

**Summary Notes for the Kirby Alliance Committee  
Gathering Meeting via Zoom  
Thursday, October 29, 2020 at 9:00 a.m.**

**Attendees:** **Marian C. Burke**, Acorn Hill Fund Director; **Katharine C. Prentice**, Acorn Hill Fund Director; **Roger H.W. Kirby**, Ann K. Kirby Foundation Director; **Wade H.O. Kirby**, Ann K. Kirby Foundation Director; **Annette S. Kirby**, Ann K. Kirby Foundation Director; **Louise Kirby**, Ann K. Kirby Foundation Representative; **Laura Kirby**, Ann K. Kirby Foundation Representative; **Coray S. Kirby**, A. P. Kirby, Jr. Family Fund Director; **Marian Lee** The A. P. Kirby, Jr. Family Fund Representative; **Owen Lee**, The A. P. Kirby, Jr. Family Fund Representative; **Jefferson W. Kirby**, F. M. Kirby Foundation Director; **Alice K. Horton**, F. M. Kirby Foundation Director; **Ward K. Horton**, F. M. Kirby Foundation Former Director; **Ashley H. Freedman**, F. M. Kirby Foundation Director; **Laura H. Virkler**, F.M. Kirby Foundation Former Director; **Leigh K. Klein**, F. M. Kirby Foundation Director; **Stark D. Kirby**, F. M. Kirby Foundation Representative; **Ella Virkler**, F. M. Kirby Foundation Representative; **S. Dillard Kirby**, F. M. Kirby Foundation Director and President; **Justin J. Kiczek**, F. M. Kirby Foundation Executive Vice President; **Diana L. Kostas**, F. M. Kirby Foundation Treasurer & Secretary; **JoAnn F. Tiefau**, Program Officer; **Erin C. Clifford**, F. M. Kirby Foundation Communications and Program Associate

**Presenters:** **Aaron J. Kowalski**, President and CEO, JDRF, **Sanjoy Dutta**, Vice President, Research, JDRF; **Tom Brobson**, Head, JDRF Foundation Initiative; and **Betty Gaston**, National Director Leadership Giving, JDRF

Due to the circumstances of the current COVID-19 crisis, the meeting took place via Zoom with participants calling in via video chat or phone. Mrs. Laura H. Virkler opened the meeting by welcoming the group. Both Laura and Mr. Roger H.W. Kirby shared their families' firsthand experiences with T1D. Laura introduced the JDRF team. Mr. Aaron J. Kowalski gave a brief introduction and noted that next year will be the 100<sup>th</sup> anniversary of the discovery of insulin. Prior to 1921, everyone diagnosed with diabetes died. Today, approximately 1.6 million people are living with T1D and 7 million people are on insulin. Approximately 1/3 of the Medicare budget goes towards T1D-related issues (kidney failure, blindness, heart failure and nerve damage). T1D is severely underfunded relative to its economic burden. The largest funders of T1D research are the National Institutes of Health, JDRF and the Helmsley Charitable Trust. He also noted the higher risk of developing T1D if

a family member has been diagnosed.

JDRF affects every step in the pipeline, including discovery research, translational research, regulatory approval, healthcare coverage and clinical adoption. It is patient-focused with the goal of tying research to strategies that result in delivering better outcomes to the patient. Aaron gave a brief overview on the Artificial Pancreas (AP) System which monitors blood-glucose levels with a continuous glucose monitor (CGM) and uses a complex algorithm to automatically provide the right amount of insulin at the right time. JDRF has invested over \$140 million on research in this area and has 40 active grants in the AP portfolio. Currently there are two semi-automated AP systems with the goal of full automation and offering multiple systems.

Dr. Sanjoy Dutta presented JDRF's research strategy. Research funding is prioritized by the highest likelihood of accelerating delivery of therapies to cure and prevent T1D while maintaining strategic gap-filling funding in research that improves the lives of people with diabetes. There are two primary pipelines: cures/products and people. The first includes global universal screening, disease modifying therapies and cell therapies. The latter includes improving outcomes and training of researchers and clinicians. Sanjoy placed a large emphasis on screening. Early screening improves the long-term outcomes and identifies more people at risk, which helps accelerate the development of preventative treatments. It is estimated that we are currently only capturing 10% of the people who need to get screened and Sanjoy's hope is that general population screening is adopted by the healthcare systems. He cited a few screening in programs in place today; Fr1da (Germany), Autoimmunity screening for kids (ASK) in Colorado which screens for both T1D and celiac disease, Teddy and TrialNet (both involve familial screening).

Sanjoy also highlighted breakthroughs in disease modifying therapies. Teplizumab has

been able to significantly delay (by at least three years) the onset of T1D in participants who had a high risk of the disease. It has been moving through clinical trials and the regulatory process. Several other clinical trials are underway or about to launch in both at-risk and recent onset T1D. They are currently testing the effects of Teplizumab in newly diagnosed patients.

Finally, Sanjoy reviewed the reality and vision of cell therapies. Currently there are two options: 1) islet (cadaveric) transplantation which can provide insulin independence up to 16-17 years but has challenges due to limited supply and chronic immunosuppression and 2) stem cell-based implantation which has shown promise and addresses the supply issue. Goals for the future include a stem cell-based product that further increases the duration of insulin independence and reduces both the need for immunosuppression and encapsulation.

JDRF's impact is to break down barriers at all stages of the development pipeline (from discovery by academia to translational which involves both academia and industry to clinical). JDRF focuses on key inflection points that will make the biggest difference and funds the entire translational pipeline.

Mrs. Laura H. Virkler asked Aaron to give a brief overview of the T1D Venture Fund. The venture philanthropy fund currently has \$100 million in assets and was initially seeded by JDRF for \$32 million. JDRF partners with commercial ventures, such as Tandem System and Medtronic, to accelerate the solution pipeline. Medtronic stated that JDRF helped accelerate its product to consumers by seven years. The minimum investment is \$500K, with investments considered a donation because all profits are returned to the Fund for future research and development. There are currently 22 investments in treatments, cures and preventative solutions.

Mr. Ward K. Horton inquired as to the percentage of spending as it relates to research versus treatment. Aaron responded that they set annual targets with the Board of Directors

approximately 3 months prior to the fiscal year. Scientific staff, the research committee and external advisors all convene and set the target based on where spending can have the most impact. Currently, approximately 67% is spent on research targeted to cures and prevention and 33% towards treatment. However, Aaron stated that with more companies becoming involved, research spending is trending towards 70% to 75% of total spending.

Laura thanked the JDRF participants for their time and the JDRF team left the Zoom meeting at 10:15 a.m. There was a brief discussion regarding the presentation. Laura then asked the attendees about ideas for future Kirby Alliance meetings. Mr. Wade H.O. Kirby expressed an interest in salvaging the Mount Vernon meeting for Spring 2021. Concerns as to whether it would yet be open arose and it was suggested that perhaps Fall 2021 or Spring 2022 would be more likely. There were no other suggestions made at the time and Laura asked the attendees to email her their thoughts and ideas. Mr. S. Dillard Kirby mentioned that the F. M. Kirby Foundation was focusing on drug addiction and related public policies in 2021 and that the April Board meeting (date to be determined in December) would include presentations by Mr. Wilson M. Compton and Partnership to End Drug Addiction (formerly known as the Center for Drug Addiction). Dillard stated that the meeting was slated to be held via Zoom and that Kirby Alliance members were welcome to attend the presentation (time to be determined).

Mr. Roger H.W. Kirby also suggested that the Kirby Descendant's Chart that he and his office created should be updated periodically. He asked for timely updates from the various family branches so that he can update accordingly. This year, with Allan and Shelby's passing as well as Marian Lee's wedding and delivery of baby (soon!), an update is much needed. Please send details to Roger.

The meeting concluded at 10:40 a.m.