Breast			
neoadjuvant TNBC	Dato-DXd + Durvalumab follwed by adjuvant Durvalumab w or w/out chemo vs neoadjuvant pembro w chemo followed by adjuvant Pembro w or w/out chemo	**AZ Tropion Breast 04 D926QC00001**: **Inclusion:** untreated Stage II or III unlateral or bilateral primary invasive TNBC or hormone receptor-low/Her2-negative breast cancer, ECOG 0-1, tissue sample available, **Exclusion:** metastatic disease, other primary malignancies, active or prior autoimmune or inflammatory disorders, corneal disease, HCV, HBV, HIV, TB, abnormal resting ECG, clinically significant cardiac disease	Phase III UCLA/TRIO PI: RP SC: Maria/Nicole
2nd line ER/+Her- Advanced Breast cancer	ARV-471 vs Fulvestrant	**Pfizer C4891001**: **Inclusion:** ER+ Her2- advanced BC, no more then 1 line of CDK4/6 inhibitor therapy in combination w ET therapy, must have at least 6months of ET prior to PD, Measurable disease, ECOG 0-1, *(neodjuvant/adjuvant tx is counted as a line for locoreginal recurrent or metastatic disease if relapse occurs on or w/in 12 months of last dose*) **Exclusion:** no prior tx with Fulvestrant, ARV-471, mTOR, PI3K, AKT pathway inhibitors, PARP inhibitors, chemotherapy in locally advanced or metastatic setting, CDK 4/6 inhibitor tx in neo/adjuvant setting, brain or CNS mets, planned major surgery w/in 2 weeks, endocrine or CDK4/6 inhibitor therapy w/in 2 weeks of randomization (14 day wash out required)	Phase III UCLA/TRIO PI: RP SC: Maria/Nicole
Lymphoma			
newly diagnosed DLBCL	Epcoritamab + R-CHOP + Prednisone vs R-CHOP alone	**Abbvie M20-621**: **Inclusion:** **newly diagnosed, histologically confirmed CD20+ diffuse large b-cell lymphoma** [DLBCL] (de novo or histologically transformed from a diagnosis of follicular lymphoma) including: DLBCL, Not Otherwise Specified (NOS), High grade B-cell lymphoma with MYC and BCL-2 and/or BCL-6 rearrangement with DLBCL morphology, T-cell/histiocyte-rich large B-cell lymphoma, Epstein Barr virus-positive DLBCL, NOS, Follicular lymphoma Grade 3b. Archival or fresh or paraffin embedded tissue at Screening, IPI score of 2-5, ECOG performance status were to improve to 0-2, >= 1 measurable nodal lesion (long axis > 1.5 cm) or >= 1 measurable extra-nodal lesion (long axis > 1 cm) on computed tomography (CT) scan or magnetic resonance imaging (MRI) Left ventricular ejection fraction must be >= 50% **Exclusion:** prior systemic anti-lymphoma therapy for diagnosed diffuse large b-cell lymphoma (DLBCL) including any definitive radiotherapy with curative intent] other than corticosteroids with or without vincristine during prephase treatment, or non-curative intent palliative radiotherapy with the stipulation that radiated lesions cannot be selected as target lesion for response assessment. Clinically significant cardiovascular disease as per the protocol.	Phase III UCLA/TRIO PI: RP SC: Maria/Nicole

Lung

tx naïve non-squamous, squamous mNSCLC w MTAP deletion or MTAP-deletion w KRASG12C mutation or MTAP- deletion w Brain Mets	**ARM A**: AMG193 +carbo+palitaxel +pembro **ARM B**: AMG193 + carbo+pemetrex +pebro **ARM C**: AMG193 +pembro	**AMGEN 2023167: Inclusion Criteria:** mNSCLC squamous or non-squamous eitology without prior systemic therapy, known PDL1 status TPS 1-50% or ≥50% locally or central lab, homozygous MTAP deletion by NGS testing, Archival Tissue within 5years, tissue biospy may be obtained if archive tissue is unavailable, Recisit v1.1 measurable disease. **Exclusion Criteria:** Prior sytemic tx for metastatic NSCLC, major surgery radiotherapy within 28 days prior to fist dose, prior tx with MAT2A inhibitor or PRMT5 inhibitor, prior grade ≥2 immune-mediated AEs, known Actional mutations: ALK or EGFR, untreated sympomatic CNS mets or 2cm lesions of brain, uncontrolled pleural effusions, other malignancies w/in 3years, active infection, thrombosis w/in 6months, myocardial infact w/in 12months of enrollment, history of bowel obstruction, abdominal fistula, gi perforation, or abdominal abcess w/in 6months of study entry, positive HIV active infection, active Hepatitis B or C infection by PCR	Phase Ib PRIVATE PI:RP SC: Nicole/Maria
2nd line NSCLC with known AGAs EGFR ALK mutations previously treated	SGNB6A vs Docetaxel	**Pfizer: Seagen SGNB6A-002 Inclusion:**patients previously treated with platinum-based chemotherapy and PD-L1 antibody, measurable disease, ECOG 0-1 **Exculsion**: prior tx with docetaxel, life expectancy <3 months, CNS mets	Phase III UCLA/TRIO UCLA PI: Lisberg PI: RP SC: Maria
non-squamous NSCLC EGRF + Stage IIIB/IIIC or Metastatic Stage IV	AK112(SMT112) w pemetrexed & Carboplatin vs placebo w pemetrexed & Carboplatin	**Summit AK112-301**: **Inclusion:** Patients with non-squamous NSCLC w EGFR mutation who have disease progression following tx w 1st /2nd/3rd Gen EGFR-TKI. Measureable disease ECOG 0-1. **Exlcusion:** No CNS mets., No presence of small cell carcinoma component squamous cell carcinoma. No prior tx with immunotherapy including immune checkpoint inhibitors, agonist. No prior chemotherapies in metastatic NSCLC or EGFR inhibitor therapy, no active autoimmune diseases.	Phase III UCLA/TRIO UCLA PI: Goldman PI: RP SC: Maria

Colorectal			
1st line Colorectal Cancer with KRAS/NRAS Mutation	open-label, Ovansertib w FOLFIRI /FOLFOX w Bevacizumab vs FLOFIRI/FOLFOX w Bevacizumab	**Pfizer Z0101001/CRDF004: Inclusion:**1st line Colorectal; no prior tx in metastatic setting. Must have KRAS/NRAS mutation status. Archival tissue or fresh biopsy for central KRAS/NRAS testing, (local RAS testing can be performed), ECOG 0 -1 Measurable disease per Recist 1.1 **Exclusion:** No prior oxaliplatin treatment within 12 months prior to randomization. No BRAF V600 mutation,	Phase II UCLA/TRIO UCLA PI: Hecht PI: RP SC: Maria
Solid Tumors			
Metastatic Solid tumors to which no SOC is available or intolerant to SOC therapy	single agent GIM-531 w Anti-PD1	**Georgimmune GIM531-CT01: Inclusion:** solid tumors with cytologicaly or histological confirmed locally advanced metastatic solid tumor that have progressed on standard therapy or for which **NO** standard therapy exist; or be **intolerant** of standard of therapy, life expectancy ≥3months, ECOG 0-1, archival tissue available for central testing or fresh tissue core needle biopsy, measurable disease per recist 1.1 **Exclusion:** brain mets, cardiopulmonary disease, structual cardiac disease, QTcF > 470 on ECG, active autoimmune disease, melanoma with documented BRAF mutation,	Phase I/II CBCC Private PI: RP SC Nicole/Maria
Metastatic Solid tumors to which no SOC is available or intolerant to SOC therapy	single agent AT-1965 IV	**Alysum AT1965-101**: **Inclusion: (PART A)**unresectable metastatic solid tumor that is refractory to standard herapy or for which in the opinion of the investigator no stard therapy is suitable. Measurable disease per Recist 1.1 ECOG 0-1 adaquate organ function, **(PART B)**TNBC received 2 prior lines of tx with aa taxane and sacituzumab goitecan-hziy for metastatic disease, TNBC with PDL1 or BRCA mutation need to have FDA approved therapies before paticipation in expansion cohort. **Exclusion:** no GI disorders that may affect absorption of study treatment, no cardiac disorders or uncontrolled medical condition, not history of autoimmune disease, interstitual lung disease, hemolytic anemia or hemolysis anemia, high LDH, cushing syndrome or adrenal gland disorder, known HIV or HEP B OR C no solid tumor CNS, liquid/hematological tumors, lymphomas, uveal melanoma infection, LVEF <50% at baseline	Phase I/II CBCC Private PI: RP SC Nicole/Maria

Pretreatment Patients Only ****Currently enrollment on hold****	no tx	**OncoFiltration CO2300017**: **Inclusion:** pre-treatment patients with a solid tumor (i.e. breast, lung, colorectal, prostate cancer diagnosis) Study is currently enrolling for: **newly diagnosed breast cancer patients Stage IA. Subjects willing to provide 40mL of whole blood.** **Exclusion:** **NO** prior treatment or surgery for their disease, patients who have donated bone marrow within the last 3 months, patient who are anemic defined as a hemoglobin >10.0g/dL for men or > 12 g/dL for women, Positive for Infectious disease: HIV, HbsAg/HCV.	Phase I/II CBCC Private PI: RP SC Nicole/Maria
Pancreatic			
mpancreatic with MTAP-deletion without prior treatment	AMG 193 + gemcitabine+ nab-paclitaxel vs AMG 193 + mFOLFIRINOX	**AMGEN 20230223:** Inclusion: MTAP-deletion mutation, measurable disease per Recist 1.1, ECOG 0-1, adaquate organ function, archival tissue w/in 5 years, no other malignancies w/in 3 years, tissue biospy may be obtained if archive tissue is unavailable. Exclusion: major surgery, radiotherapy within 28 days prior to fist dose, prior tx with MAT2A inhibitor or PRMT5 inhibitor,untreated sympomatic CNS mets or 2cm lesions of brain, uncontrolled pleural effusions,	Phase Ib PRIVATE PI:RP SC: Nicole/Maria
metastatic pancreatic ductal adenocarcinoma	**TTX-030** w chemotherapy (***nab-paclitaxel + gemcitabine***) with or without **budigalimab** vs chemotherapy alone (*n* ***ab-paclitaxel + gemcitabine***)	**Trishula TTX-030-003: Inclusion:** metastatic pancreatic cancer (*may have received prior neoadjuvant or adjuvant therapy without disease progression within 6 months after last dose of chemotherapy)is permitted* , measurable disease per RECIST v1.1, tumor tissue available w/in 90 days prior to first dose, ECOG 0 - 1, ECHO LEF ≥45% on ECHO or MUGA, adaquate organ function **Exclusion:** hypersensitivity to planned treatment, history of Toxic epidermal necrolysis (TEN), or drug reaction with eosinophilia and systemic symptoms (DRESS), active didease requiring systemic corticosteroids (>10mg QD) immodeficiency, bone marrow transplant, TB, use of anticancer therapy w/in 14 days prior to start of study medication, evidence of CNS, Known HIV or other chronic immunodeficiency, women who are pregnant or breast feeding, live vaccine or major surgery w/in 28 days of first dose, uncontrolled cardiac function, diabetes, active infection, pleural effusion, uncontrolled thyroid function	Phase II UCLA/TRIO UCLA PI: PI: RP SC: Maria/Nicole