



FORBECK FOUNDATION

W. KIMRYN RATHMELL, MD, PHD, MMHC • CEO THE JAMES AND SOLOVE RESEARCH INSTITUTE
SCIENTIFIC ADVISORY BOARD CHAIR



It is an incredible honor to be writing to you as the chair of the William Guy Forbeck Foundation Scientific Advisory Board. I have known John Kemshead for as long as I have known this organization, and his shoes to fill are legendary.

When I first encountered the Foundation, I was literally just starting my lab. The opportunity to present my thoughts as an equal to luminaries I had met—Bill Kaelin, Bill Sellers, Charles Sawyers, and more that I hadn't—Greg Verdine, Gary Gilliland, Sara Courtneidge, Marc Vidal, Todd Golub, David Fisher, Andrei Gudkov, and John Maris. It was comforting to have three other new investigators—Tony Letai, Nabeel Bardeesy, and Eddie Attiyeh—we propped each other up, gave each other the ability to tap into bravery that wasn't always handy.

At that meeting, we discussed the concept of druggable and undruggable targets extensively and were learning how pervasive mutations in the RAS pathway were for driving cancers, and we even talked about HIF as a particularly difficult target. The concept that some of these pathways we were learning about would fall into “undruggable” categories was pervasive for the next decade, until foundational work from these labs and others broke open the floodgates. Today HIF2 inhibitors are widely used in the treatment of patients with metastatic kidney cancer and have revolutionized the life experience of patients with VHL syndrome—harboring familial mutations that make their risk for tumors extraordinarily high, but now controlled by a daily pill. The big story of the day is the journey from where this meeting revealed the state of the science in 2005, to now 21 years later where effective drugs targeting RAS are impacting the outcomes of the toughest tumors—pancreatic and lung. RAS is the most commonly mutated oncogene in cancer. This breakthrough, which happened because of decades of foundational science and also of scientists willing to be curious, to dissect and debate, is poised to be a revolution of a larger scale than Gleevec for chronic myelogenous leukemia.

THE THEME OF THE DAY IS THAT NOTHING IS IMPOSSIBLE.

While we can see we are at a crossroads, there remains much work to do. I run a 500+ bed cancer hospital that is full every day. The face of cancer has changed, but the burden of cancer remains significant. Cancer is rising in younger populations at the same time that our population is aging and increasing risk for cancer, we are nearing 20 million survivors in the U.S., creating new ways to think about risk assessment and survivorship; treatments are focusing on minimizing side effects, and increasingly we can think about prevention and early detection in spaces previously not thought possible.

The foundation of the Forbeck meeting structures is that we bring thought leaders together and ask them to be curious. We ask them to think differently about each other's science and their own. We ask them to create for a few days a common language, concept, and identity of a scientific area they have thought about for a long time.

I love the essay of the Fox and the Hedgehog. Coined by Isaiah Berlin in 1953, he said “The fox knows many things, but the hedgehog knows one big thing,” referring to two ways of thinking that are either deep and focused (a Hedgehog) or broad and unifying (a Fox). I think of Forbeck Forums as bringing a lot of mostly Hedgehogs together and saying, for the next three days, we are going to understand this problem like a Fox.

The other inspirational component that came from that meeting was when George and Jennifer Forbeck, along with John, brought the scholars at that 2005 meeting down to their basement to develop a concept around scholar development. Jamie was wanting to take on a bigger role in the organization and saw the scholars as a ripe element. She was right. Our class of scholars, with the ones who came before and followed, continued to challenge each other to be Hedgehogs who could come together as Foxes to solve problems. **WE ENCOURAGED EACH OTHER TO BE CURIOUS AND TO BE BRAVE. IT MADE A DIFFERENCE, AND NOW THAT I'M MORE SEASONED, I CAN SEE THE DIFFERENCE IN AN INVESTIGATOR WHO HAS BEEN A FORBECK SCHOLAR.**

As the cancer research field launches into this new era, anything is possible. I'm glad the Forbeck Foundation remains a steadfast program of excellence to remind us all how to bring our immense experience together to create something bigger. The future of cancer research is bright because the Forbeck Foundation knows nothing is impossible.

2026 SPRING FORUMS RECAP



INSIDE TWO FORBECK FORUMS:

CANCER'S SHIFTING IDENTITY AND THE BIOLOGY OF AGING

This spring, the William Guy Forbeck Research Foundation convened two of its signature small-group Forums, each bringing together leading scientists to wrestle with questions at the frontier of cancer research.

CANCER AND AGING: CONVERGENT AND OPPOSING FORCES

From March 8–11 at the Asilomar Conference Grounds in Pacific Grove, CA, a Forum tackled a fundamental question: why aging is the single strongest risk factor for cancer, outweighing obesity, smoking, and most inherited genetic syndromes.

Chaired by Alejo Efeyan, PhD (Centro Nacional de Investigaciones Oncológicas) and Nada Y. Kalaany, PhD (Harvard Medical School), the Forum brought together researchers spanning genetics, epigenetics, immunology, and metabolism to explore how aging and cancer are mechanistically intertwined. Discussion ranged

across the effects of an aging immune system on cancer's ability to take hold and evade treatment, how aging tissue responds differently to injury and abnormal cells, and the puzzle of why some cancers barely correlate with age at all while others rise sharply. Participants also probed a striking epidemiological curiosity: **CENTENARIANS APPEAR TO CARRY UNUSUAL PROTECTION AGAINST CANCER**, raising the question of whether that resistance could be understood and eventually replicated.

Organizers noted that studying aging and cancer together has historically been hampered by a shortage of models suited to both processes at once, but new tools in single-cell and spatial biology are finally making it possible to pursue the two in tandem. Forbeck Scholars Claire Han, PhD, DNP, APRN-CNP (Ohio State University) and Eric Sun, PhD (Stanford University) joined the discussions alongside 12 senior investigators.

CAUSES AND CONSEQUENCES OF CELLULAR PLASTICITY IN CANCER

Two months later, from May 3–6 in Princeton, NJ, 17 researchers gathered under the chairmanship of Cory Abate-Shen, PhD (Columbia University Irving Medical Center) and Ben Stanger, MD, PhD (University of Pennsylvania) to tackle one of cancer biology's most confounding phenomena: cellular plasticity, the process by which cancer cells change their identity in ways that drive tumor initiation, resistance to therapy, and metastasis.

Plasticity has become a hot topic in cancer research in recent years, formally recognized as a "Hallmark of Cancer" in 2022 and named a Cancer Grand Challenge. Yet the molecular logic behind it remains poorly understood: some cancer cells revert to programs reminiscent of their embryonic origins, while others shift identity in ways scientists still can't fully explain.

The Forum drew experts working across melanoma, prostate, lung, colorectal, liver, and pancreatic cancers, along with clinicians and computational biologists studying the problem from different angles. **A RECURRING THEME EMERGED: DESPITE WORKING IN ENTIRELY DIFFERENT TUMOR TYPES, PARTICIPANTS KEPT RECOGNIZING THE SAME UNDERLYING PATTERNS IN EACH OTHER'S DATA.** That convergence, organizers said, points toward shared principles of plasticity that could eventually be exploited therapeutically. The meeting also paired two Forbeck Scholars, Rodrigo Romero, PhD (Memorial Sloan Kettering) and Clint Stalneck, PhD (University of North Carolina), with senior investigators for the kind of cross-generational exchange the Forums are designed to foster.

SHARED PURPOSE

Though the two forums addressed different questions, both reflect the Foundation's model: assembling a small, interdisciplinary group of scientists who might not otherwise collaborate and giving them the time and space for the kind of unscripted discussion that can reshape a field. Both meetings are available as podcast previews featuring the Forum chairs, offering a closer look at the science driving each conversation.

WELCOME NEW SAB MEMBERS

The Forbeck Foundation's Scientific Advisory Board has always been the engine behind our Forums—a small, rotating group of distinguished scientific minds who shape which questions we tackle and who's in the room to tackle them. This fall, we're saying a heartfelt thank you to two members who have shaped that mission for decades.

DR. JOHN T. KEMSHEAD HAS BEEN PART OF THE FORBECK STORY SINCE THE VERY BEGINNING, JOINING THE FOUNDATION IN 1985.

Over the following four decades, he attended numerous Forums, mentored generations of Scholars at our Retreats, and helped define what makes a Forbeck meeting different from any other scientific gathering. Dr. Sara A. Courtneidge joined the SAB in 2009 and has spent more than fifteen years lending her expertise in cancer cell biology and metastasis to guide our Forum topics and attendees, all while remaining one of the Foundation's most steadfast supporters. We are endlessly grateful for their years of generosity, insight, and friendship, and the Forbeck Foundation family they helped build along the way.

As we thank Drs. Kemshead and Courtneidge, we're equally excited to welcome three remarkable new voices to the Scientific Advisory Board: Dr. Douglas Green of St. Jude Children's Research Hospital; Dr. Jay F. Sarthy of Seattle Children's Hospital; and Dr. Ting Wang of WashU Medicine. Each brings a distinct area of expertise, and together, they carry the same spirit of curiosity and collaboration that has always defined the Forbeck SAB. To learn more about Foundation Leadership, including our full roster of Scientific Advisory Board members, please visit forbeckfoundation.org/leadership.



DOUGLAS GREEN, PHD

ST. JUDE CHILDREN'S RESEARCH HOSPITAL

Dr. Doug Green has spent his career asking one of biology's biggest questions: how do cells decide between life and death? As Co-Leader of the Cancer Biology Program and the Peter C. Doherty Endowed Chair of Immunology at St. Jude, he's published countless papers and earned election to the National Academy of Sciences in 2020. But what really sets Doug apart is how he leads. He's built a research community rooted in collaboration and mentorship, bringing the same creativity to the lab that he brings to his life outside it as a musician, blogger, and magician.



JAY F. SARTHY, MD, PHD

SEATTLE CHILDREN'S HOSPITAL

Dr. Jay Sarthy works at the intersection of two of the hardest parts of pediatric oncology: caring for children through bone marrow transplants and unraveling the genetic mysteries behind their disease. As an Attending Physician at Seattle Children's and an Assistant Professor at the University of Washington School of Medicine, he treats kids with blood cancers and rare genetic conditions like telomere syndromes, while his research digs into pediatric cancer epigenetics, or how genes go off script and let cancer take hold. That dual view, bedside and bench, drives his search for better treatments.



TING WANG, PHD

WASHINGTON UNIVERSITY IN ST. LOUIS

Dr. Ting Wang's path took him from Peking University to Washington University in St. Louis, where he now holds the inaugural Sanford C. and Karen P. Loewentheil Distinguished Professorship and leads the Department of Genetics. He's internationally recognized for showing how so-called "junk DNA," the transposable elements once dismissed as genomic filler, actually shapes gene regulation and can drive cancer when it goes wrong. His lab built tools used by scientists worldwide, including the WashU Epigenome Browser, and he currently directs several major national genomics initiatives, from the Human Pangenome Reference Consortium to the SMAHT Network. Somehow, he also finds time to lead nearly half a dozen major data centers at once.



AGUIRRE DE CUBAS, PHD • ASSISTANT PROF., MEDICAL UNIVERSITY OF SOUTH CAROLINA
2021 FORBECK SCHOLAR

A BREAKTHROUGH IN KIDNEY CANCER

It has been an exciting few weeks for our lab. We recently published a study in *Cancer Research* demonstrating that kidney cancers harboring mutations in SETD2, one of the most frequently altered genes in clear cell renal cell carcinoma, become highly dependent on the anti-apoptotic protein BCL-xL for survival. This work uncovered a previously unrecognized therapeutic vulnerability that could be exploited to selectively target this subset of kidney cancers.

WE DISCOVERED THAT KIDNEY CANCERS WITH A FAULTY SETD2 GENE DEVELOP A SURPRISING WEAKNESS: THEY BECOME HEAVILY RELIANT ON A PROTEIN CALLED BCL-XL JUST TO STAY ALIVE, CREATING A POTENTIAL DRUG TARGET THAT COULD KILL THESE CANCER CELLS WHILE SPARING HEALTHY ONES.

Building directly on these findings, we were recently awarded a new five-year NIH/NCI R01 grant entitled “Exploiting Primed Inflammatory Signaling to Target SETD2-Deficient Renal Tumors.” The grant will investigate how loss of SETD2 rewires inflammatory and mitochondrial signaling to create this therapeutic dependency and will evaluate strategies to translate these discoveries into new treatments for patients with kidney cancer.

The support and community provided by the Forbeck Foundation have been invaluable throughout my career, and I am incredibly grateful to share these milestones with the SAB. Please extend my thanks to everyone, and I look forward to staying connected with the Forbeck community.



NEW VULNERABILITY FOUND

SETD2 mutations make tumors dependent on BCL-xL



PUBLISHED

Peer-reviewed in *Cancer Research*



R01 GRANT AWARDED

5 years of NIH/NCI funding secured



PRECISION MEDICINE POTENTIAL

Targets one subset, not all kidney cancers



FOLLOW UP FROM THE 2022 FORUM ON CANCER AND GENOMIC DARK MATTER

In May 2022, Ting Wang, PhD (Washington University in St. Louis) and Kathleen Burns, MD, PhD (Dana-Farber Cancer Institute) chaired a Forbeck Forum on an area many researchers were still overlooking: transposable elements, the roughly 50% of the human genome long dismissed as “junk DNA” or “genomic dark matter.” The Forum brought together 19 speakers, including four Forbeck Scholars, to examine how these repetitive elements directly shape the cancer genome and epigenome—disrupting genes, activating oncogenes, and in some cases triggering immune responses that point toward new therapeutic strategies.

At the time, this was largely uncharted territory for cancer research, and the meeting became a launchpad: several participants went on to submit a joint Mark Foundation Endeavor project proposal directly inspired by discussions at the Forum.



Scientists are learning to weaponize our own ancient viral DNA against cancer and other diseases, but it’s complicated because the same sequences play important roles in normal biology too.

WHERE THE FIELD STANDS NOW

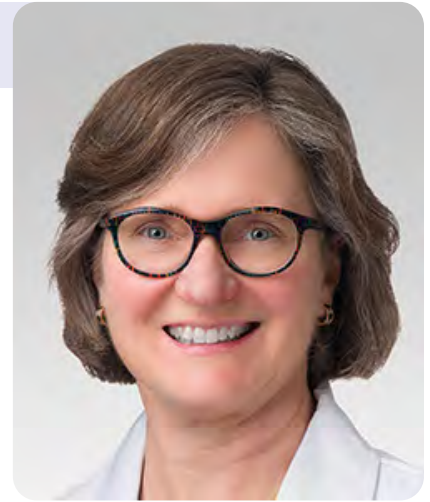
Since chairing that meeting, Wang and Burns have organized several follow-on meetings that grew out of the original Forum’s discussions and have published a paper on the topic. What was, in 2022, an unexplored corner of the genome has become one of the fastest-growing areas in cancer research.

THE ROLE OF DNA IN CANCER RISK

LUCY A. GODLEY, MD, PHD • NORTHWESTERN MEDICINE
SCIENTIFIC ADVISORY BOARD MEMBER

Virtually every cancer patient and family touched by cancer has asked: “Why me? Why my family?” And many times, doctors have answered: “Bad luck”, or “We don’t know”. But that answer is changing as we study people who have had cancer and people from large population cohorts. It turns out that a lot of cancer risk is built right into our DNA.

WE USED TO THINK THAT INHERITED CANCER RISK WAS RARE, BUT WE NOW APPRECIATE THAT AT LEAST 5% OF BREAST CANCERS, ABOUT 5% OF COLON CANCERS, AND BETWEEN 10-20% OF BLOOD CANCERS ARE DRIVEN BY INHERITED DNA CHANGES. In total, probably about 10% of all cancers are due to these inherited DNA variants. Many of these inherited cancer predisposition conditions increase a person’s risk to several cancer types, and many of them are well known to the general public. Genes like BRCA1 and BRCA2 have had a lot written about them in the lay press, but there are many others.



How would someone know if they have inherited risk to cancer? The only way to know if someone has an inherited risk for cancer for sure is to do genetic cancer risk testing. Because many of these conditions give risk to several tumor types and because many people do not know their family histories very extensively, testing individuals using a broad panel of genes facilitates comprehensive testing. When we use these broad panels, we sometimes identify multiple inherited risk factors in a person/family. If people are interested in this type of testing, they can contact their insurance company to find a cancer genetic counselor within their network and/or find a local cancer genetic counselor by visiting the **NATIONAL SOCIETY OF GENETIC COUNSELORS** website @ **FINDAGENETICCOUNSELOR.NSGC.ORG**.

WHY ME? WHY MY FAMILY?

So, who should be tested for inherited cancer risk? There are guidelines for which cancer patients should have inherited cancer risk testing, but if we accept that 10% of all cancers are likely inherited, then one can argue to test everyone with cancer. If people are concerned about their family history of cancer, they can seek testing. And thinking at the population level, when we look at known inherited cancer risk factors, we can see them in about 5% of some populations, which some would argue justifies inherited cancer risk testing in all people, regardless of personal or family history of cancer. Time will tell how broadly testing recommendations will extend, so for now, testing should take place for certain cancer diagnoses, especially if they are diagnosed at a young age for a particular tumor type and in people with strong family histories.

Why does testing matter? For one, sometimes we alter treatment based on the presence of one of these conditions, especially if they affect someone’s ability to tolerate standard chemotherapy doses. **ONCE A CANCER PREDISPOSITION CONDITION IS RECOGNIZED IN A PERSON/FAMILY, WE CAN EMPLOY A PERSONALIZED SCREENING PLAN TO SURVEY FOR CANCER OVER TIME THAT TYPICALLY COMBINES IMAGING TESTS AND BLOOD WORK.** The goal is to identify tumors at very early stages, allowing definitive surgery to remove them. In the future, we might even be able to use a blood test to screen for multiple cancers in people at high risk, and ideally, we might be able to give people a medicine to slow or prevent cancer from developing in the first place.

So, if you have wondered: “Why me?” “Why my family?”, consider inherited cancer risk testing of your DNA. Your risk may have started right there.



WALK THE LAKE

FOR KIRA FAITH

10 / 03 / 2026

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THE 2026 FALL FORBECK SCHOLARS

EVOLUTION & MODELING OF CANCER GENETIC NETWORKS AND CELL STATES



XIN GU

Dana-Farber Cancer Institute

SPONSOR: ALLISON & ROBERT WINDON

Xin studies how cancer cells control important proteins that help them grow and survive. Her research could lead to new treatments for multiple myeloma by targeting the systems cancer cells rely on to thrive.



UTHSAV CHITRA, PHD

Johns Hopkins University

SPONSOR: JULIE & JASON HECKSEL

Uthsav develops artificial intelligence and computer tools to uncover hidden patterns in cancer. His research helps scientists better understand how cancer develops and changes over time, paving the way for more personalized treatments.

NUCLEAR CONDENSATES IN CANCER



MATTHEW KING

Dana-Farber Cancer Institute

SPONSOR: ANNE BRUNK

Matthew studies how cells organize and control their genetic material. By understanding how these systems break down in cancer, he hopes to identify new ways to stop the disease.



TIZIANO BERNASOCCHI, PHD

Mass. General Hospital Cancer Center

SPONSOR: BIG FOOT LIONS CLUB

Tiziano investigates how cancer cells change the way they use nutrients to survive, spread, and adapt. His goal is to uncover new weaknesses in pancreatic cancer that could lead to more effective treatments.

NEXT GENERATION MODELS OF CANCER



MIRANDA HUNTER, PHD

Memorial Sloan Kettering Cancer Center

SPONSOR: DAVID & DORCAS COLLINS

Miranda studies how the physical environment around tumors influences cancer growth and spread. By creating innovative new research models, she hopes to identify better ways to treat aggressive cancers like pancreatic cancer.



SOUNAK SAHU, PHD

NYU Grossman School of Medicine

SPONSOR: KIM & JEFF RATHMELL

Sounak studies how inherited genetic differences affect cancer risk and treatment. His work uses advanced laboratory models to help doctors better predict which treatments will work best for each patient.

WHERE SCHOLARS GO NEXT

The Forbeck Scholar Award is designed as a beginning, not a finish line. Awardees attend their assigned Forum and then three years of Scholar Retreats alongside senior investigators, building the kind of relationships and habits of thought that shape a career long after the meetings end.

Some of that impact is easy to trace. Ned Sharpless, MD, and Tony Letai, MD, PhD, Forbeck Scholars in 2003 and 2004, both went on to serve as Director of the National Cancer Institute, leading the nation's cancer research agenda at its highest level. Kim Rathmell, MD, PhD, the Foundation's current Scientific Advisory Board Chair, was also a Forbeck Scholar and went on to serve as the NCI's 17th Director, meaning three of the last four NCI Directors have deep ties to the Forbeck Foundation.

THE PATTERN KEEPS SHOWING UP IN MORE RECENT CLASSES, TOO. Joelle Straehla, MD, a 2023 Forbeck Scholar, built her own lab at MIT's Koch Institute studying nanomedicine for pediatric brain tumors, earned a 2023 Burroughs Wellcome Career Award, and now leads her research program at Seattle Children's Research Institute and the University of Washington. Pippa Cospér, MD, PhD, a 2021 Scholar, has grown from fellow to Associate Professor at the University of Wisconsin-Madison, where she runs her own lab studying radiation sensitivity in HPV-driven cancers and recently earned a Research Scholar Grant from the Radiological Society of North America.

Most Scholars won't run the NCI, but the same pattern holds across the community: a Scholar year becomes a lab, a Scholar's mentor becomes a collaborator, and the conversations started at a Forum keep going for decades. **IT'S WHY THE FOUNDATION KEEPS CHOOSING NEW SCHOLARS EVERY YEAR – NOT KNOWING EXACTLY WHERE THEY'LL END UP, ONLY THAT THE FORBECK YEARS TEND TO MATTER.**

AACR 2026 SCHOLAR MEET UP

It was a beautiful day in San Diego on April 18, 2026, as I sat at a bar anxiously waiting to see which Forbeck Scholars might show up for the first-ever Forbeck Scholars drop-in at AACR. It was great fun to see who came by and to catch the surprised looks on their faces when Ned Sharpless, MD, and Tony Letai, MD, PhD, joined us. Both are Forbeck Scholars themselves (2003 and 2004) and both have since gone on to lead the NCI as its 15th and 18th Directors.

Thanks to Defne Bayik for pushing to make this happen—one look at the photo below, and it's hard to imagine this being a one-time thing.

"It was like having a safe space to relax briefly in the mayhem of AACR."

JOELLE STRAEHLA, MD
2023 FORBECK SCHOLAR



PICTURED, LEFT TO RIGHT: NED SHARPLESS, MD (2003 FORBECK SCHOLAR); JEAN LETAI, TONY LETAI, MD, PHD (2004 FORBECK SCHOLAR); NITIN ROPER, MD (2021 FORBECK SCHOLAR); MITCH MACHIELA, SCD, MPH (2019 FORBECK SCHOLAR); PIPPA COSPER, MD, PHD (2021 FORBECK SCHOLAR); URI BEN-DAVID, PHD (2016 FORBECK SCHOLAR); JOELLE STRAEHLA, MD (2023 FORBECK SCHOLAR); DEFNE BAYIK, PHD (2020 FORBECK SCHOLAR); AUGUST PARO; KATIE LETAI, PHD; JAKE GIBSON, PHD; AND A-RUM KIM, PHD (2023 FORBECK SCHOLAR).



BRUCE CHABNER & JAMIE FORBECK COLLINS AT AACR 2026

Bruce Chabner, MD, served on the Scientific Advisory Board since the beginning, only retiring in 2013. He was a great friend to the Foundation and the Forbeck family. It was great to catch up with him at AACR.



JANUARY 9, 2027
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[FORBECKFOUNDATION.ORG/EVENTS](https://forbeckfoundation.org/events)

THE NUMBERS TELL A STORY OF HOPE. RESEARCH MAKES IT POSSIBLE.

1960s–70s

10%

survived five years
or longer.

DECADES OF RESEARCH

85%+

children now survive
five years or longer.

90%+

Children with acute lymphoblastic leukemia—the most common childhood cancer—now survive, thanks to decades of research.

95%

Childhood cancer survivors face at least one significant long-term health effect by age 45.

The next breakthrough is safer, less toxic treatments.

1 IN 5

Children diagnosed with cancer still won't survive.

Continued research is essential.

RESEARCH HAS TRANSFORMED CHILDHOOD CANCER FROM A DISEASE WITH LITTLE HOPE INTO ONE WHERE MOST CHILDREN SURVIVE. EVERY GIFT HELPS WRITE THE NEXT CHAPTER.

FEATURED BLUE JEAN BALL AUCTION ITEMS INCLUDE

FABIO EXPERIENCE – PRIVATE DINNER FOR 10 • CHATTANOOGA, TN GETAWAY • PORT ST JOE, FL GETAWAY • NICARAGUA GETAWAY



Infographic Sources: CureSearch, National Cancer Institute, St. Jude Lifetime Cohort Study, St. Baldrick's Foundation.

SCHOLAR APPRECIATION & ENGAGEMENT



WE ARE PROUD FORBECK SCHOLAR SPONSORS. WE BECAME AWARE OF THE FORBECK FOUNDATION THROUGH OUR FRIENDSHIP WITH THE SPEDALE FAMILY. ONCE INVOLVED WITH THE FOUNDATION, WE LEARNED THAT THE FORBECK SCHOLAR PROGRAM ALLOWS SCHOLARS STUDYING DIFFERENT AREAS AND DISCIPLINES WITHIN THE CANCER RESEARCH ARENA TO CONNECT AND COLLABORATE WITH EACH OTHER AS WELL AS WITH ACADEMICS AND EXPERTS IN THE FIELD. IT WAS AN EASY DECISION FOR US TO SPONSOR 2025 SCHOLAR **ALEKSANDRA SKRAJNA, PHD (UC SANTA CRUZ)**, WHO WE HAVE HAD THE PLEASURE TO MEET ON SEVERAL OCCASIONS, AND SUPPORT THE CRITICAL WORK BEING DONE TO ERADICATE THIS DEADLY DISEASE."

DAVE AND MARIA HARRISON

2026 COMO CRAWL FOR CANCER



CANCER'S LEADING THINKERS. TOGETHER IN ONE ROOM.

GOLF OUTING • MAHJONG



LAGO EVENT • TASTE OF LG



BENEFACTORS, SPONSORS, AND TRIBUTES

TOGETHER, WE ARE ADVANCING CANCER RESEARCH

From our supporters to our scientists, every member of the Forbeck community plays a role in advancing cancer research. A community built on collaboration, mentorship, and paying it forward. To see our full list of supporters, please navigate to [FORBECKFOUNDATION.ORG/OUR-SUPPORTERS](https://forbeckfoundation.org/our-supporters)

SCIENTIFIC CIRCLE OF GIVING

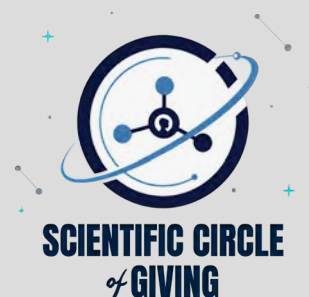
The Scientific Circle of Giving is a new area where we will be recognizing cancer researchers and clinicians who are bringing things full circle by giving back financially to the Forbeck Foundation. They are helping to ensure the next generation of researchers has the same opportunities to make discoveries, move fields forward and change lives.

Donations from the ones who understand the Forbeck Foundation's impact the most are incredibly meaningful to us. Thank you so much!

Jeong Hyun Ahn, PhD
Semir Bayez, PhD
Kathrin Bernt, MD
Shruti Bhatt, PhD
Kirsten Bryant, PhD
Stephen Chanock, MD
Clark C. Chen, MD, PhD
Pippa Cosper, MD, PhD
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We are grateful to the organizations and individuals who invest in our mission, from research and leadership partners who help fund the science, to community partners who bring our events to life. Together, they make these collaborations possible.

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LONG-TIME FOUNDATION SUPPORTER TOBEY E. LANNERT PASSED AWAY ON JUNE 5, 2026

Her friendly face in the audience was a familiar and welcome sight at Forbeck events for years. Her family selected the Forbeck Foundation for memorials in lieu of flowers. We were honored to be chosen, and the donations made in her honor are a fitting tribute. She will be greatly missed.



TOBEY LANNERT, JENNIFER FORBECK, AND HOLLY STARCK

A LEGACY THAT LIVES ON

The names on this page arrived here in different ways, and each one has a story behind it. Some belong to people who showed up for the Foundation year after year, sitting in the audience at Forums, mentoring Scholars, writing checks because they believed in the work. Others are names a donor chose simply because someone they loved mattered to them, whether or not that person ever knew the Forbeck Foundation existed. Both are gifts in the truest sense. A donation made in someone’s honor or memory takes a personal bond and turns it into something bigger than either person alone, a Scholar’s stipend, a seat at a Forum table, a nudge toward the next discovery. Tobey Lannert understood that. It’s part of why she gave so generously for so long. She may not be here to see where the next breakthrough leads, but she knew, just like everyone whose name appears here, that the gift was worth giving anyway.

IN HONOR OF
Ben Collins Family
Dorcas Collins
Christine Crum
Jennifer Forbeck
Charles H. Jesser, C.P.A.
Ann Lehman and Corado Cipria
Kelly Millar
Melinda and Patrick O'Neill

IN MEMORY OF	
Joel Alper	Barbara Hammond
Jean McKee Barry	Frederick Kees
David Collins	Tobey Emery Lannert
Billy Guy Forbeck	Carolyn Molina
George Forbeck	Glenn Neff
Kevin Patrick Forbeck	Tom O'Neill
Jane Frackelton	Richard "Dickie" Payne
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on
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“The Forbeck Meetings have consistently been among the very best I’ve attended, with thoughtful discussions, great insights, and an incredible generosity of shared findings (many unpublished), with the overriding goal of kicking cancer in the butt. There really is nothing quite like a Forbeck Symposium. In addition, the Forbeck Scholars bring their “A” game to these meetings, and their engagement and full participation gives me great hope for the bright future of biomedical research.”

Doug Green, PhD • St. Jude Children’s Research Hospital



WAYS TO GIVE TO THE FOUNDATION:

1. **Make a donation** - Your gift supports scientific research. Donate one-time or set up a recurring monthly donation. Simply use the QR code to the left.
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