

TEN YEARS

OF POWERFUL RESEARCH AND RESULTS

2007 - 2017



2016-2017 ANNUAL
REPORT



CONTENTS

ABOUT MRA


Mission	4
Letter from the Chair and President	6
MRA Timeline	8

TEN YEARS OF MRA

By the Numbers	14
The Melanoma Landscape: 2007 vs. 2017	15
Reflections from the Inaugural Class of MRA Young Investigators	18
Dr. Timothy Bullock	18
Dr. Padmanee Sharma	19
Here Today Thanks to Melanoma Research	22

YEAR IN REVIEW

Collaboration in Focus	28
2017 MRA Research Awards	32
2016 Donors & Supporters	38
Financials	42
MRA Board of Directors	46
MRA Staff	47
Scientific Advisory Panel	47
Grant Review Committee	48
Medical Advisory Panel	50



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 \$88 million in cutting-edge 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.

MRA AND THE DRUMBEAT OF PROGRESS



Today, we are at an unprecedented moment in the field of melanoma. Since MRA was founded in 2007, 11 new treatments have expanded the arsenal of FDA-approved treatment options. This doubled the five-year survival rate for melanoma patients with advanced disease.

This progress is incredible, but it is only the beginning.

Melanoma research has energized the entire field of oncology and charted a new course in cancer treatment for a variety of tumor types. Immunotherapies first approved for melanoma are now approved to treat patients with seven other types of cancer and are being tested in more than 30 cancers in total.



Over the past 10 years, MRA has invested \$88 million—and leveraged an additional \$89.5 million—to support 233 different research projects across 15 different countries. Our research has looked at 73 unique therapeutic approaches, and has touched all 11 new treatments approved by the FDA since our founding. MRA is on the forefront of accelerating research and saving the lives of people touched by melanoma.

While we honor and celebrate these achievements, we know we still have more to do. Though we've made enormous progress improving the five-year survival rate, the reality is that the vast majority of patients confronted with a late-stage diagnosis still are not benefiting from new treatments. Novel treatment targets must continue to be discovered, new combinations of existing treatments tested, approaches to early detection improved, and strategies to prevent melanomas strengthened.

We know we can transform the treatment landscape; we've done it. The first 10 years of MRA has not only accelerated new treatment options offering hope to thousands diagnosed each year with late stage melanoma, but is just the start to achieving our ultimate goal. Together, in partnership with government, industry, patients, and researchers we are confident MRA will achieve its mission to end suffering and death due to melanoma. We will continue to push forward until we have an effective cure for melanoma and an end to the suffering and death it causes.

In this report, we are proud to share highlights from the last 10 years, including the research we've funded, the partnerships we've forged, and progress we've made. These advancements not only improve patient outcomes, they also move us all that much closer to our goal of curing melanoma.


Debra Black
Chair and Co-Founder


Michael Kaplan
President and CEO

Spurred into Action: Determined to Make Big Change

In 2007, when I was diagnosed with Stage II melanoma, there were few treatment options available. In fact, for those diagnosed with late-stage melanoma, only two FDA-approved treatments were available, delivering only a 16% chance of five-year survival. But after dealing with my own immediate health concerns, my husband Leon and I knew we could do more—and that we had to do more. And, so we turned to our dear friend, Mike Milken, to change the melanoma landscape.

Together, building on Mike's experience in medical research, public health, and philanthropy, MRA was founded under the auspices of the Milken Institute. The goal was clear: to end suffering and death due to melanoma.

Ten years later, the transformative force of MRA has been made evident, but there is still much more to do.


Debra Black
Chair and Co-Founder

MRA TIMELINE

Under the auspices of Milken Institute, and with advice from their dear friend Michael Milken, MRA is founded by Debra and Leon Black.



MRA holds launch meeting and publishes *The State of Melanoma Research: A Call to Action*.

[More Info](#)



2

2

KEY

● Number of FDA-approved treatments

2007

2008

MRA awards \$7.6 million in research grants.

MRA issues first RFP, receives 55 applications, and selects 17 for funding.

2

2

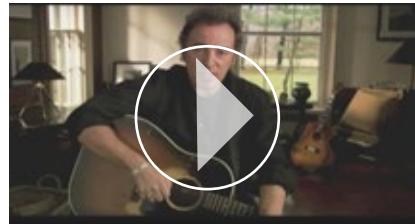
4

6

MRA awards \$9.6 million in research grants, bringing total funds awarded to \$17.2 million.

MRA issues 20 new research grants, bringing total awards issued to date to 37.

The Danny Fund PSA, featuring Bruce Springsteen, debuts during Super Bowl XLIII.



MRA hosts first Scientific Retreat. [More Info](#)

MRA awards \$5.8 million in research grants, bringing total funds awarded to \$23.1 million.

MRA issues 13 new research grants, bringing total awards issued to date to 50.

Inaugural MRA benefit dinner at Sotheby's yields \$5 million. [More Info](#)

MRA awards \$7.4 million in research grants, bringing total funds awarded to \$30.5 million.

FDA approves first new drugs for melanoma in 13 years: vemurafenib and ipilimumab—and the first checkpoint immunotherapy drug for any cancer.

MRA issues 23 new research grants, bringing total awards issued to date to 73.

MRA and Stand Up to Cancer join forces, each contributing \$3 million to fund melanoma research Dream Team. [More Info](#)



2011

MRA awards \$7.9 million in research grants, bringing total funds awarded to \$38.4 million.

Leveraged Finance Fights Melanoma holds inaugural event, raising \$811,00 for melanoma research.

[More Info](#)

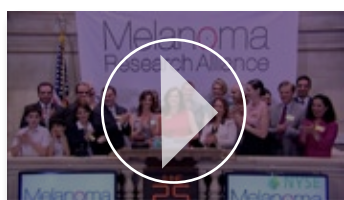


MRA issues 23 new research grants, bringing total awards issued to date to 96.

2012

8 MRA awards \$10.6 million in research grants, bringing total funds awarded to \$49.1 million.

Debra Black, cofounder and chair of the board of directors, rings closing bell at New York Stock Exchange on behalf of MRA.



MRA Issues 22 new research grants, bringing total awards issued to date to 118.

8

First data released showing 10-year survival of ipilimumab-treated patients.

[More Info](#)

FDA approves trametinib for advanced melanoma, the first MEK inhibitor approved for any cancer.

[More Info](#)

2013

10 MRA awards \$11.2 million in research grants, bringing total funds awarded to \$60.3 million.

FDA approves trametinib and dabrafenib—the first combination therapy approved for melanoma.

[More Info](#)

MRA Ranked #1 Grant-Giving Disease Foundation by Genetic Engineering and Biotechnology News.



Surgeon General Dr. Boris Lushniak issues landmark Call to Action to Prevent Skin Cancer following months of meetings with MRA.

[More Info](#)



10

MRA issues 27 research awards, bringing total awards issued to date to 145.

Thanks to advocacy by MRA and others, Congress passes and President Obama signs the Sunscreen Innovation Act into law.

[More Info](#)

2014

13 MRA awards \$8.2 million in research grants, bringing total funds awarded to \$68.5 million.

FDA approves nivolumab and ipilimumab—the first checkpoint immunotherapy combination approved for melanoma.

[More Info](#)

MRA issues 35 research awards bringing total awards issued to date to 180.

13

FDA approves ipilimumab for the additional indication of adjuvant treatment.

[More Info](#)

FDA approves a novel treatment, T-VEC, an oncolytic viral therapy.

[More Info](#)

2015

13 MRA awards \$10.6 million in research grants, bringing total funds awarded to \$79.1 million.

In 2016, several targeted therapy and immunotherapy treatments first used in melanoma, were approved for patients with many other types of cancer.

MRA issues 18 research awards, bringing total awards issued to date to 198.

13

L'Oréal Paris USA sponsors all-female scientist MRA Team Science Award Research Grant.



2016

13 MRA awards \$8.6 million in research grants, bringing total funds awarded to \$88 million.

MRA marks 10 years with \$88 million granted, 233 research awards issued, and 13 FDA-approved treatments for melanoma.

MRA issues 35 research awards bringing total awards issued to date to 233.

13

MRA and American Cancer Society partner to improve immunotherapy outcomes.

[More Info](#)

2017

TEN YEARS OF MRA



BY THE NUMBERS

\$88

MILLION GRANTED

\$89.5

MILLION IN LEVERAGED FUNDS, INCLUDING \$34 MILLION IN MATCHED FUNDS

233

RESEARCH AWARDS ISSUED

289

PRINCIPAL AND YOUNG INVESTIGATORS FUNDED

59%

OF GRANT FUNDING DEDICATED TO TEAM SCIENCE AWARDS

212

GRANT AWARDS FOCUSED ON MELANOMA TREATMENTS

73

STUDIES OF UNIQUE THERAPEUTIC APPROACHES FUNDED

113

INSTITUTIONS IN 15 COUNTRIES FUNDED

100%

OF DONATIONS TO MRA SUPPORT MELANOMA RESEARCH

11

MELANOMA TREATMENTS APPROVED SINCE 2011, ALL TOUCHED BY MRA RESEARCH

THE MELANOMA LANDSCAPE: 2007 VS. 2017

Only two treatments for patients with advanced melanoma were available in 2007: a chemotherapy, which wasn't very effective and Interleukin 2, an immunotherapy that can be effective in a small group of patients, but also carries several side effects. In short, the prognosis for Stage IV melanoma was dismal.

However, change was on the horizon.

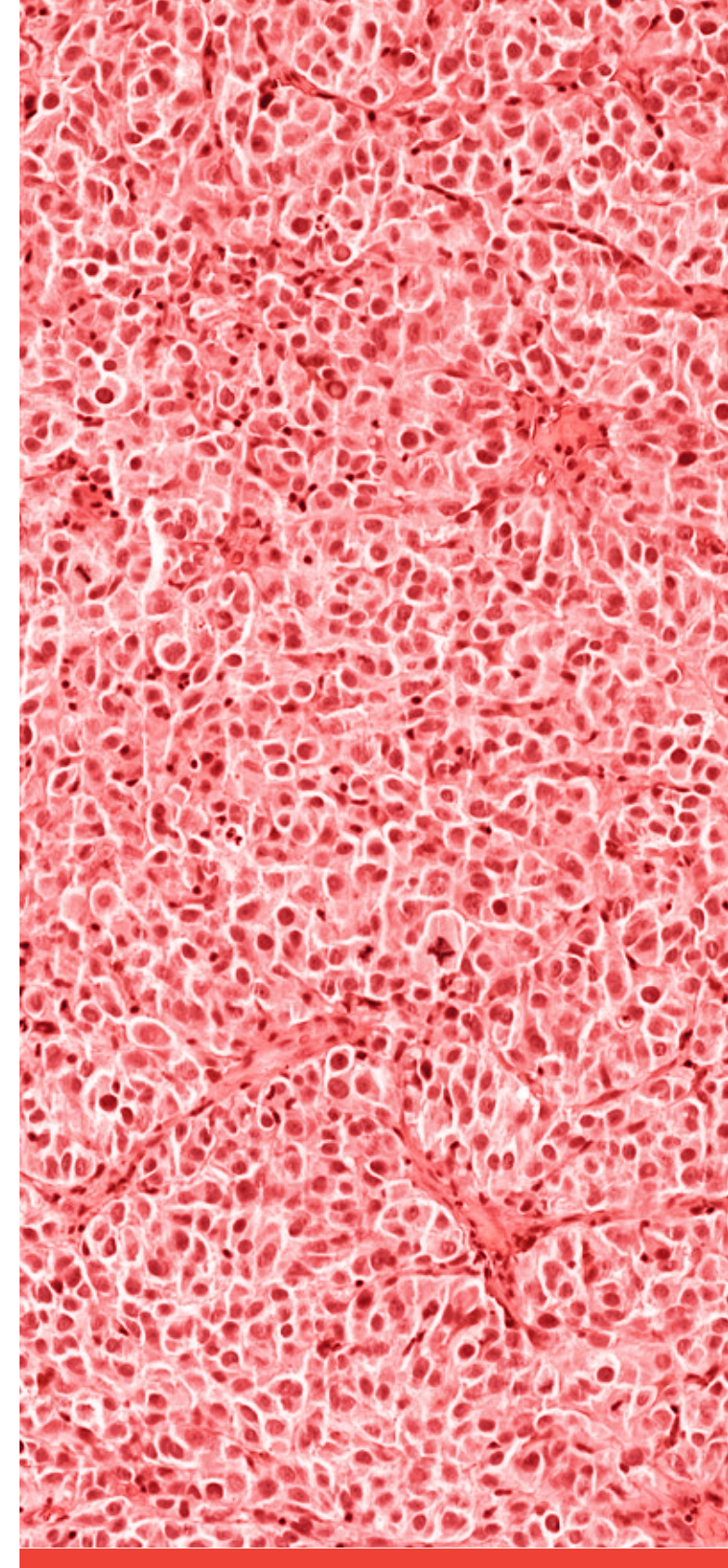
Promising research and drug development were underway and ideas were plentiful. Researchers were finally gaining momentum with immunotherapies and targeted therapies, which held great promise as new treatments that worked by mechanisms entirely different than any drugs previously used to treat melanoma.

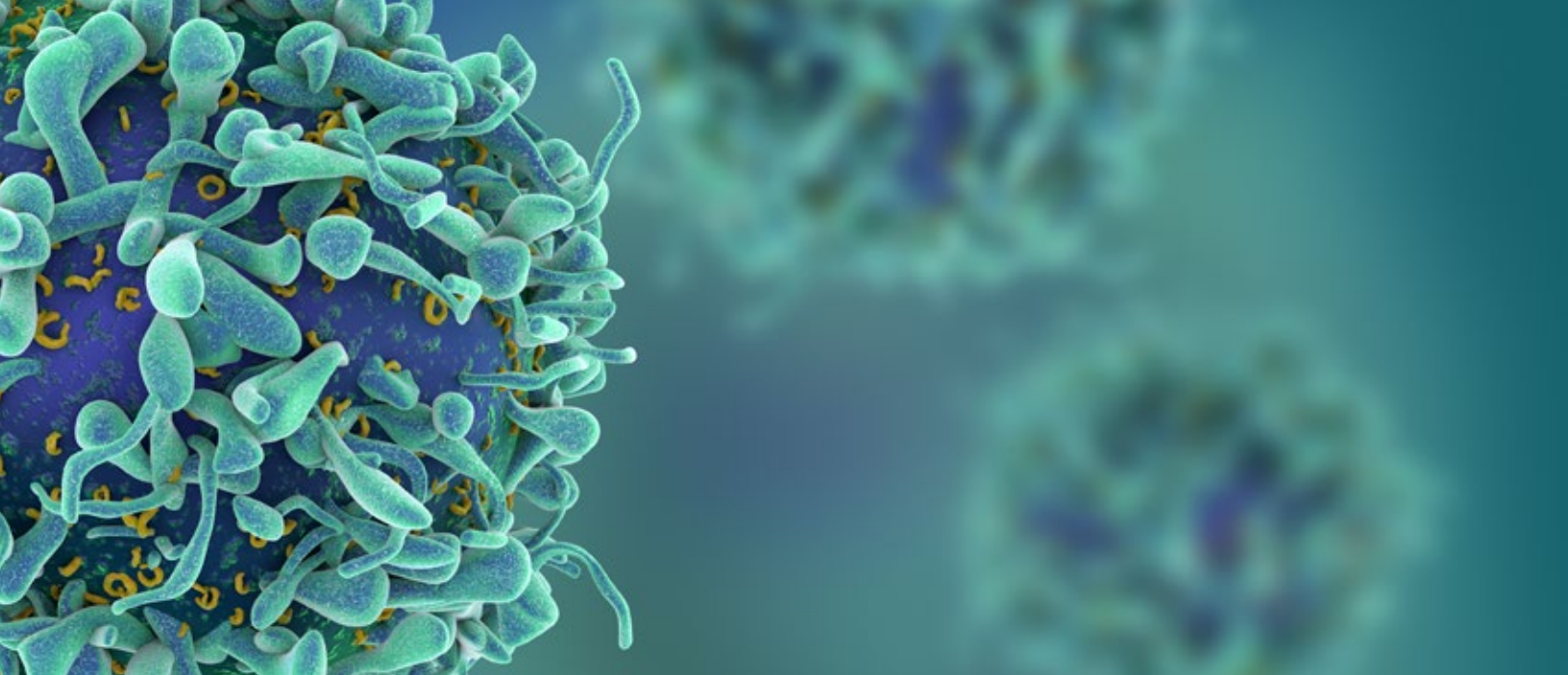
✓ Dedicated melanoma researchers with great ideas existed, the funding to support them didn't—until Debra and Leon Black founded the Melanoma Research Alliance. ✓

Dr. Jonathan Simons¹ and Dr. Suzanne Topalian² recall a melanoma landscape stifled by meager research funding and fragmented efforts. Federal and biotech funding was modest and very little was available from the philanthropic community to support melanoma research. Research was occurring globally; however, there were no efforts to connect researchers and research institutions. Dedicated melanoma researchers with great ideas existed, significant funding to support them didn't—until Debra and Leon Black founded the Melanoma Research Alliance.

¹ Simons, J. [Personal Interview.] Jonathan Simon, M.D. is President and CEO of the Prostate Cancer Foundation and serves on the MRA Board of Directors.

² Topalian, S. [Personal interview.] Suzanne Topalian, M.D is a Professor of Surgery and Oncology, Johns Hopkins Medicine and a member of the MRA Board of Directors.





MELANOMA LANDSCAPE: 2007 AND 2017

Comparing the melanoma landscapes are like comparing “color TV to black and white still photos,” says Dr. Simons. Melanoma was a specialized area in oncology garnering modest interest in 2007, recalls Dr. Topalian. In contrast, melanoma research is “center stage” today. With the infusion of research funds from MRA, groundbreaking advances have occurred in two major areas of oncology drug development: 1) targeted therapies and 2) immunotherapy.

These new advances have doubled the five-year survival rate for people with advanced late-stage metastatic melanoma, and new treatments and approaches on the horizon offer even greater hope.

Today, melanoma is the poster child for all of oncology. Lessons learned with checkpoint immunotherapies first approved for melanoma have now created new treatment options for lung cancer, bladder cancer, Hodgkin’s lymphoma, and head and neck cancer. In fact, immunotherapies are now being tested in over 30 cancers.

Since MRA awarded its first competitive, peer-reviewed research grants there has been remarkable progress:

11

MELANOMA TREATMENTS APPROVED SINCE 2011 WERE STUDIED BY MRA-FUNDED SCIENTISTS.

33

CLINICAL TRIALS SUPPORTED BY MRA. THE FIELD HAS NOW EXPLODED TO INCLUDE OVER 400 CURRENT CLINICAL TRIALS.

73

UNIQUE THERAPEUTIC APPROACHES STUDIED BY MRA-FUNDED SCIENTISTS.

MRA has been instrumental in accelerating the pace of discovery, extending the lives of countless patients, and leading the charge for better clinical outcomes.

THE ROAD TO 2017

Dr. Simons and Dr. Topalian also attribute MRA’s transformative impact on the field to Debra Black’s personal experience with melanoma.

Debra’s unwavering courage, determination, and commitment to making a difference for patients with melanoma has positioned MRA as a true pathfinder for the next generation of therapies for treating and, ultimately, curing cancer.

Incubation under the auspices of the Milken Institute enabled MRA to benefit from learnings of several organizations.

MRA challenged the field to shift its focus to science with curative intent. It’s commitment to finding a cure for melanoma is reflected in its mission and exemplified in the research it funds.

Lastly, MRA’s philosophy of collaboration has been key to moving the field forward and is at the core of everything it does. It’s epitomized in the Team Science Award, a cornerstone of MRA’s scientific strategy.

MRA provides opportunities for researchers to interact with current collaborators as well as those with whom they wouldn’t have collaborated, under other circumstances. Historically, researchers in two major areas—immunotherapy and targeted molecular therapy—didn’t interact.

Today, that framework of commitment, curative intent, and collaboration persists. And, it’s been a defining characteristic of MRA as a shining beacon for so many patients who, without it, may not have hope.

The melanoma landscape has transformed significantly in the last 10 years, but continued support for melanoma research is critical.

While the melanoma treatment landscape has transformed, there is still much work to do. In 2007, when MRA was founded, just over 16% of late-stage metastatic melanoma patients expected to live five years after receiving their diagnosis; now, with new treatments, that figure has doubled. Yet the reality is that too many patients won’t benefit from even the latest advances. MRA is propelling progress on several fronts, such as testing new combinations of existing treatments and developing new targets that can be used for the development

of entirely new classes of medication and therapies. This is MRA’s mission and we can’t achieve it without the dedication and support of our donors.

Together, with additional resources and continued focus, we will cure melanoma and transform oncology at large.

“I didn’t hear other organizations talking about a cure for cancer, especially not for melanoma. But, MRA approached its work differently. It understood that with the right research, we could cure melanoma and it wasn’t afraid to say so.”

– Rusty Cline, melanoma survivor and advocate

DONATE TODAY

REFLECTIONS FROM THE FIRST CLASS OF MRA YOUNG INVESTIGATORS

DR. TIMOTHY BULLOCK



Dr. Timothy Bullock, a tumor immunologist, was encouraged by Dr. Michael Weber, an original member of the MRA Grant Review Committee to apply for a [Young Investigator Award](#). Prior to submitting his application to MRA, Dr. Bullock focused on understanding the many ways in which the immune system interacted with cancer. However, he had limited knowledge about melanoma. He submitted a proposal to MRA with the hope of learning more about melanoma, becoming a more well-rounded investigator, and gaining an appreciation for the way the immune system interacts with cancer from a clinical perspective—a hope, he says, that was achieved.

The Young Investigator Award helped Bullock establish himself as an independent investigator and provided an opportunity for exploration that may not have occurred without MRA funding. Dr. Bullock recalls the network and mentoring

as particularly rewarding. “The annual [Scientific Retreat](#) is a great joy,” as it nurtures the entire field. “MRA leadership and employees are approachable and empathetic. They support the scientific endeavors and the patients. They put everything in a context that is both motivational and inspiring,” adds Bullock.

Seven years later, Dr. Bullock’s work—accelerated by his Young Investigator Award—helped him earn his place among awardees of MRA’s inaugural class of Academic/Industry Partnership-award recipients where his lab supported early-stage clinical trials. Dr. Bullock worked to understand how patients respond to immunotherapy. He currently works in three main areas of translational development around the melanoma microenvironment, including an MRA-funded focused ultrasound project.

As a long-term recipient of MRA funding, Bullock acknowledges the significance of MRA to his career, beginning with the Young Investigator Award that helped establish him and his lab and increase his melanoma knowledge, and the Academic/Industry Partnership and Established Investigator awards, which have helped build upon and sustain his melanoma research. Bullock is an Associate Professor of Pathology and Associate Director of Clinical Hematology Laboratory at the University of Virginia School of Medicine where his lab is part of the Human Immune Therapy Center.

\$13.6

MILLION INVESTED IN

77

YOUNG INVESTIGATORS.

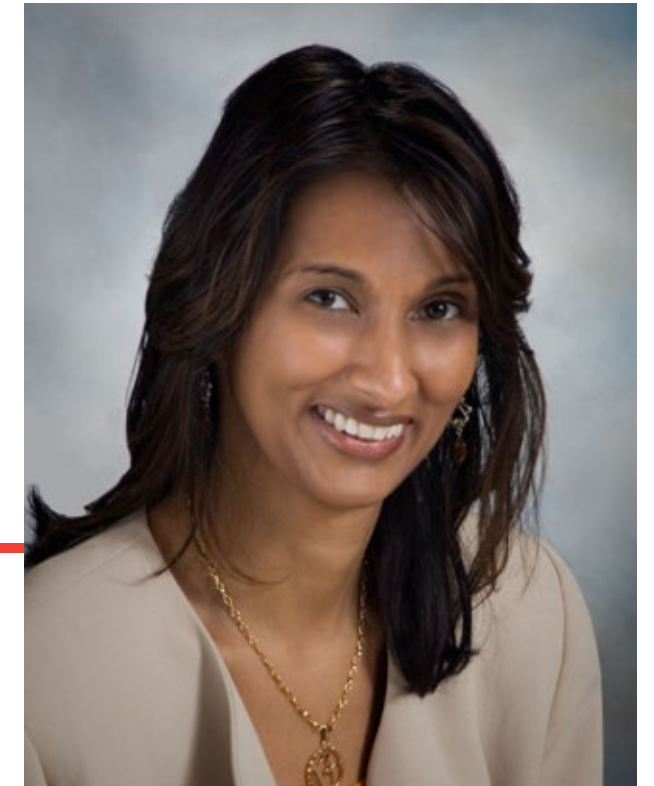
DR. PADMANEE SHARMA

“I hope to be a good role model...I hope young investigators look at the program and see there’s a way forward.”

– Dr. Padmanee Sharma

Dr. Padmanee Sharma, one of the first recipients of the Young Investigator Award, is a physician-scientist in the Departments of Genitourinary Medical Oncology and Immunology at The University of Texas MD Anderson Cancer Center in Houston, Texas. She learned about the MRA Young Investigator Award while participating in what she describes as “the first ever, ever, ever meeting of MRA,” where a small group of people, led by Debra and Leon Black discussed how to get the organization off the ground.

Sharma believes the Young Investigator Award provides a foundation on which young investigators can build their careers, as it opens doors for additional and varied future funding. Many young investigators are uncertain and doubtful as they apply for their first grants. They know they can’t conduct research experiments, develop data, or publish papers, all the things needed to help move the field forward, without funding. Dr. Sharma recalls being excited to be a member of the Young Investigator Award inaugural class. The award gave her a confidence boost in herself and her work. As Sharma explains, “People looked at my work and



thought enough to fund it. They took a chance and interest in my work, which helped move my career along.” Many MRA Young Investigators see early funding from MRA as a critical launching pad to securing larger investments in the future.

MRA facilitates mentoring and opportunities to exchange ideas with leading experts in the field. Sharma, for example, received instrumental input during the annual Scientific Retreat that helped her design better experiments, projects, and compete for more advanced grants.

MRA is a “family of investigators and philanthropists who believe in the science,” says Sharma. “It’s a core group who will always help to move the field forward,” particularly as federal funding alone is insufficient.

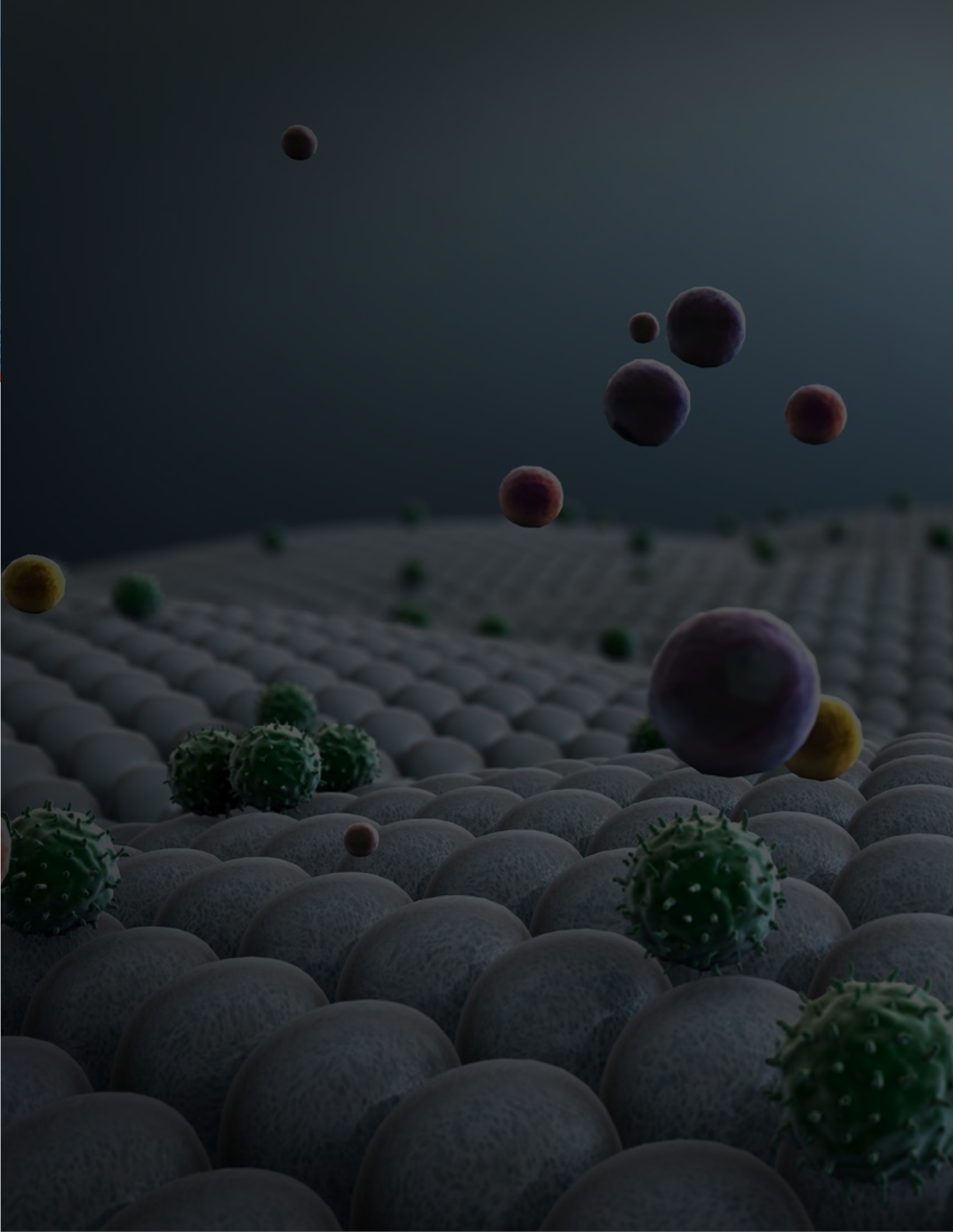
Continued on next page



Today, Dr. Sharma continues her work at MD Anderson. Since receiving the early investment by MRA, she has since been funded by the National Institutes of Health and other major funders. She is an active researcher with numerous publications and helping to advance immunotherapy for the entire field of oncology. The expertise she developed in immunotherapy and melanoma has helped to foster a two-way flow of information as she advances treatments in urological cancers, breaking down the all too common silos seen in medical research.

Conclusion

For the last 10 years, MRA has ignited catalytic change that has helped revolutionize melanoma prevention, diagnosis, and treatment. And, Young Investigators, such as Dr. Bullock and Dr. Sharma, have been a part of the change from the start. They are, as Dr. Bullock suggested, “MRA’s long-term investments,” who are helping MRA remain—more than ever—laser-focused on leading the way to a cure for melanoma.



HERE TODAY THANKS TO MELANOMA RESEARCH



RUSTY CLINE

Rusty Cline was diagnosed with Stage IV melanoma in 2006, at a time when there were practically no treatments for advanced melanoma. Soon after his diagnosis, Rusty was connected to a melanoma clinical trial. However, he was dismissed from both this and another clinical trial after experiencing recurrences. Despite undergoing radiation, chemotherapy, several surgeries, and being treated with ipilimumab shortly after it received FDA approval in 2011, Mr. Cline's cancer continued to reoccur.

After the ipilimumab treatment, Rusty recalls feeling like he had exhausted all of his options. With the encouragement of family and a close friend, however, he entered his third clinical trial.

While participating in the trial, Rusty attended the first Leveraged Finance Fights Melanoma (LFMM) event in 2013, where he met MRA founders, Debra and Leon Black, and Jeff Rowbottom, MRA Board Member and (LFMM) Co-Chair. When Rusty was introduced to MRA, he wasn't sure that he would survive—but he quickly understood that MRA was funding the right research.

Rusty vividly remembers his first email from MRA's CEO. The email address had **cure melanoma** in it. Rusty wasn't hearing other organizations talking about a cure for cancer, especially not for melanoma. But, MRA approached its work differently. It understood that with the right research, we could cure melanoma and it wasn't afraid to say so. For Rusty, these weren't just words—they were hope.

"If there's such a thing as getting melanoma at the right time, I guess I did," explains Rusty. At the conclusion of this past immunotherapy (nivolumab) trial, Rusty saw a **96% reduction of tumors**. "The fact that I was alive at all (after the clinical trial) was a big win."

"The fact that I was alive at all was a big win."

"The first thing that I love about MRA is 100% of money raised goes to research."

MARY JO ROGERS

When Mary Jo Rogers was diagnosed with Stage 3C melanoma in February 2011, a friend put her in touch with Debra Black. She remembers being impressed with the resources on the MRA website, which exposed her to new information about melanoma and possible treatments. After consulting with leading oncologists, Mary Jo entered a clinical trial. However, a year later she learned she was receiving the placebo—and her cancer had metastasized to her lungs. After receiving a Stage IV diagnosis in 2013, Mary Jo was treated with ipilimumab, which was ineffective. Mary Jo turned to Dr. Louise Perkins, MRA's Chief Science Officer. "I would call her and ask her any type of question. And, she'd answer them. She provided guidance about the best trials."



That included entering a promising nivolumab trial. Within a year her tumors were eradicated. "I can't say enough about MRA," says Mary Jo. "They saved my life. They really did."

Today, Mary Jo is a member of the MRA Board of Directors, she and her husband have funded a Young Investigator Award, and she serves as a peer-to-peer counselor for people with melanoma.

"I can't say enough about MRA. They saved my life. They really did."



JAMIE GOLDFARB

Unlike most cancer patients, Jamie Goldfarb already had knowledge of how clinical trials worked before she needed one. She worked at a company that conducted clinical trial recruitment and her husband led its oncology division. Therefore, Jamie was familiar with developments in melanoma treatment and knew a trial was her best option after being diagnosed with Stage IV melanoma in 2010—just 12 weeks after her baby boy Kai was born. Jamie received this diagnosis approximately four years after receiving a Stage I diagnosis and two years after a recurrence near her primary tumor, which a PET scan and clear margins indicated was contained.

Jamie immediately researched her options and consulted melanoma experts to determine the best trial to enroll in. The experts unanimously suggested she join the National Cancer Institute Tumor Infiltrating Lymphocytes (TIL) trial. Learning that she was eligible for the trial gave Jamie hope.

From January to April 2011, Jamie received high-dose IL-2 as a stand-alone treatment while the National Cancer Institute grew her cells—a step in the preparation of TIL treatment. The IL-2 shrank some tumors, but August scans showed 35 new subcutaneous tumors throughout her body. In September 2011, Jamie began receiving TIL treatment. Wondrously, by October 2013 her scans showed no evidence of disease.

While participating in the trial, Jamie documented her experience via blog in order to raise awareness about clinical trials. It was during this time that she learned how infrequently physicians were telling their patients about clinical trials. In conversations with people she met at the National Cancer Institute and through her blog, she learned many oncologists were prescribing approved treatments and telling their patients, “I’m sorry there’s nothing left for you. You have months left to live. Get your affairs in order.” She also learned, many patients, like herself, didn’t accept their prognosis and began researching options on their own. However, unlike Jamie, most had difficulty interpreting clinical trial information and understanding just what to do with the information. Jamie made sharing information about the importance of oncology clinical trials a personal mission. Today, Jamie is involved with MRA and other melanoma advocacy groups. She also serves as a research advocate at the National Cancer Institute, working with patients to help them navigate their treatment options.

“MRA is the one organization that is aligning all the proper stakeholders that are fighting this disease in a way that fosters collaboration, fosters new and better research, fosters better avenues for patients and really makes a mindful effort to involve physicians, advocacy groups, and patients to get the right voices together at all times.”

“The researchers involved with MRA are the best and brightest in the world.”

YEAR IN REVIEW



COLLABORATION IN FOCUS

Collaboration is at the core of MRA's organizational DNA. MRA knows it can't do this work alone. Thus, it seeks out partners who believe in and have embraced our mission of ending suffering and death due to melanoma. MRA's ability to fund wide-ranging research in melanoma is amplified by unique, multi-faceted collaborations and partnerships.

Our partners span all sectors to include corporations, academia, non-profits, pharmaceutical companies, government agencies, and patients and advocates. Here we spotlight a few of our partnerships from 2016-2017.

Key Collaboration Statistics

Key Statistics:

6 million BJ's Wholesale Club members reached and \$800,000 raised by BJ'S.

\$2 million to be granted under the MRA/ American Cancer Society (ACS) research partnership.

\$890,000 granted by MRA to three Academic/ Industry Partnership Awards, with \$1.1 million in cash and in-kind support received from industry partners.



Corporate Partner Spotlight

BJ's Wholesale Club, a retail warehouse club, distributed ads featuring MRA to its 6 million members to raise awareness about melanoma prevention. The promotion, carried out in each of its 225 stores during Melanoma Awareness Month, included a campaign to mobilize vendors selling through BJ's to donate funds to support research. In total, during the first year of this partnership, BJ's raised \$800,000 that will directly support MRA-funded researchers and BJ's wants to raise even more funding for research in 2018.

"As someone who has a family member that was diagnosed with melanoma, I know all too well the effect that skin cancer can have on a family," says Bob Eddy, Executive Vice President and Chief Financial Officer at BJ's. "I am elated that this partnership will shed light on the fact that people can impact their chances of experiencing this disease, just by thinking about their sun exposure."

– **Bob Eddy, Executive Vice President and Chief Financial Officer at BJ's**



Research Partner Spotlight

The American Cancer Society (ACS), the largest voluntary health organization, and MRA have created a joint grant-making program designed to find ways to better predict, prevent, and/or minimize the side effects of checkpoint inhibitors, which are some of the most promising immunotherapy drugs. MRA and ACS have each committed \$1 million for grant awards and the combined \$2 million will be used to fund at least one team at \$1 million and to support five pilot projects at \$200,000 each. The first grants will be awarded in April 2018. The partnership brings together the best of both organizations—MRA's deep focus on melanoma research and immunotherapy with ACS's connection to the broader oncology field.



Community-based Melanoma Group Partner Spotlight

Melanoma Action Coalition comprises 29 non-profit organizations focused on increasing awareness about melanoma, providing education about sun safety, and raising money for melanoma research. Community partners help us mobilize awareness of melanoma to support prevention efforts, and partner with us in funding the best research possible.

The Tara Miller Melanoma Foundation, one MAC-affiliated organization, also directly collaborates with MRA. Founded by Tara Miller in 2014 with a mission to raise funds to support melanoma research of effective treatment methods and, ultimately a cure, the foundation is now led by the Millers to honor Tara's legacy and continue her fight. Although Tara knew the money raised by her foundation would not fund research that would benefit her, Tara explained, "Hopefully we will see the money raised by this Foundation make a difference in someone else's fight against this terrible disease."

Since 2014, the Foundation has raised more than \$2 million dollars and 100% of those funds have been used to fund research. To date, the Tara Miller Melanoma Foundation has collaborated with MRA to fund three Young Investigator Awards.



Academic/Industry Partnerships

The Academic/Industry Partnership program is built on stakeholder collaboration. MRA and an industry partner, whose involvement is essential to the research project, co-fund a competitively awarded research grant given to an academic investigator in the melanoma field. In 2016-2017, MRA granted more than \$890,000 to three Academic/ Industry Partnership Awards that were supplemented by industry matches totaling more than \$1.1 million in cash and in-kind support.

Academic/Industry Partnership Spotlight

Targeted therapy for metastatic melanoma: A phase 1 dose-expansion cohort; Paul Hergenrother, Ph.D., University of Illinois at Urbana-Champaign/Vanquish Oncology

Dr. Hergenrother and Vanquish Oncology are conducting a clinical trial with late-stage metastatic melanoma patients to evaluate PAC-1. This novel drug kills melanoma cells through an entirely different mechanism than other targeted therapies, and as such, it is hoped that it will avoid the associated resistance problems common to this treatment type. This research is founded on the results from a Phase 1 clinical trial of PAC-1 that showed a response in a patient with advanced-stage cancer.

"MRA is focused on the human aspect. They created a community for patients and families and they NEVER forget a patient they've lost."

– **Lauren Miller**

SCIENTIFIC RETREAT

Each year, MRA hosts a Scientific Retreat to promote collaboration and communication among key stakeholders in the melanoma community. This event is one example of MRA exemplifying the **Alliance** portion of our name. This event has become one of the most vital gatherings of stakeholders in the field of melanoma research. It serves as a vehicle for fostering collaboration by facilitating early sharing of data among researchers in a highly interactive forum, linking melanoma advocates, connecting academia and industry, and supporting young investigators.

The Ninth Annual Scientific Retreat was held February 13-15, 2017, in Washington, DC. Among the nearly 300 attendees were: academic investigators, pharmaceutical and biotech representatives, melanoma advocates from numerous non-profit organizations, donors, patients, family members of those who lost their lives to the disease, and government officials. All were gathered at this invitation-only, think tank-style conference to hear the latest research findings in melanoma prevention, diagnosis, and treatment and to discuss ways in which industry and academia can better work together to promote the most effective clinical trials and learn from patients and their families with firsthand experience fighting this difficult disease.



“The MRA Scientific Retreat is always a great opportunity to network and hear from cutting edge investigators and patient advocates.”

– Via post-retreat evaluation

Several continuing education and networking sessions accompanied the Retreat’s core scientific sessions:

- **The Melanoma Advocates and Foundations Forum** facilitated networking among patients, industry representatives, and individuals from non-profit organizations responding to melanoma and provided an overview of current research to help these individuals better understand the scientific sessions.
- **Industry Roundtable Breakfast** convened academic researchers and representatives from government and industry to discuss how to better facilitate the collection and use of critical tissue specimens from patients participating in clinical studies.
- **MRA Young Investigator Breakfast** featured editors from several top-tier journals who offered advice on how to best prepare their research findings for publication.



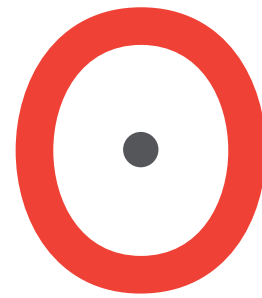
Past and present MRA Young Investigators gathered at the 2017 Scientific Retreat.



2017 MRA RESEARCH AWARDS

MRA is the largest non-profit funder of melanoma research. MRA's investment in the field has been critical in catalyzing transformative, strategic, and collaborative investments in scientific discovery and translation.

This year MRA made 35 awards, which include three clinical studies, 26 investigators, and eight institutions new to MRA. Awards funded in 2017 continue to support novel approaches in both the targeted and immunotherapy arenas. Compared to the entire MRA portfolio, a greater proportion of 2017 funding is going towards immunotherapy compared to targeted approaches. This funding is reflective of the recent changes in the therapeutic landscape of melanoma.



Established Investigator Awards

support senior investigators with an established record of scientific productivity and accomplishment and who are past the initial four years of their first academic faculty appointment. Established Investigator Awards typically provide three years of support at \$125,000 per year.

Single cell analysis and perturbation of the tumor-immune ecosystem:

Seeks to use cutting-edge, single cell genomic sequencing techniques to identify tumor, tumor microenvironment and immune cell features that correlate with response to PD-1 targeted therapy. MRA Established Investigator Award, Ido Amit, Weizmann Institute of Science

DNA-based biomarkers for melanoma diagnosis and prognostication:

Aims to identify genetic alterations in melanoma tumors that correlate with patient outcome and develop a candidate algorithm that can distinguish low from high-risk patients. MRA Established Investigator Award, Boris Bastian, University of California, San Francisco

Melanocyte stem cells and their progression to malignancy and metastasis:

Will use genomics techniques to better characterize melanocyte stem cells, a type of skin cell, and their role in melanoma development and progression. MRA Established Investigator Award, Elaine Fuchs, The Rockefeller University

Molecular mechanism of UV-induced mutagenesis in melanoma:

Seeks to determine how skin cells repair their DNA in response to ultraviolet light exposure and how this in turn affects melanoma development. MRA Established Investigator Award, Chengyu Liang, University of Southern California

Identification of active drugs for NF1-mutant, BRAF/NRAS-wildtype melanoma:

Aims to better understand the underlying biology of and discover new treatments for melanomas that harbor mutations in the gene NF1. Leveraged Finance Fights Melanoma-MRA Established Investigator Award, A. Thomas Look, Dana-Farber Cancer Institute

Granzyme B imaging to predict efficacy of immunotherapy in melanoma:

Will use PET imaging to visualize T cells directly killing tumor cells, which has potential to act as a biomarker of immunotherapy efficacy. MRA Established Investigator Award, Umar Mahmood, Massachusetts General Hospital

Development of YAP inhibitors to modulate regulatory T cell in melanoma:

Plans to slow melanoma growth by targeting YAP proteins in regulatory T cells, a type of immunosuppressive white blood cell. MRA Established Investigator Award, Fan Pan, Johns Hopkins University School of Medicine

Non-invasive imaging of the anti-melanoma immune response:

Aims to employ positron-emission tomography imaging in combination with camel-derived small antibody fragments to track anti-tumor immune responses induced by checkpoint inhibitors. Leveraged Finance Fights Melanoma-MRA Established Investigator Award, Hidde Ploegh, Children's Hospital Boston

Advancing SBI-756, a translation initiation inhibitor, for melanoma therapy:

Will further characterize the mechanism of action and therapeutic potential of a drug candidate that targets the molecular machinery responsible for generating proteins inside melanoma cells. Sokoloff Family-MRA Established Investigator Award, Ze'ev Ronai, Technion Israel Institute of Technology

Cell of origin as a driver of heterogeneity in melanoma:

Aims to better understand how the cell of origin for a tumor may contribute to different disease characteristics and outcomes in melanoma. Anna-Maria and Stephen Kellen Foundation-MRA Established Investigator Award, Lorenz Studer, Memorial Sloan-Kettering Cancer Center

Multiplex biomarkers for response to PD-1/PD-L1 checkpoint blockade:

Combines comprehensive genomic and protein expression analysis to identify biomarkers that predict anti-PD-1 responders and non-responders. Leveraged Finance Fights Melanoma-MRA Established Investigator Award, Janis Taube, Johns Hopkins University School of Medicine

Single-cell biomarkers for engineering T cell function and metabolism:

Seeks to understand how the tissue environment surrounding a tumor influences how T cells acquire and generate energy, and in turn, how this impacts the anti-tumor activities of these T cells. MRA Established Investigator Award, Navin Varadarajan, University of Houston

Targeting TEAD autopalmitoylation in YAP-dependent uveal melanoma:

Will investigate an aberrant molecular mechanism in uveal melanoma cells (uveal is melanoma of the eye, involving the iris, ciliary body, or choroid) to identify potential new drug targets. The Samuel Ming-Sum Fisher Memorial Award-MRA Established Investigator Award, Xu Wu, Massachusetts General Hospital

The miR-29 circuit in melanoma initiation and progression:

Aims to interrogate how small molecules called microRNAs interact with cancer-causing molecular pathways to regulate melanoma development. MRA Young Investigator Award, Florian Karreth, H. Lee Moffitt Cancer Center and Research Institute

A nanoscale technology for real-time tracking of immunotherapy response:

Will use biology-inspired engineering to develop nanoparticles that can both deliver an immunotherapy payload and report back on efficacy in real time.

MRA Young Investigator Award, Ashish Kulkarni, University of Massachusetts Amherst

PKCalpha as a node to overcome intrinsic MEK inhibitor resistance in melanoma:

Aims to validate the protein PKCalpha as a promising drug target, particularly for non-BRAF-mutant melanoma.

University of Texas MD Anderson Cancer Center-MRA Young Investigator Award, Lawrence Kwong, University of Texas MD Anderson Cancer Center

Molecular epidemiology on gender difference in early onset melanoma:

Seeks to combine basic science and population study approaches to better understand how melanoma development and biology differs between males and females.

The University of California, Irvine-MRA Young Investigator Award, Feng Liu-Smith, University of California, Irvine

Epigenetic effectors of responses to immune checkpoint blockade agent:

Will investigate how heritable, chemical modifications to the tumor genome affects tumor cell sensitivity to checkpoint inhibitors.

Tara Miller Melanoma Foundation-MRA Young Investigator Award, Kunal Rai, University of Texas MD Anderson Cancer Center

A human T cell genetic screen for melanoma immunotherapy:

Aims to use state-of-the-art CRISPR-Cas9 gene editing technology to identify genetic mutations that lead to immunotherapy resistance in melanoma.

The New York Genome Center-MRA Young Investigator Award, Neville Sanjana, The New York Genome Center



Down-regulating CTLA4 on effector T cells to improve anti-CTLA4 efficacy:

Plans to test a therapeutic strategy to prevent resistance to anti-CTLA4 therapy that is based on selectively reducing the expression of CTLA4 on a specific subset of T cells.

BMS-MRA Young Investigator Award, Erica Stone, The Wistar Institute

Blocking melanoma brain metastasis by targeting the microenvironment:

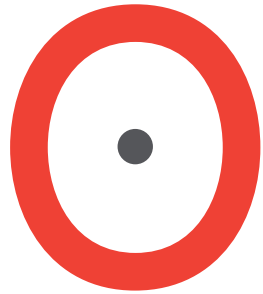
Seeks to investigate actionable targets that will lead to more efficient design of anticancer treatments for patients with metastatic melanoma to the brain.

BMS-MRA Young Investigator Award, Manuel Valiente, Fundacion Centro Nacional de Investigaciones Oncologicas Carlos III

“Smart” nanoparticles for immunotherapeutic targeting of the STING pathway:

Plans to engineer an innovative, immune-activating technology to reprogram the tumor microenvironment to support anti-tumor immunity.

Leveraged Finance Fights Melanoma-MRA Young Investigator Award, John Wilson, Vanderbilt University



Young Investigator Awards

attract early career scientists with novel ideas into melanoma research, thereby recruiting and supporting the next generation of melanoma researchers. Young Investigators are scientists within four years of their first academic faculty appointment. A mentorship commitment from a senior investigator is required. Young Investigator Awards typically provide three years of support at \$75,000 per year.

Development of novel anti-checkpoint strategies based on nanobodies:

Will evaluate novel immune checkpoint drugs with a strong potential for direct translation from bench to bedside.

MRA Young Investigator Award, Karine Breckpot, Vrije Universiteit Brussel

Phase I/II study of intratumoral CD40 agonistic monoclonal antibody APX005M in combination with systemic Pembrolizumab in patients with Metastatic Melanoma:

Will analyze the immune responses seen in patients enrolled in a trial of an approved anti-PD-1 therapy in combination with an antibody that stimulates a strong inflammatory response in tumors.

Conquer Cancer Foundation-MRA Career Development Award,

Adi Diab, University of Texas, MD Anderson Cancer Center

Biomarker-based application of anti-apoptotic inhibitors in melanoma:

Aims to determine the ability of a novel technology to predict responses to BRAF inhibitors in the clinic and evaluate a new strategy to enhance cell death responses to BRAF/MEK inhibitors in pre-clinical models.

MRA Young Investigator Award, Rizwan Haq, Dana-Farber Cancer Institute

Overcome resistance to PD-1 blockade by adding oncolytic virus TVEC:

Will analyze cellular and genomic changes in tumor biopsies from patients that are progressing on anti-PD-1 therapy and are receiving the oncolytic virus talimogene laherparepvec (TVEC), to better understand the effects of TVEC on the anti-tumor immune response.

MRA Young Investigator Award, Siwen Hu-Lieskovan, University of California, Los Angeles

Immune evasion mechanisms in MAPK and anti-PD-1 treated melanoma:

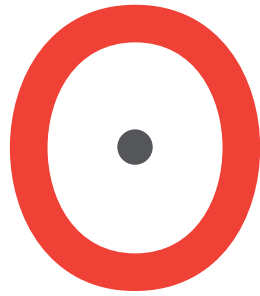
Seeks to reverse the immune suppression induced by MAPK inhibitors, with the aim to delay acquired MAPK inhibitor resistance.

MRA Young Investigator Award, Willy Hugo, University of California, Los Angeles

Effective melanoma immunity by targeting NK cell checkpoints:

Aims to determine how the secreted proteins IL-15 and TGF- β impact the ability natural killer cells, a type to white blood cell, to kill metastatic melanoma.

MRA Young Investigator Award, Nick Huntington, The Walter and Eliza Hall Institute of Medical Research



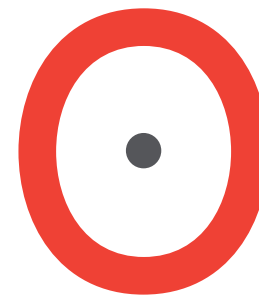
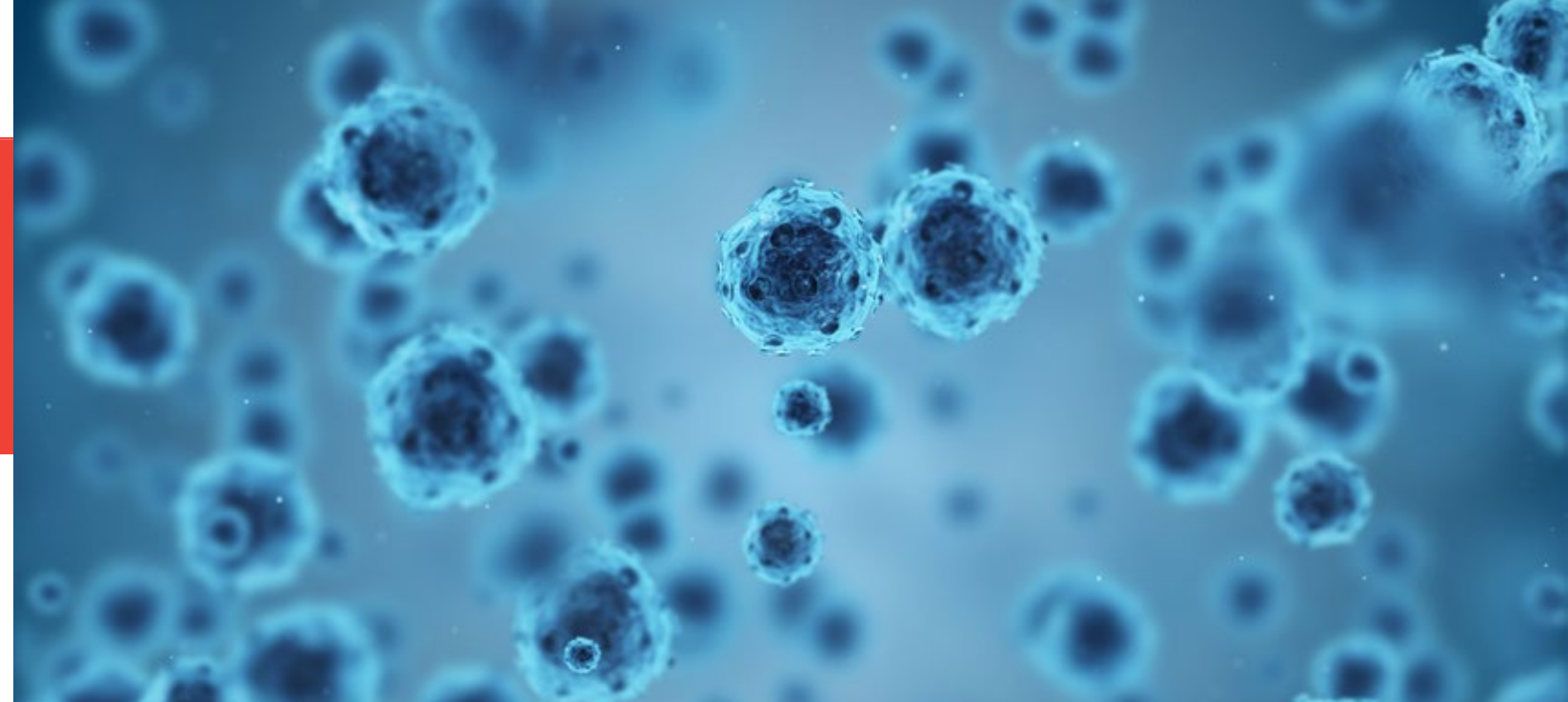
Academic-Industry Partnership Awards

facilitate interactions between academic, industry, and non-profit sectors. These awards are typically funded for three years by MRA with a one-to-one match of MRA funds or in-kind contributions from the industry partner to the researcher. Academic-Industry Partnership Awards typically provide two to three years of support at \$100,000 per year from MRA.

An international prospective natural history study in uveal melanoma:

Will undertake a natural history study to generate an international registry of overall survival data for uveal melanoma patients.

Immunocore-MRA Team Science Academic Industry Partnership Award,
Industry Partner: Immunocore
Richard Carvajal, Columbia University Medical Center



Pilot Awards

test potentially transformative ideas that are not supported by extensive preliminary data, but articulate a clear hypothesis and translational goals. These “high-risk, high-reward” projects are important to establish proof-of-concept, which may lead to additional funding through more traditional venues. Pilot Awards typically provide two years of support at \$50,000 per year.

Next generation inhibitors against wild-type and mutant BRAF dimers: Aims to develop a panel of novel inhibitors that would serve as next generation drug development leads to inhibit BRAF in melanoma.
MRA Pilot Award,
Evipidis Gavathiotis, Albert Einstein College of Medicine

MDSC recruitment as an adaptive resistance mechanism to PD-1 antibody therapy: Seeks to understand the role of myeloid-derived suppressive cells, a type of immunosuppressive white blood cell, in resistance to anti-PD-1 therapy.
MRA Pilot Award,
Brent Hanks, Duke University Medical Center

Targeting Foxp3 and NMD blockade in melanoma to unleash tumor immunity: Plans to test the therapeutic potential of blocking nonsense-mediated mRNA decay, a cellular surveillance pathway that helps to prevent errors in gene expression, in melanoma cells.
MRA Pilot Award,
Fernando Pastor, Foundation for Applied Medical Research

Dissecting the significance of pigment heterogeneity in cutaneous melanoma: Aims to better characterize how pigmentation of skin cells affects melanoma development and progression.
MRA Pilot Award,
Mark Shackleton, Monash University

A novel T cell regulatory receptor as a target for cancer therapy: Seeks to investigate the therapeutic potential of targeting LRIG1, an inhibitory protein expressed by T cells.
MRA Pilot Award,
Li Wang, The Medical College of Wisconsin



2016 DONORS & SUPPORTERS

\$500,000+

Debra and Leon Black
Bristol-Myers Squibb Company
L'Oréal Paris
Saban Family Foundation

\$250,000-\$499,999

Amanda and Jonathan Eilian
Anna-Maria and Stephen
Kellen Foundation
Tara Miller Melanoma Foundation
The Stewart J. Rahr Foundation
Sokoloff Family Trust
Sotheby's

\$100,000-\$249,999

Paul Abecassis
Akin Gump Strauss Hauer & Feld LLP
Anonymous
Aon Foundation
Christie's
Credit Suisse
Ellen and Gary Davis Foundation
Gail and Richard Elden
William Helman
Kirkland & Ellis LLP
The Ronald & Jo Carole
Lauder Foundation
Nancy and Howard Marks
Paul, Weiss, Rifkind, Wharton &
Garrison LLP
PricewaterhouseCoopers
Mary Jo and Brian Rogers
Merryl and James Tisch
US Trust, Bank of America, N.A.
Veritas Capital Management LLC
Wachtell, Lipton, Rosen & Katz

\$50,000-\$99,999

Amgen, Inc.
Anonymous
Jill and Jay Bernstein
Brownstein, Hyatt, Farber &
Schreck LLP
Deloitte
Daisy Helman
Susan and John Hess

IPREO Debtdomain
The Kraft Family Foundation
Bennett S. Lebow
Leonard Green & Partners, LP
Merck & Co., Inc.
The Neiman Marcus Group
Paul Hastings LLP
The Ressler Family Foundation
James O. Robbins Family Charitable
Lead Annuity Trust
Simpson Thacher & Bartlett LLP
The Paul E. Singer Foundation
Society for Immunotherapy of Cancer
Sports Authority, Inc.
UBS Financial Services

\$25,000-\$49,999

Barclays Capital
Jessica and Natan Bibliowicz
Birds Nest Productions
The Blue Oak Charitable Fund
Christine and Matthew Botica
Cahill Gordon & Reindel LLP
Dolce & Gabbana
Eli Lilly and Company
Emilia Fanjul and Brian Pfeiffer
Richard Farley
Fitch Ratings
Gibson, Dunn & Crutcher LLP
Johnson & Johnson
JPMorgan Chase & Co.
David L. Klein, Jr. Foundation
Kramer Levin Naftalis & Frankel LLP
Lung Cancer Research Foundation
LUNgevity Foundation
Macquarie Group
Aliza and Steven Major
Mintz, Levin, Cohn, Ferris, Glovsky
and Popeo, PC
Mizuho Securities USA, Inc.
Morgan Stanley
Oaktree Capital Management LLC
O'Melveny & Myers LLP
Polka Dot Mama Melanoma
Foundation
Provectus Pharmaceuticals, Inc.

Jona Rechnitz
Carolyn and Marc Rowan
Francine and Jeffrey Rowbottom
Allison Sarofim and Stuart Parr
Shearman & Sterling LLP
Skadden, Arps, Slate, Meagher &
Flom LLP
The Thompson Family Foundation, Inc.
The Foundation for Cancer Research
The Voila Fund
Teri and Trevor Watt
The Wayne Stinchcomb Big
Orange Foundation

\$10,000-\$24,999

Adaptive Biotechnologies
American Securities Advisors LLC
Array BioPharma
Susan and Evan Bayh
BMO Capital Markets
Castle Biosciences, Inc.
Clayton, Dubilier & Rice LLC
Joyce and Barry Cohen
Jennifer Corwin and Lee Grinberg
Cravath, Swaine & Moore LLP
Crescent Capital Group
Daiichi Sankyo
Davis Polk & Wardwell LLP
DCI Group LLC
Debevoise & Plimpton LLP
Deutsche Bank
Eva and Brendan Dillon
EMD Serono, Inc.
Fried, Frank, Harris, Shriver &
Jacobson LLP
Goldman Sachs & Co.
Guggenheim Partners
The Harper Family Foundation
HCA Holdings
Highbridge Capital Management LLC
Rich Hogan
HSBC Bank
I. Chera & Sons Foundation Inc.
Immunocore
Incyte Corporation
J. Crew

Richard Jones
 Jones Management Consulting, Inc.
 Kohlberg Kravis Roberts & Co.
 Latham & Watkins LLP
 Ashley Leeds and Christopher M. Harland
 Laurie and Peter Maglathlin
 Milbank Tweed Hadley & McCloy LLP
 Christina Minnis
 MJX Asset Management LLC
 Natixis Global Asset Management
 New Mountain Finance Corporation
 Nomura Securities
 Novartis Corporation
 Oak Hill Advisors, LP
 Orchard First Source Asset Management LLC
 Owl Rock Capital Partners LP
 Michael Petrick
 Pfizer, Inc.
 Quinn Emanuel Foundation
 Redwood Capital Management LLC
 Rgenix, Inc.
 Ropes & Gray LLP
 Royal Bank of Canada
 Anthony Scaramucci
 Sony Music
 Southeastern Regional Medical Center
 Sullivan & Cromwell LLP
 SunTrust Robinson Humphrey, Inc.
 Jill and Christopher Torrente
 Utay Family Foundation
 Van Wyck & Van Wyck
 Wells Fargo Bank
 White & Case LLP

\$5,000-\$9,999

M. Mark Albert
 Argento SC By Sicura, Inc.
 Barings LLC
 Berkshire Partners LLC
 Biotechnology Innovation Organization
 Campbell Brown and Daniel Senor
 Scott Carruthers
 CIFC Asset Management LLC
 Jesse Cohn

Thomas Cole
 Thomas Connolly
 Credit Agricole
 CreditSights
 D.M. Davenport
 Susan and Peter Evensen
 Freedom Mortgage
 Donna and John Galateria
 Sharyn and Walter Gertz
 Ralph S. Gindi Family Foundation
 GoldenTree Asset Management, LP
 Lauren Hanrahan
 Hawaiian Sunday Crew
 Rhonda and Stratton Heath
 Aimee and David Hidary
 Grace Hidary Foundation, Inc.
 Ims Foundation
 William Janetschek
 Jefferies LLC
 Albert Jones
 Elissa Kramer and Jay Newman
 Leveraged Commentary & Data
 The Loan Syndications & Trading Association
 Mahshala Foundation, Inc.
 Bari Milken Bernstein
 The Miller Family
 Linda and Dennis Myers
 Oak Hill Capital Management
 Onex Corporation
 Physicians Health Center
 PJT Partners
 Cynthia and Leon Polsky
 Proskauer Rose LLP
 Raphael Foundation, Inc.
 Jonathan Ressler
 Shamah Properties LLC
 Shenkman Capital Management, Inc.
 SkinCeuticals
 Spectral Molecular Imaging
 Arlyne and Martin Stein
 Stone Point Capital LLC
 Sumitomo Mitsui Banking Corporation
 Albert & Melissa Sutton Foundations, Inc.
 Suvretta Capital Management LLC

Tamar Management Corp
 Stephanie Teicher
 United American Land LLC

\$1,000-\$4,999

Catherine and Christopher Abbate
 The Amin and Lillian Adjmi Foundation
 Anonymous
 Jack H. Ashkenazie Foundation Inc.
 Heather and Michael Baker
 Bee Bald
 The Benevity Community Impact Fund
 BHPC International LLC
 Blue Lizard
 Elizabeth Bodisch
 Mary Ellen and William Bos
 Brazil Bronze Glow Bar
 Brooklyn Brewery
 Vanessa Brown
 Anne Buckman and Andrew Calder
 A. Robert Buonanno
 Elizabeth and Christopher Butler
 Rachel Cantor
 Mandie Cantril
 Kristen and Didric Cederholm
 Chatham Asset Management LLC
 Steve Cohen
 Robert Cohen
 Connolly's Pub & Restaurant
 Consiglio
 Bradley Cuddeback
 Barbara & Haim Dabah Family Foundation
 The Geaton & Joann Decesaris Family Foundation Inc.
 Dechert LLP
 Dee & Dee of Chambers Street, Inc.
 Hranitzky Dennis
 Scott Dolsey
 Rochelle and Eli Dweck
 Elliot R. Chalme Memorial Fund
 Eric Javits, Inc.
 The Ellis Family Foundation
 Foundation Medicine, Inc.
 Raquel and Joseph Franco
 Danek Freeman

Rondi and David Frieder
 Robert Fullerton
 Daniel Ganitsky
 Gent Management LLC
 Peter Glaser
 Dev Gopalan
 Jeffrey Greenip
 Ellen and Benjamin Grinberg
 Gurwitch Products
 Eli Harari
 Robert Hedaya
 Abraham & Esther Hersh Foundation Inc.
 Hidary Foundation
 Melissa Hutson and Matthew Rizzo
 IBM Employee Services Center
 JSRE Realty LLC
 Mara and Jason Kanner
 Boriana Karastoyanova
 Steve Kasoff
 Nancy and Gabriel Khezeie
 David Kline
 Nancy and Joshua Korff
 Lands' End
 David Lerner
 Katherine Letterman

Peter Malkin
 Marlene and Hyman Mamiye
 Robert Matalon
 Antoine Mclernon
 Judy and Ben Mizrachi
 Mott 50 LLC
 Grant Moyer
 George Mueller
 Natura Bisse International, Inc.
 Mitchell Nelson
 Kelly and David Nemecek
 Network Financial Printing, Inc.
 Louise Perkins
 Francisco Pinto-Leite
 Derrick Queen
 Evan Ratner
 Redman Associates Inc.
 Richard Ritholz
 Jennifer and Sean Rodgers
 Hilary Rogers
 Charles & Brenda Saka Family Foundation
 Wendy and Edward Sassower
 David J. Scudellari
 Joseph Shamie
 Carren and Dean Shulman

Adam Smith
 Anthony Speier
 Tracy and James Sprayregen
 Ann Beth Stebbins
 Nancy and Mitchell Steir
 Ralph Sutton
 Amanda Taitz
 Alice and Victor Tawil
 Russell Thomas
 Cade Thompson
 Adele Thurnher
 Aaron Vuu
 James Walsh
 Warburg Pincus LLC
 Eric Wedel
 Barbara and William Welke Jeremiah
 Whiddon
 Gavin White
 Brian Wolfe
 Worthen Industries, Inc.

The list of donors contributing up to \$999 in 2016 is on the [MRA website](#).



FINANCIALS

STATEMENT OF FINANCIAL POSITION

	2016			Total 2015
	Unrestricted	Temporarily Restricted	Total	
ASSETS				
Cash and Cash Equivalents	\$ 22,555,754	\$ -	\$ 22,555,754	\$ 22,202,082
Contributions Receivable (Net)	-	8,288,256	8,288,256	10,620,521
Due from Affiliate	1,260	-	1,260	-
Prepaid Expenses and Other Assets	33,604	-	33,604	43,291
Property and Equipment (Net)	3,579	-	3,579	29,300
TOTAL ASSETS	\$ 22,594,197	\$ 8,288,256	\$ 30,882,453	\$ 32,895,194
LIABILITIES AND NET ASSETS				
Liabilities				
Accounts Payable and Accrued Liabilities	\$ 74,168	\$ -	\$ 74,168	463,704
Grants Payable (Net)	13,204,967	-	13,204,967	251,019
Deferred Revenue	110,000	-	110,000	265,000
Due to Affiliate	-	-	-	41,569
TOTAL LIABILITIES	13,389,135	-	13,389,135	1,021,292
NET ASSETS				
Liabilities				
Unrestricted	9,205,062	\$ -	9,205,062	17,015,455
Temporarily Restricted	-	8,288,256	8,288,256	14,858,447
TOTAL NET ASSETS	9,205,062	8,288,256	17,493,318	31,873,902
TOTAL LIABILITIES AND NET ASSETS	\$ 22,594,197	\$ 8,288,256	\$ 30,882,453	\$ 32,895,194

STATEMENT OF ACTIVITIES

	2016			Total 2015
	Unrestricted	Temporarily Restricted	Total	
REVENUES, PUBLIC SUPPORT AND OTHER INCOME				
Contributions	\$2,318,523	\$ 3,952,602	\$ 6,271,125	\$ 3,950,871
Special Events (Net of Cost of Direct Donor Benefits of \$294,548)	1,374,162	-	1,374,162	6,871,307
Sponsorships	526,300	-	526,300	425,000
Interest Income	66,405	-	66,405	48,679
In-Kind Contributions	101,959	-	101,959	61,523
Other Income	-	-	-	8,419
Write-Off of Uncollectible Pledges Receivable	-	(110,000)	(110,000)	-
Net Assets Released from: Time Restrictions	10,412,793	(10,412,793)	-	-
TOTAL REVENUES, PUBLIC SUPPORT AND OTHER INCOME	14,800,142	(6,570,191)	8,229,951	11,365,799

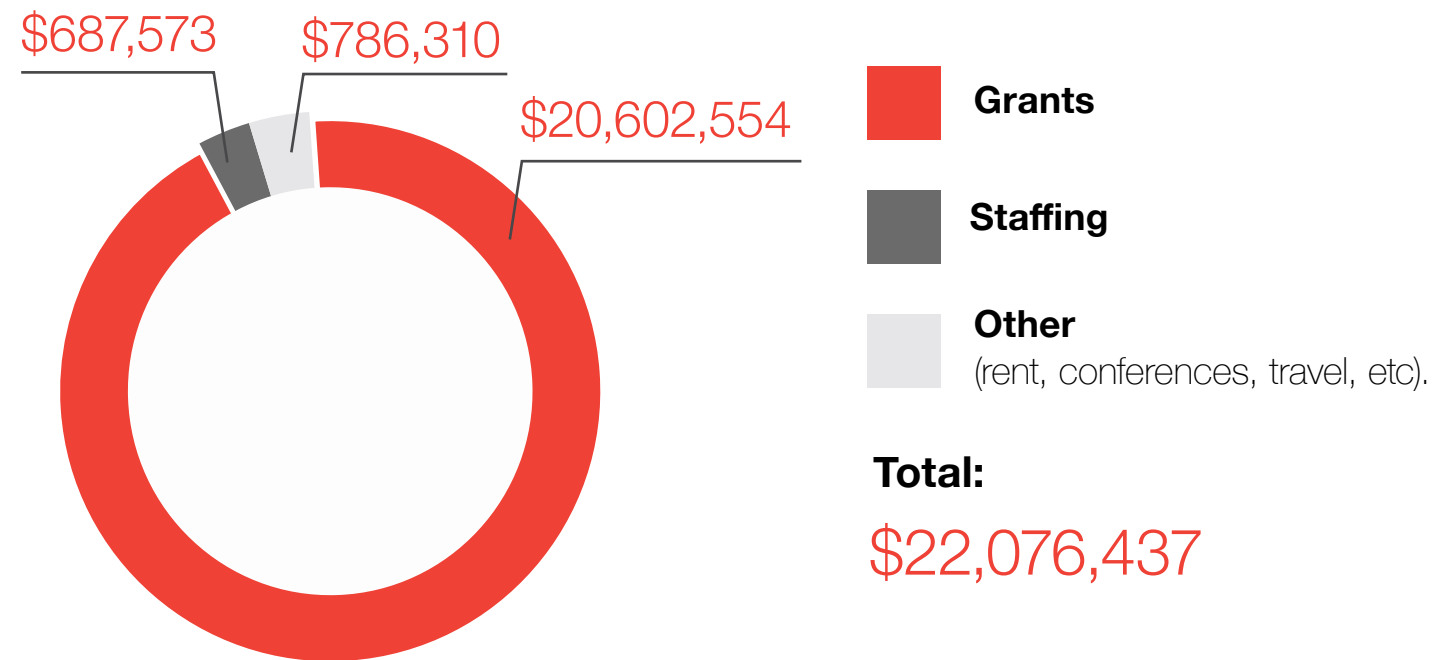
FUNCTIONAL EXPENSES

	2016	2015
Program Services	\$ 22,076,437	\$9,302,692
Management and General	177,623	452,520
Fundraising	356,475	688,608
TOTAL FUNCTIONAL EXPENSES	22,610,535	10,443,820
CHANGE IN NET ASSETS	(7,810,393)	921,979
Net Assets - Beginning of Year	17,015,455	30,951,923
NET ASSETS - END OF YEAR	\$ 9,205,062	\$31,873,902

During the year ending 12/31/16—MRA approved remaining commitments on previously contingent grants. This had a one-time effect of increasing grant expenses in 2016 by \$13.2 million.



2016 PROGRAM SERVICES EXPENSES BREAKDOWN



MRA BOARD OF DIRECTORS

Debra R. Black
Co-Founder and Chair, MRA
Broadway Producer

Leon Black
Co-Founder, MRA
CEO, Chair, Apollo Management,
LLC

Margaret Anderson
Managing Director, Deloitte
Secretary, MRA Board

Maria Arena Bell
Television Writer
Producer

Ellen Davis
Principal, Makana Beverages

Amanda Eilian
Co-Founder and President,
Videolicious

Jason Daniel Federici
Art Director and Designer

Jami Gertz
Television Actress
Film Actress

Daisy Helman
CEO and Founder, Garden Collage

Susan Hess
Vice Chairman, Whitney Museum

Michael Klowden
CEO, The Milken Institute

Nancy Marks
Chairman, Sies Marjan

Mike Milken
Chairman, The Milken Institute
Founder and Chairman, FasterCures
Founder and Chairman, Prostate
Cancer Foundation

Richard Ressler
Founder and President, Orchard
Capital Corporation and CIM Group

Mary Jo Rogers
Melanoma Patient
Melanoma Advocate

Jeffrey Rowbottom
Managing Director, PSP Investments

Elliott Sigal, M.D., Ph.D.
Venture Partner and Senior Advisor,
New Enterprise Associates

Jonathan W. Simons, M.D.
President and CEO, Prostate
Cancer Foundation

Jonathan Sokoloff
Managing Partner, Leonard Green &
Partners, LP

Elizabeth Stanton
President, The Elizabeth and Oliver
Stanton Foundation

Suzanne L. Topalian, M.D.
Professor, Surgery and Oncology,
Johns Hopkins Medicine

MRA STAFF

Michael Kaplan
President and CEO

Louise Perkins
Chief Science Officer

Joan Russo
Chief Development Officer

Kristen Mueller
Scientific Program Director

Cody Barnett
Director of Communications

Rachel Gazzo
Associate Director, Development &
Information Management

Tasheema Prince
Scientific Program Manager

Subira Brown
Development Associate

Tyler Brown
Executive Assistant

SCIENTIFIC ADVISORY PANEL

Suzanne Topalian, M.D. (Chair)
Professor, Surgery and Oncology,
Johns Hopkins Medicine
Director, Melanoma Program,
Kimmel Cancer Center
Associate Director, Bloomberg~Kimmel
Institute for Cancer Immunotherapy

Jeff Allen, Ph.D.
President and CEO, Friends of Cancer
Research

James Allison, Ph.D.
Professor and Chair of Immunology,
University of Texas MD Anderson Cancer
Center

Boris Bastian, M.D.
Clinical Professor, Department of
Dermatology, University of California,
San Francisco

Gideon Bollag, Ph.D.
Chief Executive Officer, Plexikon

Glenn Dranoff, M.D.
Director, Human Gene Transfer
Laboratory Core, Dana-Farber
Cancer Institute

Levi Garraway, M.D., Ph.D.
Senior Vice President, Global
Development & Medical Affairs, Lilly
Oncology, Eli Lilly and Company

Allan C. Halpern, M.D.
Chief, Dermatology Service, Memorial
Sloan Kettering Cancer Center

Reid Huber, Ph.D.
Executive Vice President,
Chief Scientific Officer
Incyte Corporation

Nageatte Ibrahim, M.D.
Executive Director, Melanoma Program
Development Lead, Merck Research
Laboratories

Jeffrey Legos, Ph.D.
Senior Vice President, Global Program
Head, Novartis Pharmaceuticals
Corporation

Richard Marais, Ph.D., FMedSci
Director,
Cancer Research UK Manchester
Institute

Ira Mellman, Ph.D.
Vice President of Research
Oncology, Genentech

Fouad Namouni, M.D.
Senior Vice President and Head of
Oncology Development, Bristol-Myers
Squibb

David Reese, M.D.
Senior Vice President,
Translational Science, Amgen, Inc.

Neal Rosen, M.D., Ph.D.
Enid A. Haupt Chair in Medical
Oncology, Memorial Sloan Kettering
Cancer Center

Steven Rosenberg, M.D.
Chief, Surgery Branch - National Cancer
Institute, National Institutes of Health

Michael Weber, Ph.D.
Director, Cancer Center, Weaver
Professor of Oncology, University of
Virginia



GRANT REVIEW COMMITTEE

Martin McMahon Ph.D. (Chair)

Cumming-Presidential Professor of Cancer Biology, Department of Dermatology & Senior Director for Preclinical Translation - Huntsman Cancer Institute, University of Utah

Jennifer Wargo, M.D. (Co-chair)

Assistant Professor, Department of Surgical Oncology, Division of Surgery, University of Texas MD Anderson Cancer Center

Andrew Aplin, Ph.D.

Professor, Department of Cancer Biology, Associate Director for Basic Science Program Leader for Cancer Cell Biology and Signaling, Kimmel Cancer Center, Thomas Jefferson University

Boris Bastian, M.D., Ph.D.

Clinical Professor, Department of Dermatology University of California, San Francisco

Nina Bhardwaj, M.D., Ph.D.

Professor, Medicine, Hematology and Medical Oncology, Icahn School of Medicine at Mount Sinai

Marcus Bosenberg, M.D., Ph.D.

Associate Professor of Dermatology and Pathology, Yale School of Medicine

Steven Burakoff, M.D.

Director, Tisch Cancer Institute Professor of Medicine, Hematology and Medical Oncology Professor, Oncological Sciences, Icahn School of Medicine at Mount Sinai

Paul Chapman, M.D.

Associate Physician, Melanoma/Sarcoma Service Memorial Sloan Kettering Cancer Center Professor of Medicine, Weill Medical College of Cornell University

Tanja de Gruijl, Ph.D.

Professor, Translational Tumor Immunology & Head Immunotherapy Lab VU University Medical Center, Amsterdam

Charles Drake, M.D., Ph.D.

Director Genitourinary Oncology Co-Director Immunotherapy Associate Director, Herbert Irving Comprehensive Cancer Center Columbia University Medical Center

David Fisher, M.D., Ph.D.

Edward Wigglesworth Professor & Chairman Dept. of Dermatology Director, Melanoma Program MGH Cancer Center Director, Cutaneous Biology Research Center, Massachusetts General Hospital Harvard Medical School

Keith Flaherty, M.D.

Director, Henri and Belinda Termeer Center for Targeted Therapies Richard Saltonstall Chair in Oncology, Massachusetts General Hospital Cancer Center

Thomas Gajewski, M.D., Ph.D.

Professor, Departments of Pathology and Medicine, University of Chicago Director, Immunology and Cancer Program, University of Chicago Comprehensive Cancer Center

Jeffrey Gershenwald, M.D.

Professor, University of Texas MD Anderson Cancer

J. William Harbour, M.D.

Professor and Vice Chairman, Dr. Mark J. Daily Endowed Chair, Director of Ocular Oncology, Bascom Palmer Eye Institute Member, Sylvester Comprehensive Cancer Center University of Miami Miller School of Medicine

Meenhard Herlyn, D.V.M., D.Sc.

Professor and Program Leader, Molecular and Cellular Oncogenesis Program, Wistar Institute

Thomas Hornyak, M.D., Ph.D.

Chief of Dermatology, VA Maryland Health Care System, Associate Professor of Dermatology and Biochemistry and Molecular Biology, University of Maryland School of Medicine

Roger Lo, M.D., Ph.D.

Professor, Departments of Medicine & Molecular and Medical Pharmacology UCLA David Geffen School of Medicine and Jonsson Comprehensive Cancer Center

Michal Lotem, M.D.

Head, Center for Melanoma and Cancer Immunotherapy, Sharett Institute of Oncology, Hadassah Hebrew University Medical Center

Kim Margolin, M.D.

Clinical Professor, City of Hope National Medical Center

Glenn Merlino, Ph.D.

Chief, Laboratory of Cancer Biology and Genetics, National Cancer Institute, NIH

Drew Pardoll, M.D., Ph.D.

Professor of Oncology, Medicine, Pathology, Molecular Biology and Genetics Johns Hopkins University School of Medicine

Antoni Ribas M.D., Ph.D.

Professor of Medicine, Professor of Surgery, and Professor of Molecular and Medical Pharmacology at the University of California Los Angeles (UCLA), Director of the Tumor Immunology Program at the Jonsson Comprehensive Cancer Center, University of California, Los Angeles

Caroline Robert, M.D., Ph.D.

Professor of Dermatology, Head of the Dermatology Unit, Institute Gustave Roussy

Lynn Schuchter, M.D.

C. Willard Robinson Professor of Hematology-Oncology Attending Physician, Hospital of the University of Pennsylvania, Program Leader: Melanoma Program, Abramson Cancer Center of the University of Pennsylvania, Division Chief, Hematology-Oncology, University of Pennsylvania



Jonathan Simons, M.D.

CEO and President David H. Koch Chair Prostate Cancer Foundation

Craig Slingluff, M.D.

Joseph Helps Farrow Professor of Surgery, Division of Surgical Oncology Vice Chair for Research Director, Human Immune Therapy Center, University of Virginia

Maria Soengas, Ph.D.

Head, Melanoma Group, Dean for Academic Affairs, Spanish National Cancer Research Centre

David Solit, M.D.

Geoffrey Beene Chair Director, Marie-Josée and Henry R. Kravis Center for Molecular Oncology Attending Physician, Genitourinary Oncology Service Member, Human Oncology and Pathogenesis Program Memorial Sloan Kettering Cancer Center

Alan Spatz, M.D.

Professor, Jewish General Hospital/Lady Davis Institute for Medical Research

Hermann Steller, Ph.D.

Strang Professor and Investigator, Howard Hughes Medical Institute, The Rockefeller University

Susan Swetter, M.D.

Professor of Dermatology Director, Pigmented Lesion & Melanoma Program Physician Leader, Cancer Care Program in Cutaneous Oncology, Stanford University Medical Center

Suzanne Topalian, M.D.

Professor of Surgery and Oncology; Director, Melanoma Program, Sidney Kimmel Comprehensive Cancer Center Johns Hopkins University

Jeffrey Weber, M.D., Ph.D.

Deputy Director and Head, Experimental Therapeutics, Laura and Isaac Perlmutter Cancer Center, Professor of Medicine at the NYU Langone Medical Center

MEDICAL ADVISORY PANEL

Dermatology

David Fisher, M.D., Ph.D.

Edward Wigglesworth Professor & Chairman, Department of Dermatology Director, Melanoma Program MGH Cancer Center, Director, Cutaneous Biology Research Center Massachusetts General Hospital, Harvard Medical School

Sancy Leachman, M.D., Ph.D.

Director, Melanoma Research Program, Chair, Department of Dermatology Oregon Health Science University Knight Cancer Institute

Roger Lo, M.D., Ph.D.

Professor, Departments of Medicine & Molecular and Medical Pharmacology, UCLA David Geffen School of Medicine and Jonsson Comprehensive Cancer Center

David Polsky, M.D., Ph.D.

Associate Professor of Dermatology and Pathology Director, Pigmented Lesion Section, NYU Langone Medical Center Joan and Joel Smilow Research Center

Susan Swetter, M.D.

Professor of Dermatology Director, Pigmented Lesion & Melanoma Program Stanford University Medical Center and Cancer Institute

Medical Oncology

Lynn Schuchter, M.D., Chair

C. Willard Robinson Professor of Hematology-Oncology, Attending Physician, Hospital of the University of Pennsylvania, Program Leader: Melanoma Program, Abramson Cancer Center of the University of Pennsylvania Division Chief, Hematology-Oncology, University of Pennsylvania

Michael Atkins, M.D.

Professor of Oncology and Medicine Deputy Director, Georgetown-Lombardi Cancer Center, Georgetown University

Paul Chapman, M.D.

Attending Physician, Melanoma / Sarcoma Service, Memorial Sloan Kettering Cancer Center, Professor of Medicine, Weill Medical College of Cornell University

Thomas Gajewski, MD, PhD

Professor, Departments of Pathology and Medicine, University of Chicago

F. Stephen Hodi, M.D.

Assistant Professor, Department of Medicine, Harvard Medical School Assistant Professor of Medicine, Dana-Farber Cancer Institute

Patrick Hwu, M.D.

Department Chair, Department of Melanoma Medical Oncology, Division Head, Cancer Medicine, University of Texas MD Anderson Cancer Center

Patricia LoRusso, D.O.

Professor of Medicine, Associate Director of Innovative Medicine, Yale Cancer Center

Kim Margolin, M.D.

Clinical Professor, City of Hope National Medical Center

Antoni Ribas, M.D., Ph.D.

Professor of Medicine, Professor of Surgery, and Professor of Molecular and Medical Pharmacology at the University of California Los Angeles (UCLA), Director of the Tumor Immunology Program at the Jonsson Comprehensive Cancer Center University of California, Los Angeles

Jeffrey S. Weber, M.D., Ph.D.

Deputy Director and Head, Experimental Therapeutics, Laura and Isaac Perlmutter Cancer Center Professor of Medicine at the NYU Langone Medical Center

Jedd Wolchok, M.D., Ph.D.

Lloyd J. Old/Virginia and Daniel K. Ludwig Chair in Clinical Investigation; Chief, Melanoma & Immunotherapeutics Service; Associate Director, Ludwig Center for Cancer Immunotherapy Member and Attending Physician Memorial Sloan Kettering Cancer Center

Surgical Oncology

Charlotte Ariyan, M.D.

Associate Attending, Memorial Sloan Kettering Cancer Center Associate Professor of Medicine, Weill Medical College of Cornell University

Jeffrey Gershenwald, M.D.

Professor, University of Texas, MD Anderson Cancer Center

Suzanne Topalian, M.D.

Professor, Surgery and Oncology, Johns Hopkins Medicine Director, Melanoma Program, Kimmel Cancer Center Associate Director, Bloomberg-Kimmel Institute for Cancer Immunotherapy



1101 New York Avenue, NW, Suite 620
Washington, DC 20005

<https://www.curemelanoma.org/>