The International Association for the Study of Lung Cancer (IASLC) is the only global organization solely dedicated to the study of lung cancer. Founded in 1974, the association’s membership includes more than 6,500 lung cancer specialists in over 100 countries. Encompassing a wide variety of disciplines, our members work to enhance the understanding of lung cancer among scientists, members of the medical community and the public.

Our mission is to:

› **EMBRACE THE STUDY** of the etiology, epidemiology, prevention, diagnosis, treatment and all other aspects of lung cancer and other thoracic malignancies

› **PROVIDE EDUCATION AND INFORMATION** about lung cancer and other thoracic malignancies to IASLC members, the medical community at large and the public

› **USE ALL AVAILABLE MEANS** to eliminate lung cancer and other thoracic malignancies as a health threat for the individual patient and throughout the world
President-Elect Tetsuya Mitsudomi; CEO Dave Mesko; President Giorgio V. Scagliotti
INTRODUCTION

The lung cancer field continues to rapidly evolve. In the last year alone, we’ve seen major therapeutic advances for small cell lung cancer (the first in 30 years) and stage III non-small cell lung cancer (NSCLC); the release of the results of the groundbreaking NELSON trial, showing a 61% reduction in lung cancer deaths in women and a 26% reduction in men through CT screening for high-risk individuals; and the rise of innovative technologies such as liquid biopsy.

As the world’s leading organization devoted to lung cancer and other thoracic malignancies, the IASLC continues to play a central role in educating practitioners, patients and the general public on these practice-changing trends. Through our conferences and meetings, scientific projects and research fellowships, over the past year, the IASLC has better equipped the global lung cancer community – from Guangzhou to Toronto – to drive research forward, understand the latest data and ultimately improve outcomes for patients worldwide.

But it is only with our members that this has been possible. The IASLC and its mission benefit enormously from our corporate partnerships, non-profit collaborations and, especially, the hard work and commitment of our members, leadership and staff. For evidence of this, look no further than former CEO and longtime member Dr. Fred Hirsch, who departed the IASLC in October 2018 after shepherding the association through five years of tremendous growth, change and development.

To put it simply, the IASLC draws its strength from the contributions, dedication and passion of many people. It is with this in mind we approach a critical new stage in the life of our association. In 2019, we will be recommitting ourselves to providing our members with a world class experience, making the necessary investments in technology and talent, and optimizing our approach to committee engagement so that the experience of serving will be even more meaningful.

Our focus on creating a premier member experience is one of the central components of the IASLC’s strategic planning process. This reorganization effort began approximately two years ago. It lays out a roadmap that aims to advance our leadership in the field and shows how we will explore new avenues of interest for our members. In 2019, that will involve us continuing our core activities, while simultaneously creating a new initiative in early screening and detection, beginning work on the ninth edition of the TNM lung cancer staging system and adding an important scientific meeting focusing exclusively on mesothelioma.

The IASLC has a rich history and has acted as a partner and a resource for the lung cancer community for nearly 45 years. Bolstered by the seismic advances occurring in the field, as well as the changes and investments the association is making internally, the IASLC is better positioned than ever to meet the needs of the researchers, clinicians, advocates and patients we serve. And as we move forward together, we commit ourselves to honoring the past, seizing the opportunities of the present and proactively planning for the benefit of our collective future.

Giorgio V. Scagliotti, MD, PhD
IASLC President

Dave Mesko, MBA
IASLC Chief Executive Officer
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WE ARE THE IASLC.

A Dedicated Global Organization

The IASLC is the only global organization solely dedicated to the study of lung cancer and other thoracic malignancies. Since 1974, the IASLC has promoted research into all aspects of lung and thoracic cancers, while encouraging worldwide prevention efforts.

MEMBERS INNOVATE TOGETHER

From the United States and the United Kingdom to Brazil and Ecuador, from Nigeria and Morocco to Indonesia and Iran, from China and South Korea to the Netherlands and Poland, the IASLC is 6,500 multidisciplinary lung cancer specialists from more than 100 countries. Our diverse membership is united in one goal: to conquer lung and other thoracic cancers worldwide. Our members get closer to that goal each day by collaborating globally and sharing their expertise and scientific findings.

IASLC educational events provide members with access to the latest groundbreaking research, helping them keep pace with the rapidly changing lung cancer field and allowing them to apply this knowledge in their practices. By offering professional and personal development opportunities, the IASLC also provides its members with pathways to advance in their profession and grow in their areas of interest. Extensive networking, mentoring and leadership opportunities set the association apart by delivering significant value to its members.

Member benefits:

› Access to the *Journal of Thoracic Oncology*, the premier journal in thoracic malignancies
› Multidisciplinary educational opportunities
› Discounted registration to meetings, including the annual World Conference on Lung Cancer
› Worldwide networking, mentoring and collaboration
› Eligibility for travel awards, committee participation and voting

To encourage multidisciplinary and geographic diversity, the IASLC offers special membership rates for advocates, nurses and allied health professionals, and for residents of developing countries. Fellow, student, resident and trainee, as well as patient/survivor and caregiver memberships, are complimentary.
The IASLC membership recognizes the importance of staying current on the latest scientific advances and understands how these efforts translate to providing better patient care. That's why, as a member-based organization, the IASLC places an emphasis on creating forums for lifelong learning and professional growth, while fostering member collaboration, networking and relationship-building.

With expert-driven, multidisciplinary content and an international scope, the IASLC’s educational offerings cover all aspects of lung cancers and thoracic malignancy management. Our annual World Conference on Lung Cancer, regional conferences, extensive webinar series, hands-on workshops and live-learning events serve as catalysts for the exchange of scientific research advances and clinical experiences among colleagues from all over the world.

The IASLC also employs multimedia learning strategies and provides resources to help members enhance their expertise by publishing textbooks, atlases, staging manuals, patient education materials and web-based tools.

2018 IASLC Educational Events

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<th>Event</th>
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<td>Fifth AACR-IASLC International Joint Conference on Lung Cancer Translational Science: From the Bench to the Clinic</td>
<td>January 8-11, 2018</td>
<td>San Diego, California, USA</td>
</tr>
<tr>
<td>IASLC 18th Lung Cancer Targeted Therapies Meeting</td>
<td>February 21-24, 2018</td>
<td>Santa Monica, California, USA</td>
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<td>IASLC-FDA Lung Cancer Neoadjuvant Meeting</td>
<td>March 1-2, 2018</td>
<td>Rockville, Maryland, USA</td>
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<td>IASLC Lung Cancer Immunotherapy Meeting</td>
<td>March 22-24, 2018</td>
<td>Madrid, Spain</td>
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<td>European Lung Cancer Congress</td>
<td>April 11-14, 2018</td>
<td>Geneva, Switzerland</td>
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<td>IASLC Africa Conference on Lung Cancer 2018</td>
<td>April 29-May 1, 2018</td>
<td>Tangier, Morocco</td>
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<td>IASLC Latin America Conference on Lung Cancer 2018</td>
<td>August 15-18, 2018</td>
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<tr>
<td>IASLC 2018 World Conference on Lung Cancer</td>
<td>September 23-26, 2018</td>
<td>Toronto, Ontario, Canada</td>
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<td>IASLC Asia Conference on Lung Cancer 2018</td>
<td>November 7-10, 2018</td>
<td>Guangzhou, China</td>
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THE IASLC 2018 WORLD CONFERENCE ON LUNG CANCER

Each year, thousands of attendees from every corner of the globe come together to discuss the latest developments in lung cancer and thoracic malignancy research, prevention, diagnosis, treatment and management at the annual IASLC World Conference on Lung Cancer, the association’s cornerstone event.

At the 2018 IASLC World Conference on Lung Cancer (WCLC) in Toronto, Canada, over the course of four days, attendees were treated to a robust, comprehensive scientific program encompassing cutting edge knowledge on subjects such as tumor biomarkers, clinical trials, targeted therapies and liquid biopsy to tobacco control, patient advocacy, immunotherapy and imaging.

Multidisciplinary educational sessions were developed to meet the expectations of the broad range of international delegates, with more than 500 global experts as invited speakers and over 2,000 abstract presentations. Other sessions included thought-provoking keynotes, expert panel discussions with lively debates, interactive grand rounds, informative hands-on workshops and stimulating dialogue based on 1,450 posters.

IASLC members presented groundbreaking results from practice-changing clinical trials at the Presidential Symposium, resulting in four simultaneous publications in the New England Journal of Medicine.

Finally, with a steadfast focus on patient advocacy, one plenary session, entitled “Patients First,” shared stories of hope from patients, caregivers and lung cancer experts, and considered new paths forward.
WCLC 2018 AT A GLANCE

**Attendees’ Primary Specialty**
- Medical Oncology: 34%
- Cancer Research/Science: 10%
- Thoracic Surgery: 8%
- Pulmonary Medicine: 6%
- Radiation Oncology: 5%
- Pathology: 4%
- Pharmacy: 3%
- Advocacy: 2%
- Biostatistics: 2%
- Diagnostic Radiology: 2%
- Nursing: 2%
- Hematology: 2%
- Other: 20%

**Most Ever**
- 7,443 delegates from 96 countries
- First time attendees: 34%
- Abstracts submitted: 2,005
- Invited speakers from 33 countries
- Travel award, mentorship, and academy program winners from 30 countries
- Twitter users sent 11,500+ tweets using #WCLC2018
- 36.3 million hashtag impressions
- Media mentions: 9,000+
- Media coverage in 50+ countries
EDUCATIONAL PROGRAMS
WORLD CONFERENCE ON LUNG CANCER

International Mentorship Program

Celebrating its fourth year in 2018, the IASLC International Mentorship Program further solidified the IASLC’s commitment to educating the next generation of lung cancer researchers. This rewarding program provides positive returns for both mentor and mentee, with the ultimate goal of forging lifelong collaboration.

To apply for the program, candidates submit an abstract for presentation at the IASLC World Conference on Lung Cancer (WCLC) and provide a personal statement on their career goals, describing how the award will assist them.

In 2018, the IASLC Career Development and Fellowship Committee reviewed more than 40 applications and selected 13 recipients. A Nursing and Allied Health Professional mentorship was added in 2018. Program participants were then matched with well-established scientific and clinical mentors from hospitals and research facilities in the region where the WCLC took place.

The awardees met daily with their mentors during the WCLC to discuss relevant conference presentations and strategies for getting the most out of the event. During the week following the conference, the mentees traveled to their mentors’ institutions to shadow their mentor, discuss their career path and interact with researchers, physicians and other members of multidisciplinary cancer care teams.

The 2018 mentees were from Argentina, Canada, China, India, Thailand, Turkey, Serbia and Uganda, and their disciplines included basic sciences/cancer research; medical, radiation and surgical oncology; pulmonology; pathology; radiation therapy; and thoracic surgery.

“Being a mentor provides a tremendous opportunity to learn about the challenges faced by oncologists in other countries. The IASLC should be commended for having a program like this as it benefits both mentor and mentee.”

Charles Butts, MD, FRCP (Mentor)
Cross Cancer Institute, Edmonton, Alberta, Canada

“You should move out of your comfort zone. If you do, you will always be learning. Go see other places and bring those ideas back to your country and patients. The mentorship program helped me do better for my patients.”

Kuruswamy Prasad, MD, PhD (Mentee)
Postgraduate Institute of Medical Education and Research, Chandigarh, India
IASLC Academy Program

This innovative program is designed to educate and ensure success for early career thoracic specialists and promote the multidisciplinary management of thoracic malignancies.

Launched at the IASLC 2017 World Conference on Lung Cancer (WCLC), this early career program is open to medical school graduates who have experience working as medical oncologists, radiation oncologists, pulmonologists, thoracic surgeons, pathologists or radiologists.

The unique structure is designed to provide continual guidance to participants throughout its two-year span and beyond. Academy members team up with senior multidisciplinary faculty from around the world.

Members attended two World Conferences on Lung Cancer where they honed their presentation skills in an interactive communications workshop, deepened their research knowledge with world-renowned scientists from academia and industry, and practiced scenarios interacting with specialists on a multidisciplinary cancer care team.

The inaugural class (2017–2018) consisted of 13 physicians from Australia, Canada, Egypt, Italy, Nepal, Portugal, Singapore and the United States.

For someone like me from Nepal, it would have been impossible to work with such a diverse group of colleagues and interact with leading experts in the field without a program like this.”

Deebya Mishra, MD
B.P. Koirala Institute of Health Sciences, Dharan, Nepal

“ The IASLC Academy provides a unique opportunity to facilitate networking and collaboration amongst early career physicians from all over the world and international faculty. Its results-oriented structure and the personalized career development guidance provided by faculty members ensure the program’s success.”

Christian Rolfo, MD, PhD, MBA
University of Maryland, Greenebaum Comprehensive Cancer Center
Maryland, USA
Travel Awards

The IASLC offers a variety of travel awards to help researchers from around the world attend the annual IASLC World Conference on Lung Cancer (WCLC). Applications are accepted each year, and the winners are determined by an international multidisciplinary review committee of IASLC members. In 2018, the IASLC provided Developing Nation Awards to 10 researchers from eight countries. Developing nations are defined by IASLC guidelines. The IASLC also granted Young Investigator Awards to 11 researchers from eight countries. Young investigators are defined as 35 years or younger. The IASLC recently expanded its travel program to include two dedicated awards for the Nursing and Allied Health fields. And finally, the IASLC provided travel awards to five Patient Advocates (see p. 37 for more information).

Each award winner submitted an abstract that was chosen for presentation at the WCLC. They worked on the research with a senior author who is an IASLC member. The award includes conference registration, hotel accommodation, travel expenses and a one-year IASLC membership.

Researchers from the following countries received Developing Nation Awards: Brazil, China, Cuba, India, Nigeria, Pakistan, Serbia and Ukraine. Those receiving Young Investigator Awards hailed from China, Italy, Mexico, Netherlands, Pakistan, Spain, United Kingdom and the United States. Finally, researchers from Brazil and Romania received Nursing and Allied Health Travel Awards.

Countries Represented:
"I’m actively working with key stakeholders – doctors, industry, the FDA and policymakers – to change the present and future for lung cancer patients in India. The WCLC is an opportunity to connect with other groups and learn how to implement initiatives in India."

Vivek Tomar, Patient Advocate & Caregiver, India

"As a Latina in medicine, you can feel alone; we are only 1.8% of physicians in the United States. But, at the WCLC, I had the opportunity to meet and network with medical oncologists, radiation oncologists and surgeons from Spain and Latin America. I no longer feel alone because I can see leaders like [IASLC board member] Dr. Enriqueta Felip making a difference in the world of lung cancer."

Narjust Duma, Hematology-Oncology Fellow, USA & Venezuela

“This organization really knows how to tap into each specialist and draw out the best ideas. Everybody has a voice. Nurses are incorporated into so many of the talks that I’ve been to and they want your opinions. I go home with a wealth of knowledge and resources that I can apply. The IASLC encourages nurses to step up and join the organization.”

Lavinia Dobrea, Nurse, USA
The first IASLC World Conference on Lung Cancer was held in 1978 in Hilton Head, South Carolina, USA, and drew 106 participants from 16 countries.
Developments in molecular biology in the 1980s and 1990s led to the discovery of molecular targets in lung and other cancers, making it possible to inhibit cancer growth by targeting specific genetic mutations. The IASLC held its first Targeted Therapies in Lung Cancer workshop in Marbella, Spain, in 2003. A few years later, it became an annual event.
The IASLC World Conference on Lung Cancer has been held 19 times in 11 countries on four continents. The following countries have hosted the event: Australia, Austria, Canada, Denmark, Ireland, Japan, Netherlands, South Korea, Spain, Switzerland and the United States. As of 2018, four countries have hosted more than once: Australia, Canada, Japan and the United States.
WEBINARS

In 2018, the IASLC held 25 webinars with more than 2,000 total participants. The diverse international faculty hailed from 10 different countries in Asia, Europe and North America.

Topics included:
- Biomarker directed therapy for small cell lung cancer
- EGFR-mutant lung cancer
- Genomic analysis of plasma-free DNA
- Liquid biopsy for non-small cell lung cancer
- Mesothelioma
- Molecular testing
- Neoadjuvant studies in lung cancer
- Novel approaches to non-small cell lung cancer
- Radiotherapy
- Squamous cell lung cancer
- Stereotactic Body Radiation Therapy
- Thymoma
IASLC LUNG CANCER NEWS

Launched in 2016, the IASLC Lung Cancer News is the IASLC’s bi-monthly educational newspaper. Aimed at addressing the complex intersection of diagnostics, screening, tobacco control, therapeutic intervention and survivorship that is at the heart of thoracic malignancy research, the Lung Cancer News aspires to present the most recent, noteworthy lung cancer-related information to a worldwide audience while also facilitating the professional development of those working in lung cancer.

IASLC CONNECT NEWSLETTER

The IASLC’s newest communications tool, IASLC Connect, is a monthly email newsletter designed to keep members and other interested parties up-to-date on the latest association happenings, upcoming events, member news, fellowship and research funding, progress and trends in the field of thoracic cancers, and more.
Research is a cornerstone of the IASLC. The IASLC Foundation supports the next generation of lung cancer researchers by providing fellowships and grants to the best and brightest physicians, scientists and other health professionals throughout the world.

IASLC research is made possible by the tremendous generosity of members, donors and corporate and nonprofit partners. Since 1999, 114 fellowships and grants worth $5 million have been awarded to researchers in 33 countries.

Lung cancer is a complex disease. A continually evolving understanding of the disease at every stage can help patients and caregivers navigate treatment options.

Research helps us better understand.
2018 RESEARCH AWARD WINNERS

**IASLC FOUNDATION FELLOWSHIPS**

**Anastasios Dimou, MD**  
University of Colorado  
USA

**Laura Mezquita, MD, PhD**  
Institut Gustave Roussy  
France

**Sanghyuk Song, MD**  
Kangwon National University Hospital  
South Korea

**IASLC FOUNDATION YOUNG INVESTIGATOR AWARDS**

**Benjamin Lok, MD**  
Princess Margaret Cancer Centre  
Canada

**John Charles Rotondo, PhD**  
University of Ferrara  
Italy

**Aaron Tan, PhD**  
National Cancer Centre  
Singapore

**IASLC JOINT RESEARCH AWARDS**

Prevent Cancer Foundation/IASLC Foundation Lung Cancer Fellowship  
**Atiqur Rahman, PhD**  
University of Newcastle  
Australia

Lung Cancer Foundation of America/IASLC Foundation Lori Monroe Scholarship in Translational Lung Cancer Research  
**Alice Berger, PhD**  
University of Washington  
USA

Christine Lovly, MD, PhD  
Vanderbilt University School of Medicine  
USA

Lung Cancer Foundation of America/Bristol-Myers Squibb/IASLC Foundation Young Investigator Award  
**Kathryn Beckermann, MD, PhD**  
Vanderbilt University School of Medicine  
USA

**Zoltan Lohinai, MD, PhD**  
National Koranyi Institute of Pulmonology  
Hungary

Free ME from Lung Cancer/IASLC Foundation Joint Fellowship Award for the Early Detection of Lung Cancer  
**Eva Koziolek, PhD**  
University of California Los Angeles  
USA

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“The support of the IASLC has allowed me to pursue an ambitious genome sequencing project. It is allowing our lab to launch a unique collaboration with the Women’s Health Initiative to better understand the genomic features of lung cancer in women who have never smoked. Previous genome studies either include a small number of never-smokers or do not sequence the entire genome, meaning that we have probably missed many important mutations that contribute to disease in never-smokers and that might be targeted for therapeutic benefit.”

**Alice Berger, PhD, USA**  
2018 LCFA/IASLC research award recipient

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“The IASLC Young Investigator Award has clearly enhanced my academic career. To be the recipient of this prestigious international award has opened new doors and opportunities for me. This award also gives me added confidence to continue on my mission to make strides for our lung cancer patients. It gives me great pride, joy and purpose to work alongside the dedicated members of the IASLC and the organization itself to fulfill this worthy mission.”

**Benjamin Lok, MD, Canada**  
2018 IASLC Foundation Young Investigator Award recipient
BLUEPRINT PROJECT CONTINUES TO DEMONSTRATE PROGRESS

While developments in lung cancer immunotherapy continue to show promise, PD-L1 protein expression, a tumor biomarker, can help doctors surmise which patients are more likely to respond. But evaluating PD-L1 status remains a clinical challenge, and patient selection is paramount, as only about 20 to 30 percent of patients with advanced non-small cell lung cancer will benefit from immunotherapy.

A PD-L1 test involves sending a piece of tumor tissue to a lab for analysis and helps doctors determine whether a patient is likely to benefit from cancer drugs known as immune checkpoint inhibitors. With clinicians using various assessments, or assays, to detect PD-L1, confusion remains regarding the interchangeability, as each was developed as a predictive biomarker for its respective immunotherapeutic.

To address this question, the IASLC Pathology Panel, together with industry partners, launched a clinical and analytical comparative study of the performance of the various assays beginning in 2016. In 2018, Blueprint entered Phase IIb. Researchers used PD-L1 scores to compare the three predictive assays, but in this phase, used large tumor resection blocks, small biopsy samples and fine needle aspirate cell blocks prepared from the same tumor.

The result? The Blueprint Project series has provided assay comparability data for clinical use of PD-L1 testing. Blueprint Phase IIb largely reaffirms the earlier data around assay performance and inter-observer variability. Finally, matched samples (fine-needle aspirate, biopsy, large block) from the same tumor show good comparability between the tumor proportion scores (the percentage of viable tumor cells showing partial or complete membrane staining).
PREPARING FOR THE NINTH EDITION OF THE TNM STAGING SYSTEM

For the past two decades, the IASLC’s Staging and Prognostic Factors Committee (SPFC) has investigated and improved the Tumor Node Metastasis (TNM) system for lung, mesothelioma, esophageal and thymic tumors. The IASLC staging project has provided evidence-based recommendations to governing organizations. These collaborative efforts have enhanced the TNM system and improved overall patient care worldwide.

In 2018, the SPFC began working toward the development of its recommendations for the ninth edition of the TNM Classification, scheduled to be published in 2024. As part of this effort, the SPFC launched an international call for data contribution, which is crucial for the development of the upcoming edition.

The ninth edition will incorporate anatomical data as well as molecular mutations. These additions will improve prognosis and lead to better personalized therapy for patients.

With the help of the international community, the IASLC staging project will continue to guide cancer care teams and treatment strategies while offering opportunities to collaborate with colleagues and share patient outcomes.
THE IASLC AIMS TO INCREASE EARLY DETECTION OF LUNG CANCER

Early detection is the key to curing or successfully managing many cancers. For lung cancer, low-dose computed tomography (LDCT) screening can decrease mortality by 20 to 61 percent among high-risk populations, such as former and current smokers. Unfortunately, only two percent of the patients eligible for screening in the United States were tested in 2016. A possible roadblock to these screenings is the lack of available tools for the health care provider to evaluate lung LDCT images.

In an effort to improve early detection, the IASLC created the Early Lung Imaging Confederation (ELIC). From this pilot project came a beta version of a secure, globally-accessible software that can collect and analyze CT images and biomedical data from around the world.

Working with international investigators and clinicians, the IASLC is building a repository of de-identified CT images and data, which are then populated into spoke servers in various countries. Unveiled at the 2018 World Conference on Lung Cancer in Toronto, the ELIC pilot demonstration ran on a central digital hub with 10 spoke servers and showed that ELIC can analyze collections of globally-distributed images and data.

ELIC stands to become an important global resource for lung cancer researchers and care teams. The collection of images and data have the potential to help build better analysis and detection tools and create better risk models, as well as being a global platform for standardized data and quality conformance. By collecting these images across institutions and throughout the world, researchers who might only have access to a small number of CT images in their centers can examine thousands of images and utilize software analysis tools to greatly expand their knowledge base.

As the IASLC moves forward with the ELIC project, the association will continue to demonstrate what global collaboration, cutting edge science and technological advancement can achieve.
THE ROLE OF NEOADJUVANT THERAPY IN LUNG CANCER

For years, cancer care teams have chosen to implement neoadjuvant therapy, or delivery of a therapy before the main treatment, which most often is surgery. However, the role of immunotherapy and targeted therapy in the neoadjuvant context has yet to be defined in lung cancer. With the success of these regimens for advanced stage patients, there is now a renewed interest in studying these potentially powerful therapies in the neoadjuvant setting.

In March 2018, the IASLC and the U.S. Food and Drug Administration (FDA) held a workshop for multidisciplinary experts to discuss neoadjuvant strategies, new modalities, lessons learned from neoadjuvant efforts in other cancers and standardization of trial design and outcomes. By uniting key stakeholders involved in clinical research and trial design, the IASLC and the FDA aimed to leverage their collective expertise to improve patient care and expedite drug development for patients with lung cancer.

The joint workshop resulted in a published review article in the IASLC’s *Journal of Thoracic Oncology*, providing guidance on the standardization of pathological evaluation and outlining best practices for lung cancer trials. The article discusses everything from the advantages of neoadjuvant therapy and suggested imaging techniques to pathologic response assessments and surgical considerations. Ultimately, the attendees concluded that neoadjuvant therapy provides unique opportunities to enhance curability and accelerate the development of new agents for lung cancer.
Best Practices for Diagnostic Immunohistochemistry

Since the release of the 2015 World Health Organization Classification of Lung Tumors, immunohistochemistry (IHC) has figured prominently in lung cancer diagnoses. The use of IHC has improved diagnostic accuracy in the classification of lung carcinoma, but the interpretation of IHC results remains challenging in some instances. After receiving questions on practical application and interpretation of IHC in lung cancer diagnoses, the IASLC Pathology Committee summarized best practice recommendations for diagnostic IHC in lung cancer, addressing key issues and covering common diagnostic situations in daily clinical practice in 2018. The article provides answers to key questions about the use of IHC in lung cancer diagnoses, representing viewpoints of thoracic pathology experts that can help practitioners appropriately use IHC in diagnostic pathology.

Statement: Cancer Screening with Low-Dose Computed Tomography

In 2018, the IASLC Prevention, Screening and Early Detection Committee issued a statement encouraging international leaders, governments, health care systems and other stakeholders to implement global lung cancer screening programs with low-dose computed tomography (LDCT). The recommendation is based on evidence arising from two randomized trials affirming that LDCT screening in high-risk individuals can significantly reduce lung cancer mortality. Due to current challenges in lung cancer screening, including lack of familiarity about the needs for LDCT by the primary care community and limitations with national health policies and systems, the IASLC plans to serve as a resource to help with global implementation of these screening services.

Liquid Biopsy for Advanced Non-Small Cell Lung Cancer (NSCLC)

The IASLC convened a multidisciplinary panel of thoracic oncology experts in 2018 to create recommendations for using liquid biopsy for molecular analysis to guide the clinical management of non-small cell lung cancer (NSCLC). Liquid biopsy, which utilizes blood instead of tumor samples, is a powerful tool with considerable potential to improve clinical outcomes across multiple cancer types. Recently, an increasing number of innovative platforms have been developed that improve not only the reliability of the molecular analysis, but also the number of tests performed on a single sample. The IASLC released a statement paper concluding that liquid biopsy has significant potential to improve patient care and recommended immediate implementation in a number of therapeutic settings relevant to NSCLC.
Consensus Report: Current and Future Management of Mesothelioma

The IASLC Mesothelioma Task Force, together with the National Cancer Institute (NCI) Thoracic Malignancy Steering Committee and the Mesothelioma Applied Research Foundation, published a 2018 consensus report on the current and future management of mesothelioma. The paper grew out of the 2017 Mesothelioma Clinical Trials Planning Meeting, which brought together leading academicians, clinicians, scientists and the U.S. Food and Drug Administration to focus on the development of clinical trials for patients diagnosed with malignant pleural mesothelioma. Considering the discovery of new cancer targets affecting the clinical development of novel agents and immunotherapies in malignant mesothelioma, the meeting attendees aimed to create a consensus on at least two or three practice-changing multimodality clinical trials to be conducted through NCI's National Clinical Trials Network.

Molecular Testing Guideline

Three leading medical societies – the College of American Pathologists (CAP), the IASLC and the Association for Molecular Pathology (AMP) – released their updated evidence-based guideline for molecular testing in lung cancer in 2018.

The Updated Molecular Testing Guideline for the Selection of Lung Cancer Patients for Treatment with Targeted Tyrosine Kinase Inhibitors strengthens or reaffirms the majority of the 2013 recommendations for patients with lung adenocarcinoma while also recommending testing on some new genes. Identifying patients whose tumors harbor specific molecular alternations leads to more personalized treatment, which may improve survival and quality of life.
THE JOURNAL OF THORACIC ONCOLOGY (JTO)

The Journal of Thoracic Oncology (JTO), the IASLC’s official journal, is the primary educational and informational publication for topics relevant to the prevention, detection, diagnosis and treatment of all thoracic malignancies. The JTO emphasizes a multidisciplinary approach and includes original research reviews and opinion pieces. The audience includes epidemiologists, medical oncologists, radiation oncologists, thoracic surgeons, pulmonologists, radiologists, pathologists, nuclear medicine physicians and research scientists with a special interest in thoracic oncology.

The 2017 Impact Factor was 10.336, up from 6.595 in 2016. The JTO ranked 11th out of 222 for oncology and fourth out of 59 for respiratory system subject matter categories in the 2017 Journal Citation Reports.

Promotion by the IASLC and JTO authors was expanded during 2018. The IASLC distributed multiple social media posts and select press releases of JTO articles. Authors could promote their own work via a personal article link for their published articles. This link provides free access to an article for 50 days. It also allows authors to email the link to co-authors and colleagues and post the link on personal webpages and social media.
IASLC 2018 AWARD WINNERS

Distinguished Award Winners

These prestigious, long-standing awards recognize lifetime achievement in specific areas of lung cancer research. Each scientist received their award at the opening ceremony of the IASLC 2018 World Conference on Lung Cancer.

PAUL A. BUNN, JR. SCIENTIFIC AWARD

Charles Swanton, PhD, FRCP, United Kingdom
Director, CRUK Lung Cancer Centre of Excellence
Senior Group Leader, The Francis Crick Institute,
London, UK

JOSEPH W. CULLEN PREVENTION/EARLY DETECTION AWARD

Fadlo Khuri, MD, FACP, Lebanon
President, American University of Beirut, Lebanon
Professor, Department of Hematology and Medical Oncology, Emory University School of Medicine,
Atlanta, Georgia, USA

Nise Yamaguchi, MD, PhD, Brazil
Clinical Director, Instituto Avancos de Medicina,
Sao Paolo, Brazil
Senior Scientist, International Prevention Research Institute, Lyon, France
Co-founder, World Cancer Alliance, Lyon, France

MARY J. MATTHEWS PATHOLOGY/TRANSLATIONAL RESEARCH AWARD

Ignacio Wistuba, MD, USA
Chair, Department of Translational Molecular Pathology, Division of Pathology/Lab Medicine and Professor,
Department of Thoracic/Head and Neck Medical Oncology, Division of Cancer Medicine, University of Texas
MD Anderson Cancer Center, Houston, Texas, USA

MERIT AWARD

Francoise Mornex, MD, PhD, France
Professor, Oncology, University Claude Bernard, Lyon, France
Past Chair, Radiation Oncology Department, Centre Hospitalier Lyon-Sud, France
Lectureship Award Winners
At the IASLC 2018 World Conference on Lung Cancer, leaders in the field were invited to give a lecture on their discipline.

Adi F. Gazdar Lectureship Award for Translational Research
Matthew Meyerson, MD, PhD, USA
Lecture title: Genomic Alterations in Human Lung Cancers

Robert J. Ginsberg Lectureship Award for Surgery
Valerie W. Rusch, MD, FACS, USA
Lecture title: Honoring the Tradition of Surgically-Based Clinical Trials

Heine H. Hansen Lectureship Award for Small Cell Lung Cancer
Charles M. Rudin, MD, PhD, USA
Lecture title: New Opportunities in Small Cell Lung Cancer

Daniel C. Idhe Lectureship Award for Medical Oncology
David P. Carbone, MD, PhD, USA
Lecture title: The Intersection of Science and Medicine

Clifton F. Mountain Lectureship Award for Staging
Johan Vansteenkiste, MD, PhD, Belgium
Lecture title: Is There Still a Stage for Improvements in Staging?

Tsuguo Naruke Lectureship Award for Surgery
Hisao Asamura, MD, Japan
Lecture title: The Value of the Naruke Lymph Node Chart

IASLC Lectureship Award for Nursing and Allied Health
Kimberly Rohan, APN, USA
Lecture title: The Right Hand – The Art of Collaboration

IASLC Lectureship Award for Radiation Oncology
Hak Choy, MD, USA
Lecture title: Defining the Role of Radiotherapy for Lung Cancer – Past, Present and Future

Cancer Care Team Award
The IASLC introduced the Cancer Care Team Award in 2017 with the goal of recognizing multidisciplinary teams providing outstanding lung cancer patient care throughout the world. What makes the award unique is that care teams are nominated by patients and/or advocates.

More than 60 entries were evaluated by an international multidisciplinary panel. A finalist was selected from each region, and from those finalists, an overall winner was chosen. A team of physicians, nurses and allied health professionals from Nucleo de Oncologia da Bahia in Brazil received their award during the IASLC 2018 World Conference on Lung Cancer.
Patient advocacy is an emergent area for the IASLC. With the goal of promoting, facilitating and supporting successful interaction between patients, advocates, physicians and researchers, the IASLC’s role in patient advocacy has grown steadily each year since 2013.

With a steadfast focus on increasing the presence, expertise and participation of patients/survivors and advocates on a global level, the IASLC provided assistance in 2018 for advocates to travel to key conferences and events, including the IASLC World Conference on Lung Cancer in Toronto and the Lung Cancer SPORE workshop at UT Southwestern in Dallas, Texas, USA.

**Lung Cancer Awareness Month**

Lung Cancer Awareness Month (LCAM) began in 1995 as a day of recognition and has grown into a month-long, worldwide initiative designed to highlight the leading cause of cancer death globally. Since 2016, the IASLC has facilitated LCAM through the Lung Cancer Awareness Month Coalition, an international group of research and advocacy organizations working to improve outcomes for lung cancer patients across the globe. By raising awareness of the disease each November, the Coalition aims to increase research funding, improve patient care and reduce mortality.

The Coalition’s main objectives are to educate patients/survivors, caregivers and care teams on a global level and to reduce mortality by communicating scientific research advancements.

In 2018, worldwide participation increased, with Coalition membership growing to 39 leading research and advocacy organizations from all corners of the world. The joint public awareness campaign, which all Coalition partners supported, included educating the public on four main focus areas:

- Screening and early detection
- Precision medicine
- Clinical trials
- Advocacy

To that end, the Coalition produced patient-provider cards. These handy, colorful and engaging resources are designed to provide patients and their providers with introductory information to promote further discussion, prompt supplemental research and enable informed choices regarding care plans.

The patient-provider cards are downloadable in seven languages. More information on LCAM and the patient-provider cards can be found at [LCAM.org](http://LCAM.org).

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"I can’t even describe how much I learned and how valuable this knowledge and networking opportunity is to my work as a lung cancer patient advocate. The more I know, the better I can understand the concepts coming forward and provide relevant and meaningful patient-focused comments and feedback."

Judy Johnson, Patient Advocate, USA, who received assistance from the IASLC to attend the Lung Cancer SPORE workshop.
2018 LCAM Partners

- ALK Positive
- American Lung Association/LUNGFORCE
- American Lung Association Colorado
- Bonnie J. Addario Lung Cancer Foundation
- Caring Ambassadors
- Chris Draft Family Foundation
- Citizens for Radioactive Radon Reduction
- Clifton Mountain Foundation
- EGFR Resisters
- Free ME From Lung Cancer
- Free to Breathe
- GRACE
- IASLC
- IASLC Foundation
- Israel Lung Cancer Foundation
- International Thoracic Oncology Nursing Forum (ITONF)
- LiveLung/Dusty Joy Foundation
- Lung Cancer Alliance
- Lung Cancer Europe/WALCE (Italy)
- Lung Cancer Foundation of America
- Lung Cancer Initiative of North Carolina
- Lung Cancer Research Foundation
- Lung Foundation Australia
- LUNGevity
- Marie Keating Foundation (Ireland)
- Move Against Cancer Africa (Nigeria)
- National Lung Cancer Forum for Nurses (NLCFN)
- NEFES (Turkey)
- Institueto Oncoguia (Brazil)
- Patient Power
- Pembe Hanım (Turkey)
- Polish Lung Cancer Group (Poland)
- Rexanna Foundation
- Ride Hard. Breathe Easy.
- SWOG Cancer Research Network
- University of Colorado Cancer Center
- University of Maryland
- Upstage Lung Cancer

“\nThe IASLC World Conference on Lung Cancer is the spot. The place to be. It gives you a strong message that your work matters. If you are an allied health professional, you know you are supported.\n”

Csaba Dege, Psychologist, Social Worker, Researcher and Advocate, Romania
Patient Advocacy Travel Awards

Each year the IASLC provides patient advocates with the opportunity to travel to the World Conference on Lung Cancer (WCLC). Designed to increase the connection between the IASLC and the patient advocacy community, individuals (including survivors) and those who work for advocacy organizations, are encouraged to apply for these awards. In 2018, the IASLC awarded five patient advocates from India, Nigeria and the United States. They received conference registration, hotel accommodation, travel expenses and a one-year IASLC membership.

Travel award winners Caleb Egwuenu of Nigeria and Erin Sarauer of the United States at WCLC 2018 in Toronto.

The IASLC provides a really important opportunity to learn what’s happening in the global community – to know there is a huge community of people who are all working toward the same goal. Early in my career I was the only one at my institution focused in lung cancer and yet I was able to find mentors through the IALSC and those relationships continue today.”

Heather Wakelee, Medical Oncologist, USA

“My favorite part of being an IASLC member is having the ability to stay updated on important advances in lung cancer research through attending conferences and reading articles in the Journal of Thoracic Oncology. As a lung cancer survivor, I love that the IASLC offers free conference attendance and a free journal subscription to patients like myself.”

IVY ELKINS: PATIENT ADVOCATE, USA
The IASLC is governed by a multidisciplinary, geographically diverse board of directors. Supported by a talented staff with an impressive range of professional backgrounds, the IASLC’s board members promote ongoing organizational growth through strategic guidance and operational and financial oversight. Elections are held every two years and board terms are for four years.

Together, the IASLC’s board and staff are committed to core values of leadership, research, innovation and educational excellence.

The IASLC’s worldwide headquarters is located in Denver, Colorado, USA.

"The committees are a good way of being involved and of being in contact with a broad group of people from various disciplines. It’s very important to have input to the IASLC from representatives from different parts of the globe.”

THOMAS JOHN, MEDICAL ONCOLOGIST, AUSTRALIA

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Jacinta Wiens, Associate Director of Scientific Affairs
Kelsey Wood, Membership Manager
Murry Wynes, Senior Director of Scientific Affairs
Kexin Yu, Accountant

IASLC COMMITTEE LEADERSHIP
IASLC committees assist with the development of new programs and initiatives. Committee members contribute their specialized skills and talents to help influence the work of the organization by developing educational content; shaping the association’s messaging; planning global and regional scientific meetings; contributing to publications authored by the IASLC; providing strategic insight; and more.

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The IASLC would like to thank its top sponsors for their generous support.
Established in 2014, the IASLC Foundation works to accelerate the pace of lung cancer and thoracic malignancy research by assisting the IASLC’s efforts toward reducing lung cancer mortality worldwide.

Every dollar donated to the Foundation supports lung cancer research by funding physicians and scientists through fellowships, young investigator awards and partnership grants. The Foundation also recognized outstanding cancer care teams globally by awarding the Cancer Care Team Award.

In 2018, the Foundation awarded 12 fellowships and young investigator grants totaling more than $1.2 million dollars. To date, the IASLC Foundation has given nearly $5 million to lung cancer research.

The Foundation has continued to grow, mature and expand. In 2018, the Foundation took steps to transition to a 501(c)(3) public charity. A rebranding effort is underway and will be revealed in late 2019.

In 2018, the Foundation united with like-minded organizations to build partnerships and award joint grants that will yield an even greater impact.

"The IASLC award has been greatly impactful in my career. It’s fueled my research on resistance to targeted therapies among lung cancer patients with activating EGFR mutations. I chose a career in lung cancer research because lung cancer is the leading cause of cancer related deaths, a significant burden for hundreds of thousands of people and their families, and because I believe that the scientific community is on the brink of major advances in the field."

Anastasios Dimou, MD, USA & Greece
2018 IASLC Foundation Fellowship Award recipient
To date, the IASLC Foundation and the Lung Cancer Foundation of America have partnered to fund nearly $4 million in research grants.
Dr. Gazdar was the largest contributor to the IASLC Foundation. In 2013, he donated $250,000 to strengthen the fellowship program.

"The IASLC research grants that are targeted at people early in their career really do an amazing job of introducing you to so many important people in the field. You get to sit at the table with the smartest people in lung cancer and pick their brain. I think without this grant I was never going to get to that table. I am incredibly grateful for my grant from the IASLC. It did so much for my career."

Jessica Donington, Thoracic Surgeon, USA
IASLC research award recipient

Remembering Dr. Adi Gazdar (1937-2018)

A true giant in the field of lung cancer research, Adi Gazdar was a remarkable friend to the IASLC. He was a groundbreaking pathologist, a cell line pioneer, an inspiring mentor and a brilliant collaborator. An active IASLC member for more than 35 years, Dr. Gazdar served on the board of directors and played a critical role on the IASLC Pathology Committee, helping set the standards for the pathological classification of lung cancers worldwide.

An exceptional mentor, Dr. Gazdar trained hundreds of fellows in lung cancer biology and pathology and touched many others through his work. He was also a generous contributor to the IASLC Foundation – helping ensure the education of the next generation of lung cancer researchers.

The IASLC mourns the loss of this remarkable researcher and honors him for his tremendous contributions both to our organization and to the field of lung cancer. He will be greatly missed.
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