "Mary Jones is a patient at MD Anderson, and she has a lemonade stand," and whatever it might be. [laughs] But it's the electronic means of communication and fundraising.

***Tacey A. Rosolowski, PhD***

[00:32:10]

So, I mean, with the e-philanthropy, for example, would you say there's a specific project that needs funding, and so an individual could give specifically to that, or—

***Patrick Mulvey***

[00:32:21]

There's a—there's a term out there called *crowdfunding*, which does exactly that. So—and not that we do it here, but I'm aware of, you know, like a researcher may have a—you could go out on the web and find this—a researcher has a specific project that he needs x amount of dollars for, and he makes an appeal, in just that way, called crowdfunding. And sometimes they get significant responses. Think about the—let's see. I'll give you another example. I'm trying to think, what was that one where they

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did—where you poured the cold water on everybody? I mean, that's the—still all of that type of thing, there. So, yeah, absolutely.

***Tacey A. Rosolowski, PhD***

[00:33:07]

Mm-hmm. But MD Anderson hasn't used those kinds of strategies yet?

***Patrick Mulvey***

[00:33:10]

Very, very rarely have we done that—have we done that. I mean, there's opportunities there, and there's opportunities that present themselves that might not present the institution well, too. So, one has to be careful, when you open that door, what we might find. So if you're going to do something like that, I think there's got to be some real specific policies and procedures that the institution administratively looks at, and make sure that it's comfortable with, and that the institution as a whole understands the parameter under which you must work for stuff like that, yeah.

***Tacey A. Rosolowski, PhD***

[00:33:49]

What are your, kind of, hopes for how that might evolve, and how social media could be used?

***Patrick Mulvey***

[00:33:56]

You know, wouldn't it be nice one day if we sent something out and everybody in the United States gave a dollar to the institution through e-philanthropy? You know, I think that the idea there—and I'm be a little snip there, but any opportunity that MD Anderson has to create a greater awareness of itself throughout the nation and the world, we should take advantage of that technology. And this is one of those technological opportunities that the institution should take full advantage of. And so, going to the point of where somebody can register themselves online, to learning about MD Anderson and its services online, to what opportunities they have to participate in the philanthropic program, the opportunities are endless in that regard. Absolutely.

***Tacey A. Rosolowski, PhD***

[00:35:06]

Are there other technologies that have emerged during your time here that have substantially changed how you operate?

***Patrick Mulvey***

[00:35:17]

Well, you know, just the—I mean, just the power of computers. The ability to be able to segment populations that you might want to reach out to with one message or another, and the idea that you can—you can—you can gather so much information in such a quick amount of time, rather than working off index cards like we used to do, you know, is—

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**Tacey A. Rosolowski, PhD**  
[00:35:45]  
[laughs] Seriously

**Patrick Mulvey**  
[00:35:46]  
Oh, yes, so all of the—all of that. You know, just like in any business, I mean, the technology is—has made us so much more efficient, and allows us to work smarter rather than, perhaps, harder, yeah.

**Tacey A. Rosolowski, PhD**  
[00:36:00]  
That word, *efficiency*, kind of reminded me of another issue. In the '90s, I believe, there was a move to make the development office much more efficient. I read that someplace. Is that resonating with you at all? Not—

**Patrick Mulvey**  
[00:36:18]  
Well, we continually strive [laughter] for greater efficiency, so the '80s, the '90s, the 2000s.

**Tacey A. Rosolowski, PhD**  
[00:36:28]  
Okay, all right. I think it might have been part of a, sort of, institution-wide, kind of, focus on streamlining, but I'm not sure.

**Patrick Mulvey**  
[00:36:38]  
Don't know [inaudible].

**Tacey A. Rosolowski, PhD**  
[00:36:39]  
It doesn't resonate with you?

**Patrick Mulvey**  
[00:36:40]  
Uh-uh.

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## **Chapter 08**

*The Office of Development: What Has Been Achieved and Today's Focus on the Moon Shots Program*

### **B: Building the Institution;**

Story Codes

- A: The Administrator;
- A: Career and Accomplishments;
- C: Donations, Gifts, Contributions;
- B: MD Anderson History;
- C: Portraits;
- B: Building/Transforming the Institution;
- B: Growth and/or Change;
- C: Discovery and Success;
- B: The Business of MD Anderson;
- B: The MD Anderson Brand, Reputation;

*Tacey A. Rosolowski, PhD*

[00:36:41]

Okay, yeah, no problem. No problem. Well, I wanted to ask you, too, what's your view of what the—what had—what Development has achieved, both internally and externally, over the course of your time, really, as leader of this office?

*Patrick Mulvey*

[00:37:07]

What we have achieved. You know, I think on a num—on a number of levels. Financially, we have provided this institution, over my tenure, probably as—I don't count these numbers, but maybe three or more billion dollars to fund the research, the capital, and the patient care, and education, and prevention needs of this institution. So, we've pro—we have helped facilitate the relationships to provide a significant financial resource to those who do the hard work here at the institution. I think we've built an office that has garnered, you know, significant credibility amongst the faculty, and that—you know, we s—we are here to serve the institution. And so, I think that that's an important relationship that needs to be nurtured.

*Tacey A. Rosolowski, PhD*

[00:38:12]

Is there some—can I interrupt you just for sec? Is there something that you think the rest of the institution—the department-level divisions—could learn from the way you work here? Your understanding—this office's understanding of what leadership and relationships are all about—is there something that others could learn from you?

*Patrick Mulvey*

[00:38:37]

Well, you know, I think that they're excellent at what they do. So, you know, our business is all about relationships, and their business is about relationships, too. So I'm sure we can all learn from each other,

Patrick Mulvey

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you know, in that re—and we have. And we have, too. We are able to raise dollars here for this institution because of the faculty of this institution. If it weren't for the faculty and the caregivers of this institution, we wouldn't raise—we wouldn't—maybe we'd raise some money, but we wouldn't be as successful as we have been. And so, you know, all the credit goes to them, not us. And that—we—we're good at facilitating relationships, but they're the ones who provide the expertise, and they're the ones who people write the checks for their work. It's not Pat Mulvey's work, [laughs] I can assure you of that.

And so, you know, the importance of understanding who your stakeholders are is another thing that we've been able to do here, so that—I mean, those are important audiences out there for this institution. And this institution is a public institution that represents all walks of life. And we treat individuals from all walks of life. And so, we should represent all walks of life, and we do—we do that to s—I think, going back to your question about some of the things that we've done well, I think we've been able to help build that community and built that group of stakeholders. You know, and those people's voices, when they vote for you, is strong.

And so, that all goes into helping build the reputation of this institution. And so, we're one small part of that.

***Tacey A. Rosolowski, PhD***

[00:40:46]

What are your next steps for the office, you know, in the sense of understanding how it's gonna grow, develop, become better at what it does?

***Patrick Mulvey***

[00:40:58]

Well, I think that we need—we clearly understand our marching order right now, in doing everything that we can to provide as much philanthropic support for the Moon Shots Program. I mean, that is the institution's priority right now. And it certainly is the priority of our office. It's the priority of the Board of Visitors, with whom we work closely. And so, we're gonna continue to remain organized and be flexible, to the point necessary, as Moon Shots are retired, as when Moon Shots move on, flagships come on, flagships go off, and things that—so you need to be nimble in that regard. You need to have the opportunity to change with the times.

But it's also important, I think, for this office to continue to grow. If you take a look at MD Anderson's Development operation, it's a significant operation. We raise significant dollars. But, you know, there's just thirty-two fundraisers in this office. And our plan calls for there to be at least fifty-five or so fundraisers in the next, you know, three or four or five years. And so, we need to manage growth, and we need to manage efficiencies within that, going back to your question [inaudible] efficiencies. And that's not always easy—an easy thing to do.

***Tacey A. Rosolowski, PhD***

[00:42:35]

Mm-hmm. What are the challenges there with growth within the office?



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***Patrick Mulvey***

[00:42:40]

Well, you know, the larger you get, you know, there's—all kinds of management issues go with that. And a real challenge for not only MD Anderson but any not-for-profit out there in the United States right now is finding good fundraisers. They're just—they—it's difficult to find good fundraisers. And so, challenges to keep your business plan fresh, to find the resources necessary to grow. That means the financial resources as well as the capital resources as well as the human resources to grow. And then, to manage that operation as efficiently as we're managing it right now, and to see to it that that operation raises more dollars exponentially to anything we have right now. So, there's a whole lot of issues out there that you deal with in that regard.

***Tacey A. Rosolowski, PhD***

[00:43:41]

Now you mentioned the Moon Shots being, you know, the absolute, universal priority right now at the institution.,

***Patrick Mulvey***

[00:43:48]

[coughs] Yes, yes.

***Tacey A. Rosolowski, PhD***

[00:43:51]

Have there been some special challenges or issues you've had to deal with, communicating about the Moon Shots and what that is, in terms of raising dollars?

***Patrick Mulvey***

[00:44:04]

You know, there was a process that took place to identify those Moon Shots. And then, after the identification of those Moon Shots, the development of cases for support and budgets, and to understand, really, what a Moon Shot Program is. And I think the institution came together well in an advancement area with Communications, Public Affairs, Marketing, and Development, to develop those talking points to, first, describe what the vision of the Moon Shots is; and then, describe what those were that got chosen, and why they were chosen; and then, to be able to determine and describe the needs of those programs to achieve the milestones that they said that they would achieve to become a Moon Shot.

All of those things needed to be put into a nice little package, and I think that we've achieved that now. And we've been able to raise about \$240 million towards the Moon Shots Program since September of 2012. So that's thirteen, fourteen—not quite three years. And I think we'll continue to be able to do that. So, I think the public is understanding it. People love this bold vision. I mean, MD Anderson should have such a bold vision because of what kind of institution it is. And I believe you're beginning to see the results of those Moon Shots. And as those results are reported out, I think you'll even attract more and more people and attention to those Moon Shots.

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***Tacey A. Rosolowski, PhD***

[00:45:38]

Now, when you're describing that process, obviously you—this office collaborates with a lot of other offices. Is that how—the modus operandi? I mean, is that how a development plan is put together—a program is put together?

***Patrick Mulvey***

[00:45:54]

Absolutely. I mean, we're—we are the biggest fan of Marketing and Public Affairs, because if they're successful, we're successful. And so, just going back again to the awareness and the messaging. And all of those things don't come just out of Development. They need to come out of—through a true collaboration of these offices. And so, you work hard to continue to keep those offices together, and to keep those offices talking. And we've got some great colleagues in those others that want to cooperate, and know that they're an important part of the success of the entire institution, not just any one program.

***Tacey A. Rosolowski, PhD***

[00:46:31]

Yeah, I'm sort of getting the sense of quite a machine that operates, you know—

***Patrick Mulvey***

[00:46:37]

Yeah.

***Tacey A. Rosolowski, PhD***

[00:46:37]

—to bring a lot of things to the table—

***Patrick Mulvey***

[00:46:39]

Right, right.

***Tacey A. Rosolowski, PhD***

[00:46:39]

—to craft that message and—

***Patrick Mulvey***

[00:46:41]

Yeah, a lot of good people—a lot of good people coming together to—for—again, the one message.

***Tacey A. Rosolowski, PhD***

[00:46:46]

Mm-hmm. Who are some individuals that you've really relied on, and have helped you craft that message?

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***Patrick Mulvey***

[00:46:55]

Over the years—in years past, Steve Stuyck, who was vice president for Public Affairs; Harry Holmes, who was vice president for Government Affairs; now, currently, Mark Moreno; Sarah Newson, who is now, you know, head of Public Affairs; of course, Alicia Jansen in Marketing—great marketer—has been very, very helpful to us; DeDe DeStefano, who’s now in Cause, but was with us for a number of years, in putting out the Development Message; now Sarah Watson. And then, of course, Dan Fontaine has been a great, great leader that we rely on here in the institution.

And certainly the presidents of this institution under which I have served—Mickey [Charles A.] LeMaistre, John Mendelsohn, and now Ron DePinho—all great fundraising CEOs [chief executive officers]. And, you know, when you think about an institution like this, the chief development officer of an institution is the president, and you have to—you know, he or she is the individual that leads the charge for us. And so, the more effective those individuals are—and they’ve all been great—the more success you can get in an office like this.

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**Chapter 09**  
***The Positive Effects of Institutional Growth***  
**B: Institutional Mission and Values;**

**Story Codes**

C: This is MD Anderson;  
B: MD Anderson History;  
B: Building/Transforming the Institution;  
B: Growth and/or Change;  
C: Discovery and Success;  
C: Personal Reflections, Memories of MD Anderson;

***Tacey A. Rosolowski, PhD***

[00:48:10]

Some views on the growth of MD Anderson, because obviously the growth of the Development Office has been in sync with the growth of the institution as a whole. What are some observations that you can make about changes that have occurred in the institution because of growth and things that have remained the same?

***Patrick Mulvey***

[00:48:32]

Hm. I think when I came here in '85 there were probably 7,000 employees, I don't know how many square feet. And now—what is it?—20,000 employees and fifteen million square feet? Significant growth, significant growth. I don't—I'm not sure if I know how to answer your question, though, about—

***Tacey A. Rosolowski, PhD***

[00:48:57]

Well, I'm just wondering—

***Patrick Mulvey***

[00:48:59]

I mean, it's just the depth and the breadth of the institution has been—has exponentially grown to the world's largest cancer center. I don't know what else to say.

[00:49:10]

***Tacey A. Rosolowski, PhD***

Do you—mm-hmm. Well, there are some people who have commented on kind of a change in atmosphere, or change in culture, with growth. I mean, you—there are always pros and cons, and I'm just curious what your observations have been as you've seen that expansion.

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***Patrick Mulvey***

[00:49:26]

You know, it—I go back to what I said earlier, is I think that—I don't—I'm not aware of anyone who doesn't understand exactly what the mission of this institution is, no matter if you're 20,000 or 7,000. And, sure, when you get to be a bigger institution you may not know quite as many people intimately as you did when you were 7,000, but I would tell you that the way I view things is, we've got 13,000 new friends, you know, here, that are helping. You know, I would just remember going through my son's eagle for Boy Scout and things like that. And, you know, when you take the troops out, and you're building this and that and the other, you want every troop member helping, because many hands makes lighter work. And that's the way I view this here. So, I see it. I see that as a great testament to this institution—its growth. And I think that the institution has managed it—the growth well, and is prospering because of it. So I see it—a real—just real positive.

***Tacey A. Rosolowski, PhD***

[00:50:29]

Mm-hmm. And part of that growth has been—in a certain way, has been overseas as well, because of sister institutions and these international partnerships. To what degree is Development involved in some of those partnership relationships?

***Patrick Mulvey***

[00:50:46]

It's minor—very minor.

***Tacey A. Rosolowski, PhD***

[00:50:47]

It's minor? Okay.

***Patrick Mulvey***

[00:50:48]

Mm-hmm. Now, there's maybe some fundraising opportunities that come out of those, but in the development or the establishment of those, and the running of those, Development is not involved in it.

***Tacey A. Rosolowski, PhD***

[00:50:58]

Okay, okay. What is it that keeps you getting up every morning, and—

***Patrick Mulvey***

[00:51:05]

Just what I said before, you know?

***Tacey A. Rosolowski, PhD***

[00:51:06]

—coming in the Holcombe Fan—Fannin/Holcombe Building? [laughs]

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***Patrick Mulvey***

[00:51:08]

This is a—I mean, it's a real privilege to work here. You know, it's a—if you can even say that you helped make life better for a patient or their family in your day's work, I think that makes you want to wake up and come back tomorrow and work even harder.

***Tacey A. Rosolowski, PhD***

[00:51:23]

What has MD Anderson done for you in these years?

***Patrick Mulvey***

[00:51:26]

It makes your life whole.

***Tacey A. Rosolowski, PhD***

[00:51:28]

Hm. What do you mean by that?

***Patrick Mulvey***

[00:51:30]

Well, you know, you're—you are doing mankind a wonderful service, you know? If you can make life better for one individual in your lifetime, you've done well.

***Tacey A. Rosolowski, PhD***

[00:51:50]

It's a lovely thing.

***Patrick Mulvey***

[00:51:51]

Yeah, yeah. And I think that's what we all do here at Anderson.

***Tacey A. Rosolowski, PhD***

[00:51:55]

Mm-hmm. Is there anything else that you'd like to—insight that you'd like to give me into the work you do here?

***Patrick Mulvey***

[00:52:02]

You—I think you've covered it well.

***Tacey A. Rosolowski, PhD***

[00:52:03]

Okay.

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***Patrick Mulvey***

[00:52:04]

You've covered it well.

***Tacey A. Rosolowski, PhD***

[00:52:06]

Well, thank you.

***Patrick Mulvey***

[00:52:06]

Been a pleasure to visit with you.

***Tacey A. Rosolowski, PhD***

[00:52:08]

Well, I thank you for your time. I—

***Patrick Mulvey***

[00:52:09]

My pleasure.

***Tacey A. Rosolowski, PhD***

[00:52:10]

I've learned a lot, 'cause I—

***Patrick Mulvey***

[00:52:11]

Yeah, yeah.

***Tacey A. Rosolowski, PhD***

[00:52:13]

This isn't an area that I know very much about.

***Patrick Mulvey***

[00:52:14]

Yeah.

***Tacey A. Rosolowski, PhD***

[00:52:14]

So, I appreciate your—I appreciate your patience and insights.

***Patrick Mulvey***

[00:52:18]

My pleasure, my pleasure.

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***Tacey A. Rosolowski, PhD***  
[00:52:20]  
So—

***Patrick Mulvey***  
[00:52:20]  
And good luck on your recital and dance this weekend.

***Tacey A. Rosolowski, PhD***  
[00:52:24]  
[laughs] Well, thank you.

***Patrick Mulvey***  
[00:52:25]  
Yeah.

***Tacey A. Rosolowski, PhD***  
[00:52:26]  
And if there's nothing else you'd like to add?

***Patrick Mulvey***  
[00:52:28]  
That's it.

***Tacey A. Rosolowski, PhD***  
[00:52:30]  
All right.

***Patrick Mulvey***  
[00:52:30]  
Thank you. And thanks for doing this. This is an important exercise for the institution.

***Tacey A. Rosolowski, PhD***  
[00:52:34]  
Yeah, it's an interesting collection of perspectives—

***Patrick Mulvey***  
[00:52:37]  
I'm sure it is.

***Tacey A. Rosolowski, PhD***  
[00:52:38]  
—and all sorts of corners, of the people who make this the institution it is.



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***Patrick Mulvey***  
[00:52:42]

Yes, ma'am. Yes, ma'am. Thanks.

***Tacey A. Rosolowski, PhD***  
[00:52:44]  
All right, well, thank you.

***Patrick Mulvey***  
[00:52:45]  
Good to meet you.

***Tacey A. Rosolowski, PhD***  
[00:52:45]  
Thank you, very much, Mr. Mulvey.

***Patrick Mulvey***  
[00:52:46]  
All the best, okay?

***Tacey A. Rosolowski, PhD***  
[00:52:46]  
All right. Thank you. And I'm turning off the recorder—

***Patrick Mulvey***  
[00:52:48]  
Okay.

***Tacey A. Rosolowski, PhD***  
[00:52:49]  
—at 2:53.

***Patrick Mulvey***  
[00:52:51]  
Very good.