

MRA ANNUAL REPORT 2017 - 2018

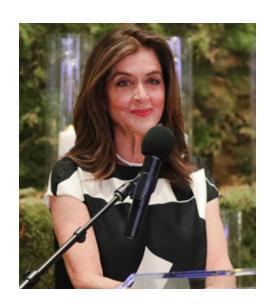


MISSION

The mission of the Melanoma Research Alliance (MRA) is to end suffering and death due to melanoma by collaborating with all stakeholders to accelerate powerful research, advance cures for all patients, and prevent more melanomas.

Founded in 2007 by melanoma survivor Debra Black and her husband, Leon, under the auspices of the Milken Institute, MRA has ushered in a dynamic new era of scientific progress. MRA has become the largest non-profit funder of melanoma research, funding \$101 million in cuttingedge studies and leveraging millions more from other sources during the last decade. Thanks to the generous support of our founders, 100% of all donations to MRA go directly to research.

A LETTER FROM THE CHAIR AND PRESIDENT





In 2007, when the Melanoma Research Alliance was established, the prognosis for metastatic melanoma was bleak. The two FDA-approved medications that did exist were not very effective and research on melanoma had stalled. The last drug to be approved by the FDA was in 1998 and for those facing a late-stage melanoma diagnosis there was little hope.

More than ten years later, the field could not be more different. With the support of MRA, a new paradigm of promising research has advanced and drug discovery has transformed not only the way we treat melanoma but all of oncology. Patients with a diagnosis of late-stage melanoma now have 12 more FDA approved treatments – new options that not only offer improved outcomes, but renewed hope. The energy, excitement and ideas that have transformed melanoma continue to grow – and today more than 500 clinical trials are focused on finding the next promising treatments.

MRA has directly invested more than \$101 million in cutting-edge melanoma research world-wide and has leveraged an additional \$101 million from other sources. All MRA funded research is vetted by our grant review committee of world-renowned scientists and researchers.

The world has changed for many melanoma patients – but still it is not enough.

It is estimated that 91,000 Americans will be diagnosed with melanoma this year. Even worse, more than 9,000 people are predicted to die from this disease. Every day we hear from patients that are not responding to even the most innovative therapies. These sobering statistics and stories motivate us to continue our mission of fast forwarding the research and ending death and suffering due to melanoma.

MRA is committed to funding the most promising research globally and to partner with all stake holders.

MRA is proud to showcase many key achievements from the past year. MRA remains deeply grateful to the many donors, organizations, government officials, corporations, researchers and patients who have joined us in our shared mission to eradicate melanoma. Our work would not be possible without you.

Many Thanks.

Debra Black

Chair and Co-Founder

Deba Black

Michael Kaplan President and CEO







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CONNECTING THE DOTS

"The Melanoma Research Alliance has a unique vision and approach in bringing together all key stakeholders to advance treatment options and prevention strategies for melanoma. Through their engagement with patients and families, investigators, industry partners, and regulatory agencies, they empower us to work together as a team to optimally advance the field."

Dr. Jennifer Wargo,
 MD Anderson Cancer Center

Breaking Ground and Building Partnerships

Since its founding in 2007, the Melanoma Research Alliance (MRA) has played a pivotal role in the global response to melanoma. MRA has helped transform the landscape for melanoma research from minimal investment and activity to one of momentous excitement and breakthroughs. The Alliance's roadmap for success is based on a clear mission and a deliberate approach: to work with all stakeholders to better prevent, detect, treat, and eventually cure melanoma.

MRA is clear of its role; making science the crown jewel of all they do, but also knowing investment in science alone will not get the needed results. The true power of their research is made evident when the dots get connected. MRA's investment in research is unparalleled, yet equally important is MRA's role as a champion and convener of the field at-large. Industry, nonprofits, researchers, government, patients, and families are all critical in the fight against melanoma. That's why MRA is so focused on connecting the dots.

Its web address with "cure melanoma" and its inclusion of "alliance" in its name are not coincidences but, rather, intentional choices to stay focused on the task at hand and ensure tomorrow is even more promising than today.



Dr. Lew Cantley



Dr. Caroline Robert, Dr. Richard Pazdur, and Dr. Marc Theoret

Each and every year since its founding, MRA has leveraged its immense convening power through their Scientific Retreat (www.curemelanoma. org/research/scientific-retreat/2018/). A retreat where stakeholders can come together to learn from one another's efforts and, ultimately, propel the field forward—surpassing what any single player could have done alone. And as momentum grows, so too does the impact.

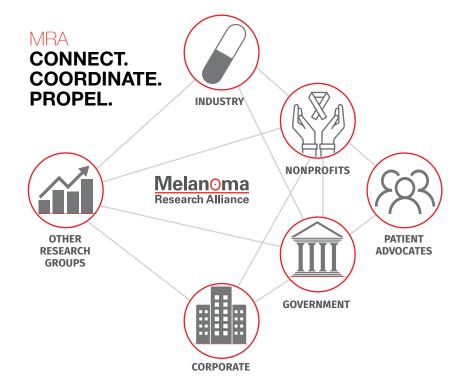
The interdependence is undeniable. The success of clinical trials depend upon researchers and patients alike. Expanding available treatments requires not only discovery, bench research and trials; but also regulatory approval. To increase awareness about melanoma means advocacy, and to do so effectively means galvanizing voices across all sectors, in every corner of the globe.

MRA's investment in the science, combined with their understanding and support of the critical inter-plays of research with patient engagement, regulatory systems, industry and more has provided dramatic results. In fact, since MRA's founding in 2007, there have been 12 new melanoma treatments approved by the FDA, and many more are being studied. And most importantly, patients are living longer thanks to the advancements in research.

Connecting the Dots Between Patients and Research

The connection between patients and research seems obvious. Patients win when research delivers new and better treatment options. However, the relationship does not flow in just one direction. It is a reciprocal relationship, as research would not be possible without patient volunteers. Put simply, patients need research, but research also needs patients.

MRA is committed to helping patients and their families understand how research affects them and their treatment decisions, and how patients help to advance research. In 2017, MRA made considerable progress in connecting these dots with the launch of two new tools, the Melanoma > Exchange and the Clinical Trial Navigator. These tools bring MRA's work full circle from helping to develop new treatment approaches to helping patients understand and find the best option for them, while also helping patients advance research.







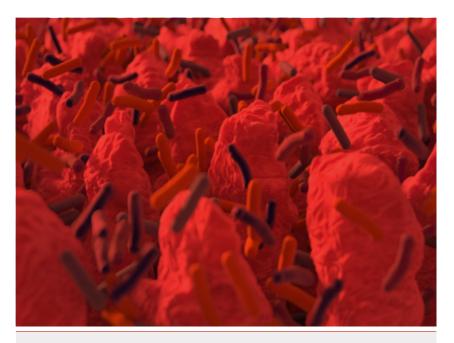
Finding the Connections Across Varied Avenues of Research

MRA's investment in research and convening power has strengthened collaborations among scientists and physicians from across multiple fields of medical study. As MRA connects the dots and propels the field forward, new opportunities and advancements arise. For example, targeted therapy that capitalizes on specific mutations in patients' melanoma is a leading example of personalized medicine. And immunotherapy has not only dramatically changed the melanoma treatment landscape, but is now being used to treat nine other cancers and tested in many more.

Yet for some patients, immunotherapy isn't the answer, and for others, it may be simply one part of a more complex solution. Further study is needed, looking at everything from bio-markers for treatment selection, to ensuring tumors are recognized by the immune system; and from new treatment combinations to understanding ideal sequencing and timing of treatment for each and every patient.

MRA's scientific investments are both broad and diverse, knowing that the answers may not reside squarely in one field of study. MRA has funded research on 96 different investigational agents to date, and on approaches as varied as artificial intelligence for better detection to radiation for turning a tumor hot. Past research opens new windows of exploration, with each discovery providing new avenues of hope.

One example of this can be seen in research focused on the microbiome. Research supported by MRA and conducted by Dr. Tom Gajewski from 2013 to 2016 further demonstrated that treatment and cancer type alone do not define patient outcomes. Instead, a more complex picture is at play, once again, denoting a need to connect all the dots. With research supported by MRA at the University of Chicago, Dr. Gajewski published seminal articles that helped to explore and define the role of the microbiome in melanoma treatment.



mi·cro·bi·ome

- a community of <u>microorganisms</u> (such as bacteria, fungi, and viruses) that inhabit a particular environment and especially the collection of microorganisms living in or on the human body
- the collective <u>genomes</u> of microorganisms inhabiting a particular environment and especially the human body
- the full genetic complement of bacteria and other organisms at home on your skin, gums, and teeth, in your genital tract, and especially in your gut.

(www.merriam-webster.com/dictionary/microbiome)



Dr. Jennifer Wargo

While Gajewski launched studies demonstrating a role for the gut microbiome in response to immune checkpoint blockade in melanoma mouse models, Dr. Jennifer Wargo of M.D. Anderson Cancer Center studied the gut microbiome in patients and compared those that were responding well to therapy versus the microbiome of people who weren't responding.

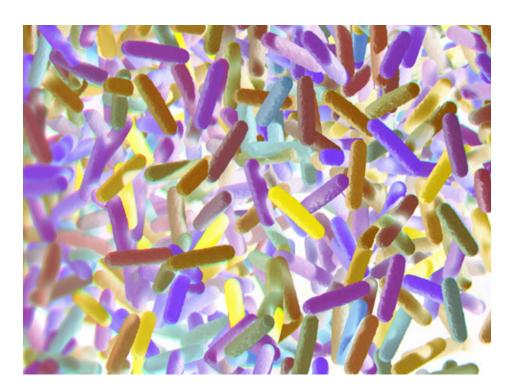
Wargo and team were able to demonstrate that a "favorable" gut microbiome was associated with improved systemic and anti-tumor immune responses, suggesting that the two are linked. "This area of focus is novel and game-changing for cancer treatment, as immune responses are critical to virtually every form of cancer therapy," says Wargo.

Today, this early area of exploration continues to greatly expand as does MRA's investment, with two new team awards issued in 2018 looking at the impact of microbiome on treatment, and the impact of diet and mental health on the microbiome.

The implications of this research are numerous and far reaching. For example:

- Should doctors be profiling the gut microbiome of patients with cancer going into treatment?
- Should doctors be closely monitoring factors that impact the microbiome in patients (e.g., antibiotic use, diet, probiotic use)?
- Should there be close monitoring of the gut microbiome in pre-clinical models for cancer therapy?
- Can the gut microbiome be modulated to enhance therapeutic responses and to abrogate toxicity and, if so, how should this be done?
- Which diets or probiotics may be helpful and which may be harmful?

Answering these questions, and so many others, necessitates connecting the dots.



BY THE NUMBERS

Seeing the Big Picture

It's amazing to think of the breakthroughs of today and the implications that melanoma research has on the broader cancer and health fields when just 11 years ago, little investment and research was happening at all. To date, MRA has invested and funded the following:

\$101 MILLION IN GRANTS

372
INVESTIGATORS

266
RESEARCH

AWARDS ISSUED

\$101 MILLION IN LEVERAGED

FUNDS

MORE THAN

5700
DONORS

1500

PEOPLE HAVE USED OUR CLINICAL TRIAL NAVIGATOR TO FIND PERSONALIZED CLINICAL TRIAL RESULTS IN THEIR COMMUNITY.

126
INSTITUTIONS IN 15
COUNTRIES FUNDED

96

DIFFERENT AGENTS FOR TREATMENT OF MELANOMA INVESTIGATED

CORPORATE PARTNERS WHO'VE
RAISED \$40.3 MILLION TO SUPPORT
MELANOMA RESEARCH

100%

OF ALL DONATIONS GO DIRECTLY TO RESEARCH – NO ADMIN, DEVELOPMENT, OR OTHER FEES

Expanding the Network

The MRA approach encourages others to join the fight, too—not as competitors but, as allies. Take Tracy Callahan. Tracy was a registered research nurse when she was diagnosed with melanoma. In total, she has been diagnosed four times, though all thankfully caught early. Inspired by the name "Polka Dot Mama," given to her by her two boys, Tracy began to network with survivors and skin care organizations around the country. A few months in, Tracy got the idea to create her own nonprofit called the Polka Dot Mama Melanoma Foundation (www.polkadotmama.org). Only she didn't know where to start.

What she knew was that she had a voice and she wanted to use it. The message? Melanoma prevention, awareness, education, and research. Tracy spoke with her contacts at Duke University who encouraged her to pick up the phone and call MRA. Tracy spoke with MRA's President & CEO and its Chief Science Officer. "I told them my idea for a nonprofit and from that moment they embraced me with open arms," says Tracy. "They asked how they could help."

At a recent Scientific Retreat, Tracy was learning about advances in treatment science, networking with researchers and other advocates, and dreaming new ideas for her nonprofit. A conversation that began with an "If only..." ended with a donated school bus to Tracy's nonprofit that she has since converted into the Shade Shuttle, allowing her to provide free skin cancer checks in rural communities throughout North Carolina.

In addition to the critical work she's doing to educate her community about sun safety and the importance of skin checks, Tracy has also helped advance the science by donating to MRA's research efforts. Since 2016, Tracy and the Polka Dot Mama Foundation have donated \$40,000 to support MRA's research program, a donation that will go directly to research funded through MRA's expert peer-review process, with no admin or development expenses reducing the impact of her donation.

"The more I do research, the more I can tell you that there is no other organization I know of that you can pick up the phone and talk to the Chief Science Officer about your unique case. It may seem small, but for a patient, it's huge," says Tracy.

Tracy's leadership is not only felt in her community, but also on the national stage. She recently helped MRA launch the Melanoma > Exchange online community as one of its four inaugural Community Leaders.



Tracy Callahan

"If I can make a difference in someone's life by sharing my journey, then these scars will be given purpose,"

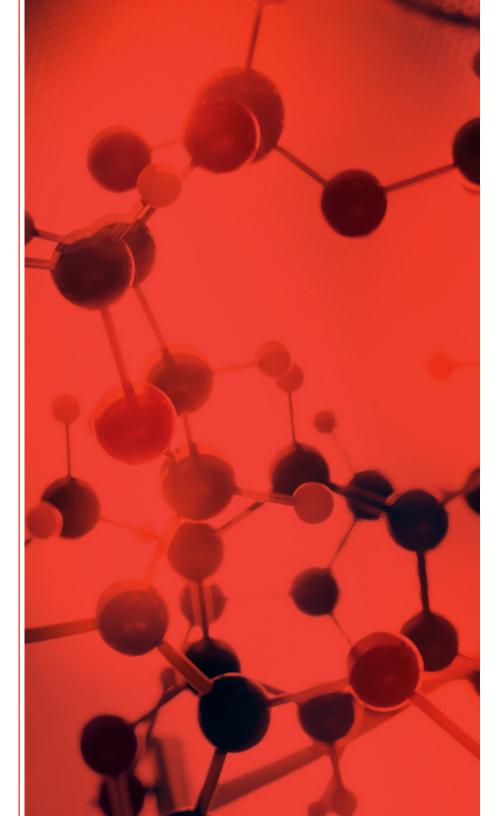
 Tracy Callahan, Founder of Polka Dot Mama Melanoma Foundation

Kinetic Energy: Driving the Field...

MRA brings more than hope. It brings a promise to facilitate connections within and across disciplines and industries, to accelerate new research and methodologies, and to amplify messages of prevention and awareness.

But fulfilling this promise doesn't just happen. It's more than putting people in touch or putting people in a room. It must be proactively made to happen – the dots have to be connected and aligned. In that way, MRA has been a kinetic force in this field. It means connecting a patient to not just a trial but the right trial so that one day they can hear those sweet words: no evidence of disease. It means connecting a researcher not just to any funder but the right biotech partner to breathe life into their vision and then to bring it to scale. It means with each dream achieved, dreaming of another because we don't yet have a cure—but we do have new treatments, new partnerships, new knowledge, and more momentum than ever to find one. And with this alliance that's growing bigger and bigger every day, we're stronger than ever.

This is the essence of the MRA. This is its vision and mission in action.





Since its founding in 2007, MRA has awarded more than \$101 million for 266 research programs with the potential to make significant, near-term clinical impact in melanoma prevention, diagnosis, staging, and treatment. The following are new grants issued in 2018 in response to three different funding opportunities:

- · Special funding initiative focused on acral melanoma,
- MRA joint grant making partnership with the American Cancer Society (ACS) to address adverse events related to checkpoint immunotherapy, and
- · MRA's annual request for proposals.

A complete list of all MRA grantees, along with grant abstracts, can be found at www.curemelanoma.org/research/mra-research-awards.

MRA Acral Melanoma Special Opportunity Awards

Acral melanoma is a rare and difficult-to-treat form of melanoma that arises on the palm, sole or beneath the nail. Acral melanoma accounts for approximately 2-3% of all melanomas and its incidence is relatively constant across individuals of all races and skin colors. Compared to cutaneous melanoma, acral melanoma is more likely to be diagnosed at a later stage and has a survival rate that is 10-20% lower, overall. In fall of 2017, MRA released a Special Opportunity Request for Proposals inviting applications for both Team Science (up to \$900,000 over 3-years) and Individual Investigator Awards (up to \$225,000 over 3-years) that could lead to therapeutic targeting of acral melanoma with priority given to proposals that of focus on NF1 loss, TERT promoter alterations, CCND1, and/or CRKL amplification. As a result, the following awards were issued in 2018:

Telomere crisis in acral melanoma: Diagnostic and prognostic potentials: Takes a look at acral melanomas on the chromosome level to determine whether a process known as telomere crisis, which causes extensive damage to a cell's genome, contributes to acral melanoma development and progression.

The Black Family-MRA Team Science Award

- Titia de Lange, Ph.D., The Rockefeller University
- Marcin Imielinski, M.D., Ph.D., Joan Sanford I. Weill Medical College of Cornell
- John Maciejowski, Ph.D., Memorial Sloan Kettering Cancer Center: Young Investigator

Defining and targeting driver events in acral melanoma: Seeks to address some of the major barriers to new therapies for acral melanoma by developing a novel mouse model, as well as studying the genetic processes linked to tumor development.

U.S. Trust-MRA Team Science Award

Lee Moffitt Cancer Center & Research Institute

- · Keiran Smalley, Ph.D.
- · Yian Chen, Ph.D.
- · John Koomen, Ph.D.
- · Jane Messina, M.D.
- · Jamie Teer, Ph.D.
- Florian Karreth, Ph.D.

Patient-focused therapy for acral melanoma: Aims to take a precision medicine approach to better suppress acral melanoma growth and spread by matching drugs to the specific genetic and/or genomic changes present in a patient's tumor.

The Sokoloff Family-MRA Team Science Award, with collaborative funding from Memorial Sloan Kettering Cancer Center

Yale University

- · Ruth Halaban, Ph.D.
- · Alfred Bothwell, Ph.D.
- · Jian Cao, Ph.D.
- · Qin Yan, Ph.D.

Memorial Sloan Kettering Cancer Center

- · Charlotte Ariyan, M.D., Ph.D.
- · Neal Rosen, M.D., Ph.D.
- · Richard White, M.D., Ph.D.
- · Jedd Wolchok, M.D., Ph.D.
- · Gauri Panse, M.D., Young Investigator

Regulating telomerase and telomere homeostasis in acral melanoma development: Plans to create new models to better study the telomerase gene (TERT), a main cause of mutations and other genomic alterations in cancer cells, including acral melanoma, to find approaches to treat cells with TERT abnormalities.

MRA Team Science Award, collaboratively funded by the research institutions

The Pennsylvania State University College of Medicine

- · Gavin P. Robertson, Ph.D.
- · Raghavendra Gowda, Ph.D., Young Investigator

Washington State University

- · Jiyue Zhu, Ph.D.
- · De Cheng, Ph.D.
- Shobhan Gaddameedhi, Ph.D., Young Investigator



Molecular and immune profiling of acral melanoma from various ethnicities: Will combine clinical, histological, immune, and molecular analyses of acral melanoma patients from different ethnicities to better classify risks among each group.

MRA Young Investigator Award, collaboratively funded by University of Texas M.D. Anderson Cancer Center

· Phyu Aung, M.D., Ph.D.,

A novel approach for NF1 mutant melanoma subclassification:

Utilizes a unique mathematical model to determine whether (and how) melanomas with a mutation in a gene called NF1 should be further classified, ultimately providing information about this subset of melanoma patients' response and resistance to targeted therapies.

MRA Young Investigator Award

 Edward Cooper Stites, M.D., Ph.D., The Salk Institute for Biological Studies

MRA/ACS Jointly Funded Awards Addressing Adverse Events Related to Checkpoint Immunotherapy

Immunotherapies have played a critical role in advancing melanoma treatment and melanoma has also served as the proving ground for immunotherapy. Checkpoint immunotherapies, while first approved in melanoma, are now being used to treat many more cancers. While these treatments are well-tolerated by most, some experience life-altering and occasionally life threatening adverse events. In recognition of the immense potential of checkpoint immunotherapies in combatting multiple cancers, and the reality that immune-related adverse events pose a challenge that must be addressed, MRA and ACS issued a joint Request for Proposals in summer of 2017 inviting applications for both Team Science (up to \$1 million over 3 years) and Pilot Awards (up to \$200,000 over 2 years) focused on the prevention, reduction, and/or management of life-altering and/or outcomelimiting side-effects of checkpoint inhibitor therapy. As a result, the following awards were issued in 2018:

Genetic and phenotypic biomarkers to predict immune-related adverse events: Will enroll and analyze patients with melanoma and other cancers undergoing immunotherapy to determine if latent autoimmunity increases the risk of immune-related adverse events.

MRA-ACS Team Science Award

University of Texas Southwestern Medical Center

- David Gerber, M.D.
- Edward Wakeland, Ph.D.
- · Quan-Zhen Li, M.D., Ph.D.
- · Yang Xie, Ph.D., MPH
- · Jade Homsi, M.D.

Discovery of therapeutic approaches for ipilimumab-associated colitis:

Will conduct a clinical trial to study two separate treatment options, and determine the best treatment for preserving the anti-tumor immune response, in melanoma patients who experience ipilimumabassociated colitis.

MRA-ACS Team Science Award

Dana-Farber Cancer Institute

- · Kai Wucherpfennig, M.D., Ph.D.
- · Guo-Cheng, Ph.D.

Understanding cutaneous immunotherapy-related adverse events in melanoma: Aims to better understand the skin reactions that sometimes occur during immunotherapy, and potentially reveal a way for clinicians to intervene earlier so patients do not discontinue or delay therapy.

MRA-ACS Pilot Award

· Suephy Chen, M.D., Emory University



Dr. Niroshana Anandasabapathy

Clinical features and biomarkers of immunotherapy neurologic toxicity: Seeks to better characterize, predict and determine the causes of neurological toxicities that occur in response to checkpoint immunotherapy.

MRA-ACS Pilot Award

• Bianca Santomasso, M.D., Ph.D., Memorial Sloan Kettering Cancer Institute

Development of OncoLink: A web-based irAE monitoring platform:

Will determine if an evidence-based, online monitoring program can improve the care of cancer patients by offering ways to better manage the side effects of immunotherapy.

MRA-ACS Pilot Award

· Betina Yanez, Ph.D., Northwestern University



MRA Chief Science Officer Dr. Louise Perkins

MRA General RFP Awards

MRA issues a general Request for Proposals (RFP) once a year during late summer/fall. The 2017 RFP invited applications for Team Science (up to \$900,000 over 3 years) and Young Investigator Awards (up to \$225,000 over 3 years). Special emphasis areas included: treatment failure or difficult-to-treat disease; developing markers of response, resistance or risk of recurrence; informing logical and optimal combination and/or therapeutic sequences; and identification of new targets, treatments or biomarkers. As a result, the following awards were issued in 2018:

Team Science Awards

Targeting BAP1-dependent alterations in metastatic uveal melanoma:

Takes an integrated team approach to understand how mutations in a gene, known as BAP1, drive uveal melanoma cells to metastasize.

The Helman Family-MRA Team Science Award

- · Andrew Aplin, Ph.D., Thomas Jefferson University
- · Emily Bernstein, Ph.D., Icahn School of Medicine at Mount Sinai

- J. William Harbour, M.D., Sylvester Comprehensive Cancer Center/ University of Miami Health Systems
- Marlana Orloff, M.D., Thomas Jefferson University: Young Investigator

Diet, mental health, and the microbiome in response to

immunotherapy: Aims to build upon existing research to further explore how the collection of microorganisms living within the digestive tract, known as the gut microbiome, could be modified to improve outcomes for patients with metastatic melanoma.

MRA Team Science Award, collaboratively funded by University of Texas M.D. Anderson Cancer Center

University of Texas M.D. Anderson Cancer Center

- · Lorenzo Cohen, Ph.D.
- · Jennifer Wargo, M.D.
- Jennifer Leigh McQuade, M.D., Young Investigator

Autophagy in the tumor microenvironment as a target for drug

development: Investigates whether blocking the natural "self-cleaning" process that occurs within tumors can enhance the killing to tumors by immune cells.

The Anna-Maria and Stephen Kellen Foundation-MRA Team Science Award

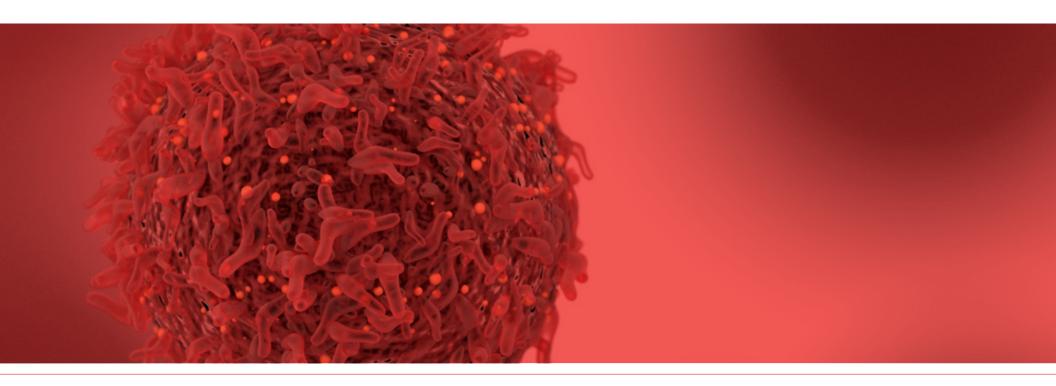
UCLA

- · Hilary A. Coller, Ph.D.
- · Lili Yang, Ph.D.
- · Claudio Scafoglio, M.D., Ph.D.,: Young Investigator

Cedars-Sinai Medical Center

· Beatrice Knudsen, M.D., Ph.D.

Commensal microbiota and anti-PD-1 efficacy: Aims to identify the exact species of "good" bacteria that help improve a patient's response to immunotherapy treatment, with the hope of developing a novel therapy to improve immunotherapy efficacy in melanoma patients.



MRA Team Science Award, collaboratively funded by The University of Chicago.

The University of Chicago

- · Thomas Gajewski, M.D., Ph.D.,
- · Jason Luke, M.D.,
- · Cathryn Nagler, Ph.D.,
- · Riyue Bao, Ph.D., Young Investigator

Identifying genetic dependencies in rare forms of melanoma: Will use state-of-the-art gene editing tools to identify and characterize new drug targets in rare forms of melanoma.

MRA Team Science Award

- Nicholas Hayward, Ph.D., Queensland Institute of Medical Research
- · Francisca Vasquez, Ph.D., Broad Institute

 Ken Dutton-Regester, Ph.D., Queensland Institute of Medical Research: Young Investigator

Prognostic and functional roles of altered circular RNAs in melanoma:

Aims to take a closer look at loop-shaped RNA molecules, called circular RNAs or circRNA, to study how they are controlled within the body, as well as investigate their potential as drug targets for melanoma and predictors of melanoma progression.

Leveraged Finance Fights Melanoma-MRA Team Science Award

- Eva Hernando, Ph.D., New York University School of Medicine
- Ernesto Guccione, Ph.D., Icahn School of Medicine at Mount Sinai

Next-generation neoantigen-targeting peptide vaccines for melanoma patients: Will further optimize design and delivery of a personalized anti-cancer vaccine called NeoVax to improve melanoma control and cure.

BJ's Wholesale Club-MRA Team Science Award

Dana-Farber Cancer Institute

- Patrick Ott, M.D.
- · Catherine Wu, M.D.
- · Osama Rahma, M.D., Young Investigator

Massachusetts Institute of Technology

· Bradley Pentelute, Ph.D.

Targeting eIF4A in melanoma persistent cells to prevent resistance: Plans to further study a specific protein, called eIF4A, which drives melanoma resistance to combination targeted therapies, with the goal of designing a clinical trial to delay treatment resistance in patients with BRAF mutant melanoma.

Rising Tide Foundation for Clinical Cancer Research-MRA European-led Team Award

- · Caroline Robert, M.D., Ph.D., Gustave Roussy Institute
- · Stephan Vagner, Ph.D., Institut Curie
- · Felice Alessio Bava, Ph.D., Institut Cure: Young Investigator



Dr. Stephanie Dougan in her lab at Dana Farber Cancer Institute

Directing adaptive immune responses to non-polymorphic MHCs in melanoma: Aims to address challenges around personalized approaches to immunotherapy by identifying and testing a new class of immunotherapy targets, which are called HLA-E in humans and Oa-1 in mice.

MRA Team Science Award, collaboratively funded by Massachusetts Institute of Technology

MIT Institute for Integrative Cancer Research

- · Forest White, Ph.D.
- Dane Wittrup, Ph.D.
- · Michael Birnbaum, Ph.D., Young Investigator
- · Stefani Spranger, Ph.D., Young Investigator

DAMPening immunotherapy adverse events in melanoma: Will test whether the immune system's response to tissue damage is a major contributor to immune-related adverse events, and then develop a clinical trial to test potential therapies for mitigating these side effects in patients with melanoma.

MRA Team Science Award, collaboratively funded by the research institutions

University of Maryland, Baltimore

- · Pan Zheng, M.D., Ph.D.
- · Yang Liu, Ph.D.

UCLA

· Siwen Hu-Lieskovan, M.D., Ph.D., Young Investigator

Young Investigator Awards

Building a predictive framework for vaccine design against melanoma:

Will combine mathematical models and lab experiments to build a prediction tool that yields the most rationale drug combinations for vaccines designed for melanoma.

• Elliott and Ruth Sigal-MRA Young Investigator Award Nicolas Chevrier, Ph.D., The University of Chicago



Dr. Richard Pazdur

Manipulating cellular metabolism to promote cancer immunity in melanoma: Aims to use innovative techniques to identify promising drug targets within the tumor microenvironment, which has potential to expand immunotherapy treatment options for patients.

The Robbins Family-MRA Young Investigator Award

· Ku-Lung Hsu, Ph.D., The University of Virginia

Investigating the mechanistic basis for tumor immunogenicity in melanoma: Will build novel animal models that allow researchers to study the anti-tumor immune response and to understand why melanomas often respond to immunotherapy whereas many other cancer types do not.

The Sokoloff Family-MRA Young Investigator Award

· Nikhil Joshi, Ph.D., Yale University

LncRNAs as modulators of protein synthesis rewiring in melanoma:

Aims to test the potential of molecules called the long non-coding RNAs (lncRNAs) as a druggable targets to overcome therapeutic resistance.

Amanda and Jonathan Eilian-MRA Young Investigator Award

• Eleonora Leucci, Ph.D., Katholieke Universiteit Leuven

Primary anogenital melanoma: Comprehensive molecular and immune analysis: Will undertake a study to look at a rare but aggressive melanoma subtype called anorectal melanoma (AM) and identify factors that are linked to patient outcomes.

MRA Young Investigator Award, collaboratively funded by University of Texas M.D. Anderson Cancer Center

Priyadharsini Nagarajan, M.D., Ph.D., University of Texas M.D.
 Anderson Cancer Center

Isoform-specific targeting of the PI3Ks to overcome cancer

immunoresistance: Seeks to better understand the role of PI3Ks, a group of enzymes known to play a key role in helping tumor cells escape the immune system's attack, and then will target them therapeutically to enhance the effectiveness of immunotherapy.

MRA Young Investigator Award, collaboratively funded by University of Texas M.D. Anderson Cancer Center

• Weiyi Peng, Ph.D., University of Houston

Dependence of melanoma metastasis on AMPK-mediated metabolic switch: Aims to identify novel pathways that allow melanoma cells to survive under metabolic stress in the blood and in new tumor sites, with the hope of developing a therapy that specifically targets tumors that have spread to other places in the body.

Ellen and Gary Davis Foundation-MRA Young Investigator Award, collaboratively funded by Joan & Sanford I. Weill Medical College of Cornell University

• Elena Piskounova, Ph.D., Joan & Sanford I. Weill Medical College of Cornell University

The genomic landscape of individual melanocytes from human skin: Will collect and organize data on the genetic features of normal, individual melanocytes, which are the cells from which melanomas form, to better understand how melanoma arises at the molecular level.

Tara Miller Melanoma Foundation-MRA Young Investigator Award

Hunter Shain, Ph.D., University of California, San Francisco

Targeting PSGL-1 inhibitory pathways to promote anti-tumor T cell immunity: Plans to test whether blocking a molecule called PSGL-1 will restore the T cell's natural ability to kill melanoma cells.

The Denise and Michael Kellen Foundation-MRA Young Investigator Award

· Roberto Tinoco, Ph.D., University of California, Irvine

Pilot study of intervention to reduce sunburns in melanoma survivors: Will pilot test whether a wearable device that tracks sun exposure and provides alerts regarding sun exposure and protection behaviors will reduce sunburns in melanoma survivors.

The Wayne Stinchcomb Big Orange Foundation-MRA Young Investigator Award

· Rachell Vogel, Ph.D., The University of Minnesota - Twin Cities

Targeting the JNK-ITCH signaling pathway in melanoma: Aims to understand how tumor cells reprogram chemical reactions in a cell to gain growth advantage and escape death from anti-cancer drugs.

Mary Jo and Brian Rogers-MRA Young Investigator Award

· Lixin Wan, Ph.D., H. Lee Moffitt Cancer Center & Research Institute

Developing advanced non-invasive histology techniques: Combines artificial intelligence and digital imaging technology to conduct 'virtual biopsies' of potential melanomas, as an alternative to less safe laser techniques.

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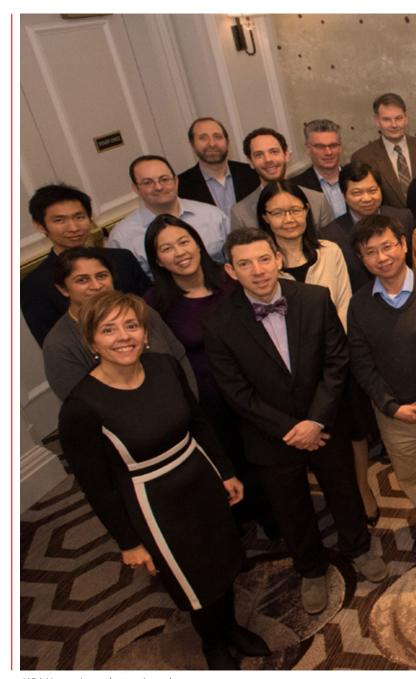
· Jesse Wilson Ph.D., Colorado State University

Targeting BRAF/NRAS wildtype melanoma with ERBB3 and MEK inhibition:

Seeks to address the unmet needs of non-BRAF mutant melanoma patients who have limited treatment options by conducting a clinical trial to evaluate a promising combination molecular therapy.

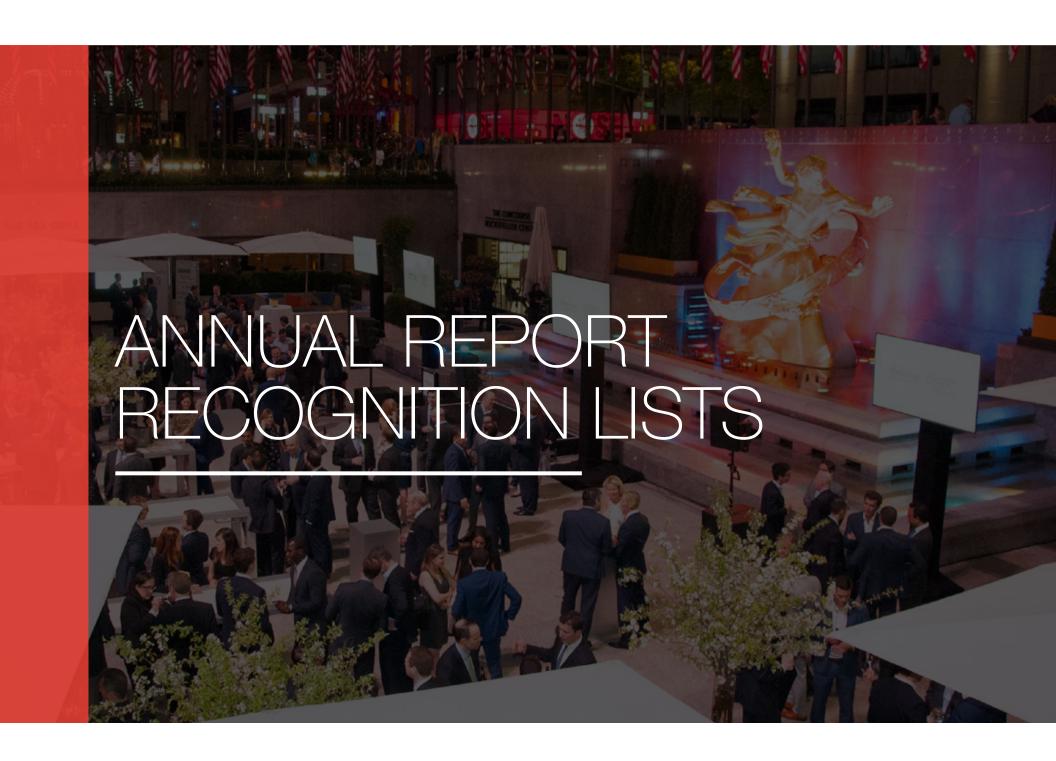
MRA Young Investigator Award, collaboratively funded by Thomas Jefferson University

· Melissa Wilson, M.D., Ph.D., Thomas Jefferson University



MRA Young Investigator Awardees





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STATEMENT OF FINANCIAL POSITION

ASSETS		
	Total 2017	Total 2016
Cash and Cash Equivalents	\$14,121,998	\$22,555,754
Investments	10,219,557	
Contributions Receivable (Net)	18,009,454	\$8,288,256
Due from Affiliate	-	\$1,260
Prepaid Expenses	75,043	\$33,604
Property and Equipment (Net)	-	\$3,579
TOTAL ASSETS	\$ 42,426,052	\$ 30,882,453
LIABILITIES	Total 2017	Total 2016
Accounts Payable	\$137,004	\$74,168
Grants Payable (Net)	\$11,848,581	\$13,204,967

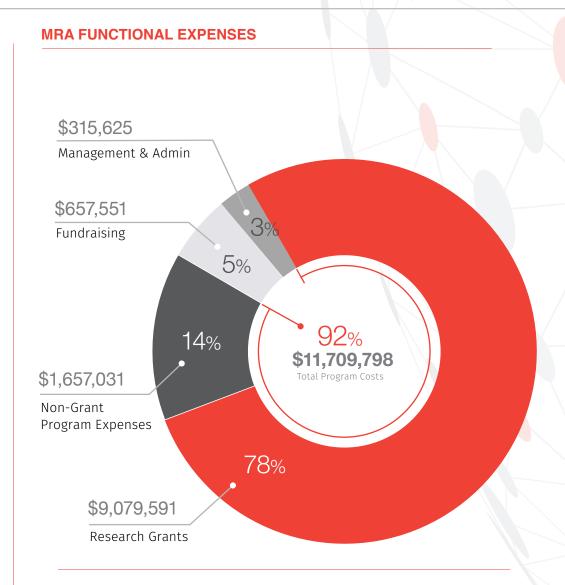
Accounts Payable	\$137,004	\$74,168
Grants Payable (Net)	\$11,848,581	\$13,204,967
Deferred Revenue	\$57,240	\$110,000
Due to Affiliate	\$16,744	_
TOTAL LIABILITIES	12,059,569	13,389,135
NET ASSETS	Total 2017	Total 2016
Unrestricted	\$12,357,029	\$9,205,062
Temporarily Restricted	18,009,454	8,288,256
TOTAL NET ASSETS	30,366,483	17,493,318
TOTAL LIABILITIES AND NET ASSETS	\$ 42,426,052	\$ 30,882,453

STATEMENT OF ACTIVITIES

REVENUE & EXPENSE STATEMENT

REVENUE	Total 2017	Total 2016
Contributions (Collectible Net)	\$2,841,125	\$6,171,125
Special Events (Net)	\$20,832,080	\$1,374,162
Sponsorship	\$455,000	\$526,300
Interest/Investment	\$291,322	\$66,405
In-Kind Contributions	\$142,336	\$101,959
Other Income	\$21,100	
TOTAL REVENUES	\$24,582,963	\$8,239,951

EXPENSES:	Total 2017	Total 2016
Research Grants	\$9,079,591	\$20,602,554
Personnel Costs	\$1,412,640	\$1,009,088
Travel & Entertainment	\$309,836	\$273,626
Other Expenses	\$306,803	\$224,324
Meetings & Conferences	\$251,405	\$208055
Professional Fees	\$210,636	\$137,202
Occupancy	\$138,887	\$155,686
TOTAL EXPENSES:	\$11,709,798	\$22,610,535
NET INCOME/(LOSS)	\$12,873,165	(\$14,370,584)



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