



The Economic Club of New York

115th Year
678th Meeting

Dr. Ruth C. Browne
President and Chief Executive Officer
Ronald McDonald House-New York

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Webinar

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Introduction

President Barbara Van Allen

Good afternoon and welcome to the 678th meeting of The Economic Club of New York. I'm Barbara Van Allen, President and CEO of the Club. It's an honor to be here with all of you in our milestone year. We're 115 years old today. And we hope that you can join us for our special anniversary dinner coming up November 14th. We have an exciting meeting planned, which will include a panel of former Chairs hosted by our current Chair, John Williams. The Economic Club of New York is the nation's leading, nonpartisan forum for discussions on economic, social and political issues. And we're pleased that over the century, more than a century, we've hosted over 1,000 very prominent speakers.

Over the last two years, through our Diversity, Equity and Inclusion programming, we've been leveraging the Club's program to bring together prominent thought leaders to help us explore and better understand the various dimensions of inequity in underrepresented communities. We really spend time trying to highlight strategies, best practices, and identify resources that the business community can use to be a force for change. We're not doing this work alone and would like to give special thanks to our corporate partners – BlackRock, Bloomberg, Mastercard, PayPal, S&P Global and Taconic Capital – as well as the many members, speakers, and subject matter experts

that are now and will be in the future engaged in this work.

A special welcome to members of the ECNY Class of 2022 Fellows. This is a select group of diverse, rising, next-gen business thought leaders. This year's class numbers 55. I'm pleased to say as of October 1, applications for 2023 are now open and are available on our website. We also want to welcome today students from the CUNY Graduate Center, the NYU Stern School of Business, the Gabelli School of Business at Fordham, as well as Rutgers University. These students are joining us today virtually.

Today, I'm very honored to welcome our special guest, Ruth Browne. She's President and CEO of the Ronald McDonald House in New York. Throughout her career, she's been very purposeful in creating cultures defined by diversity, equity and inclusiveness in various organizations. She has extensive experience building and leading high-performance executive teams. Her approach to leadership and board engagement has resulted in numerous wins including sustainability models and plans, development and funding in excess of \$87.4 million in her role as CEO across two important organizations.

Ruth is an experienced Director on public sector and non-profit boards with more than 20 years of board level community involvement. She also works with non-profit groups and an extensive global professional network to address critical societal needs, both

organizational and philanthropic, excelling at transforming healthcare to increase stakeholder value. Ruth has transformed a 40-year-old business hospitality model at the RMH-NY to a model focused on providing capabilities, programs and services offered at the intersection of healthcare and hospitality. She was recognized by the Mastercard/Harvard Innovative Leadership Series in 2020 and 2021 for her outstanding innovative approach to leadership in driving results.

Prior to joining the Ronald McDonald House of New York, Ruth was CEO of the Arthur Ashe Institute for Urban Health, a best practice catalyst for interventions that advance health and educational equity solutions for culturally diverse populations locally, nationally and internationally. She is a skilled architect in the development of academic, public/private, community and government partnerships as a leader and Board member. Her work during her tenure at the Arthur Ashe Institute for Urban Health at the height of the AIDS crisis, I might add, informed her balanced approach to crisis management from the beginning of the Covid-19 pandemic in 2020 to the current moment, using the insights gained from one global pandemic to pivot and successfully navigate another.

The format today will be a conversation, and we're delighted to have Shartia Brantley, Deputy New York Bureau Chief and Senior Editor at Bloomberg Live, doing the honors of moderating. In addition, we're going to be using the chat box for this conversation. You can enter questions directly there for their consideration, time permitting. As a

reminder, the conversation is on the record. We do have some media on the line.

Shartia, if you're ready, I'm happy to pass the mike over to you.

Conversation with Ruth C. Browne

SHARTIA BRANTLEY: Thanks so much, Barbara. I am absolutely delighted to discuss advancing health equity with Dr. Ruth C. Browne, President and CEO of the Ronald McDonald House-New York. Welcome Dr. Browne.

DR. RUTH C. BROWNE: Thank you, Shartia. I'm so pleased to be here with you. Thank you.

SHARTIA BRANTLEY: Thank you. How are you doing today?

DR. RUTH C. BROWNE: I am great. Today is a great day and we are looking forward to it being beautiful weather despite our news about impending rain.

SHARTIA BRANTLEY: Definitely. Well, again, a joy to be with you today, and we have a lot of ground to cover so let's dive in. Dr. Browne, can you share with us, and Barbara gave a great overview in her introduction, but can you share with us the mission of Ronald McDonald House-New York.

DR. RUTH C. BROWNE: Sure. So Ronald McDonald House-New York is a 40-year-old organization that has really focused on creating a sense of normalcy for families whose child has a diagnosis of cancer or other serious pediatric illness. And we really do that through offering a series of programs that address the social determinants of health. If you think about what a family needs, a family needs access to transportation to and from appointments, food, how are you going to take care of your family when your child is sick and you are trying to really attend to the healthcare team and that child's healing journey. All of those services that a child needs, you know, to create a sense of normalcy like educational services so they can keep up.

But oftentimes, it's the whole family traveling for that child, right? Whether they're coming from abroad or other parts of the country. And so recreational services for that child, if that child is well enough, and then the siblings who are traveling with them. And then wellness services and family support for the whole family.

SHARTIA BRANTLEY: Now, as we know, the Covid-19 pandemic had a disproportionate impact on underrepresented groups and vulnerable communities and really put health equity in the spotlight over the past couple of years. How has the pandemic impacted how you serve pediatric patients and their families?

DR. RUTH C. BROWNE: So we can serve up to 400 individuals at Ronald McDonald House on 73rd Street per night. And when the pandemic hit, it became very clear that we were housing families where all of the children are immunocompromised. And so if you could imagine, that was very frightening for those families. So many of our children have cancer. Others have other illness. But nevertheless, you know keeping them safe and able to continue their treatment was our highest priority.

When Covid hit, it became very clear that a high-touch organization had to really be innovative in how we were going to continue to keep our doors open and deliver services. But not only do we provide services in this House at 73rd Street, we also provide services in the community through programs that we bring to the hospitals for children who are inpatients or for caregivers who have a child who is an inpatient and aren't staying with us. And what became clear to us is that so many of the programs that we do offer – educational, wellness, recreational programs – are exportable and could be offered virtually, and we did that. We literally adapted the programs so that they could be offered with our very innovative programs-to-go where we delivered everything you needed to participate in a program, including a Zoom link, to be able to get the benefit from the staff expertise. That became really important.

But other ways that Covid really affected us were really around our need to build up that digital infrastructure. Right? And that's something that we have been working on since

the beginning of the pandemic. And I think that Covid really exposed a lot of the fault lines as it related to equity. And so whether it pertained to our staff or how we serve or who we serve, there were lessons learned for us in all three areas.

SHARTIA BRANTLEY: Well, how did the pandemic then inform your decision to embrace a local strategy and dropping that 50-mile radius block that had been in place, but was dropped in 2021?

DR. RUTH C. BROWNE: I think what it made very clear to us was that the work that we had started to seep through outreach beyond the housing model, right, was really critical. We saw what was happening. All of us watched the news in dismay when we saw what was happening, particularly at some of the public hospitals like Elmhurst Hospital in Queens. We had already started our relationship with Kings County Hospital, the largest of the New York City public hospital systems, through programming and the establishment of a family room to serve those caregivers who had a child inpatient, many through the NICU. Many in pediatric ICU. Some in behavioral health, who had children who were in behavioral health.

But what it made very clear to us was that not only did the patients and the caregivers need us, but the staff at the hospitals did as well. It was during Covid that we decided we were going to build another family room at Elmhurst Hospital, part of the New York

City Health and Hospitals System. All of us watched and saw what happened at Elmhurst and it was very clear that what we could offer to the staff and to the families was really important. We sent food. We offered our programs-to-go. We started the plans to build and have opened that family room, which is respite for those caregivers who are spending the day at the hospital.

SHARTIA BRANTLEY: And what has been the response from these changes from the families that you're serving?

DR. RUTH C. BROWNE: Well, first, I think that our model has always been to provide services for international families and families who live at least 50 miles away, but families who come from all over the country. And what these families are trying to access is lifesaving care that's offered here in New York City and that may not be offered anywhere else. So if you think about what we have to take advantage of here in New York City, there are many New York City families who need the same thing. And in order to avail themselves to the services, home may not be the best place for a child to recover from a procedure that is in response to a serious pediatric illness.

We can offer housing, temporary housing for those families. We can offer programming, which is day programming. And we can offer the respite care through the family rooms that we established. And all of the services that we offer to those families that are

benefitting from staying with us at the House, we can start to offer to New York City families that may also have access to the House now, but also may be coming back and forth. And that's food, that's transportation, the wellness and educational programs, etc. etc.

SHARTIA BRANTLEY: Are the levels of need the same as they were in 2020, 2021, today?

DR. RUTH C. BROWNE: I would say the needs are even greater. And I think that part of it is because of Covid. I think part of it is because so much in healthcare actually regressed because of Covid. And so we're seeing needs that we had not had to address before. And it's really important that, you know, when we talk about the expansion of Ronald McDonald House, we're really thinking about the most vulnerable families who are now needing our services more and more.

SHARTIA BRANTLEY: Can you expand on that a little bit, about people needing more? I recall a lot of people skipped going to the doctor for a year or two during the pandemic, so was it just not going in for those checkups, those appointments, or what else are you seeing?

DR. RUTH C. BROWNE: Well, first, I think, you know, if we just focus on the fact that

we're dealing with really sick children. Right? And you're talking about a family that has to muster up every resource to really just get their child to what could be lifesaving treatment. You know, for us, we run two vans ourselves, but during this pandemic we actually had to reach out to Ride-Health because they were very equipped to provide the kinds of services that we needed and the volume of services we needed to address the fact that our families needed to social distance. They couldn't pile into our vans together and so we needed more and more services. And when we think about those families at hospitals, that service becomes even more important, getting back and forth under Covid conditions.

But food insecurity, I think, has become a really big, an important issue, and that's one of the things that hospitals have identified as a major social risk. And so Ronald McDonald House runs an incredible food service program for our families that stay with us. We're now working with our hospitals to think about how do we provide food services, either through vouchers or through partnerships, to make sure that food insecurity is not one of the social risks that our families are experiencing.

SHARTIA BRANTLEY: And how are you going about building those partnerships? What type of response are you seeing from partners?

DR. RUTH C. BROWNE: I think that Covid showed us that partnerships are critical. Our

belief is that Ronald McDonald House is providing a seamless circle of support and we're able to do a lot, but we're not able to do everything. And so through the establishment of meaningful and intentional partnerships, we're able to make sure that all of the families we touch, every need they have is met. And if we're not meeting it, we're reaching out to partners who provide services that we don't provide to meet those needs.

SHARTIA BRANTLEY: I want to circle back a little bit. You talked earlier about the family rooms at Kings Hospital and the build-out at Elmhurst. But you also have partnerships across all five boroughs. Can you expand a little bit more about some of the things you're doing at Montefiore, some of the other hospitals?

DR. RUTH C. BROWNE: Right. So we have just partnered with Montefiore. It's always been on our radar screen as a hospital. Montefiore has been sending us, referring families to us for years, mostly cancer families who have had a child with a diagnosis of cancer. However, there are many other pediatric illnesses that they are addressing and that need our House. But we are actually looking at Montefiore for first quarter of 2023, we will be building a family room. We've identified a beautiful space there. And that family room will be to serve caregivers who have a child inpatient at Montefiore.

Montefiore, in the Bronx, all of us who have experienced New York City travel and traffic

know how long it takes to get up and down and across town and to come from the Bronx to East 73rd Street could be over an hour. And so these are families that need to be close to the bedside. And so when you think about how important that family room respite, that is a family room that will have not only the respite room but will also have sleeping pods for someone to take a nap and two overnight stay rooms.

So when you think about Ronald McDonald House-New York, we are part of the network of international Ronald McDonald Houses. So over 360 in the world, over 250 in the United States. And the family room and the Houses vary across the country and the world in terms of what they look like. Ronald McDonald House-New York is establishing the first, has established the first family room in the public hospital system in the U.S. system. We've now established our second hospital in the public hospital system. But we've prioritized the public hospital and safety net hospitals in terms of how we expand through the development of family respite rooms. So it's wonderful work in terms of our equity agenda as it relates to healthcare and hospitality in New York City.

SHARTIA BRANTLEY: You mentioned being part of this 360-House network, most of which are here in the U.S. How often are you talking with your peers across these locations to identify best practices and innovative approaches to providing care today?

DR. RUTH C. BROWNE: You know we have a lot to learn from our peers and they have

a lot to learn from us so we share often. We share formally and we share informally, and we do gather. And I think that the New York House actually provided a lot of leadership during the Covid pandemic because our other Houses watched what happened here and learned from both what to do and what not to do from what the New York City experience was. And, you know, because my background is in public health and because I have experienced pandemics from a service perspective, it's really important to bring those lessons to the table. And all of us know, right, when you are in a house, a home where someone is sick, you isolate. Right? And so we did as much of that as we could. It served us well during this pandemic because we have a house full of immunocompromised children.

SHARTIA BRANTLEY: You know, today many companies are reimagining how they use space as many workers continue to work from home and what do you do with all of this real estate. What are some of the conversations you all are having at Ronald McDonald House-New York and the broader entity about reimagining your space and locations to serve patients today and looking into the future?

DR. RUTH C. BROWNE: Well, two things. First, I think it's really important that for us a priority was not only the families we serve but also the staff that serves them. And throughout this pandemic, I think we've been innovative and thoughtful about the way that we have supported staff so that they can serve. And also supported staff knowing

that they too, in their own families, were experiencing the adverse impact of Covid. And whether that was at the height of the pandemic, transportation to and from our House, which protected them and our families, or some accommodations where we had to have staff who stayed overnight, etc., we were really thoughtful. And then, you know, in the, not aftermath, but during this pandemic, thought about what happens when our staff gets sick? And how are we supporting them in terms of their time? Right? So those kinds of things became very important.

But when we think about the ways that we are using space, our House is a large house. It's very hotel-like in the sense of the way it's structured with beautiful, open communal spaces. And we're taking a look at all of our spaces for two reasons. One, because we have all seen how having multi-use, modular, adaptable space becomes critical to our health and hospitality mission, and also because we're expanding, you know.

I think while many organizations have had to retract in terms of their offerings because of Covid, because of funding, we have taken advantage of the opportunity to really say what does the next five years look like for this House as we think about expanding the mission beyond cancer to include other pediatric illness, expanding the reach beyond 50-mile radius, and expanding the breadth and depth of services that really reach the most vulnerable families in New York City. And as we think about families coming to the House, as well as families, serving families outside of the House, our staff will have to

expand.

One of the things that we're looking at is we are building a model, a social determinants of health model of value-based care for medically-compromised kids. And if we had been able to take that model off the shelf, it would have been much easier, but we weren't. We are really being innovative and pioneering as we think about what does that model look like for not only the families who come from other parts of the United States and the world, but also for our New York City families.

And with all of the health reform that has been introduced in New York, we really need to take advantage of it and we need to be aligned with it. We need to be aligned with what hospitals say they need and what families say they want in terms of the services we offer. So that value in a value-based care model becomes really important to what Ronald McDonald House-New York offers. And so we're building out that model and that model has all kinds of implications for partnership and services. And it's one of the things we're really looking forward to refining and perfecting and being able to share.

SHARTIA BRANTLEY: And if you can share anymore on that, that sounds very exciting. And are your partner locations, are they also considering that? Or will you be the first, the test case, for this new reimagining of how you serve the community?

DR. RUTH C. BROWNE: Well, I would like to believe that healthcare reform was

universal across the country, but it's not. And so I think that the local approach becomes really important. Our local approach is really, you know, very much aligned with what is happening in New York. But there are reforms similar to what's going on in New York and other parts of the country and we look forward to sharing with our partner houses in this regard as well.

But I think, to go back to...we have 18 hospital partnerships. These are hospitals that for years have been referring families to us. We are very much building stronger partnerships with them and that alignment becomes really important, making sure that we are walking lockstep with them in terms of what we need to do. It has a lot of implications for infrastructure. We need to be able to share information in ways we haven't had to share before, because it will inform the way we're able to serve families better on that healthcare journey.

SHARTIA BRANTLEY: And that is like electronic health records and things like that?

DR. RUTH C. BROWNE: Exactly. Electronic health records, HIPAA compliance, all of those things that, you know, in modern healthcare are really important in the healthcare experience.

SHARTIA BRANTLEY: This sounds exciting, but I do want to touch on support for

Ronald McDonald House-New York and donations and just what your organization has seen during the pandemic and where we are in 2022 when it comes to donations from donors.

DR. RUTH C. BROWNE: Sure. So I think that Ronald McDonald House-New York has been very fortunate in the sense that our donors during this pandemic have stuck with us. And we were very intentional about reaching out to our donors, about making sure they were informed about some of the challenges we have, we have had and continue to have given Covid. And really engaging them in how the organization was thinking about its future. People need to buy in to not only your present but also your future. And what Ronald McDonald House-New York did was really launch a strategic planning process with our board as well as now execute on that strategic plan and communicate the strategic priorities and initiatives to our donors.

Our donors are not only engaged in a commitment to supporting families who have a child with a diagnosis of cancer, they're not only engaged in supporting families coming from other parts of the world and other parts of the country, but they are now engaged in an expanded mission that supports really vulnerable New York City families.

Communication, communication, communication was really important for us in being able to keep our donors, keep them engaged, and helping them understand what the future of Ronald McDonald House is.

So this has been a very events-driven organization. We've been very, very successful with, I think there were 27 standing events that we run, and then others that folks run for us. But we have expanded the way we raise funds to leverage not only the support we get from individual contributors and corporations through events but also through our planned giving, direct mail, and now we are looking at grant procurement. And I think our equity mission speaks very well to funders who are interested in issues of health disparities and health equity and the role that Ronald McDonald House plays in that.

SHARTIA BRANTLEY: Can you expand a little bit on grant procurement for us?

DR. RUTH C. BROWNE: Sure. So many not-for-profit organizations raise funds through, literally writing grant proposals and soliciting grant funds from private and public foundations. And we have traditionally done very little of that. We are doing much more of that now and really telling our story in terms of the equity journey. And the equity journey includes expansion to all five boroughs of New York City. Right? So our local presence, which we are very much a part of New York City, becomes really important. Not only are we in New York City, but we are actively supporting families here in New York City as well as our traditional mission of supporting families coming from abroad and other parts of the United States. That local presence means a lot to foundations. And when we tell the story of how we're building out our health equity initiatives and services, it resonates with them, and we expect to see more support

coming through those mechanisms for the work that we are executing on.

SHARTIA BRANTLEY: A couple of questions about that because you do serve three groups – New York City, the rest of the U.S., and international patients and families.

Have you seen the percentage shift over the past couple of years between your international patients that come to New York versus those from other parts of the U.S.?

RUTH C. BROWNE: No, I think, so the answer is yes. I think that prior to Covid, 40% of our families were international. Probably 55% were from other parts of the United States. And I think that, you know, Covid shut down international travel for so long so those numbers are starting to pick up now. But complicating that was, you know, the fact that in order to come to our House, you had to be vaccinated. Even more, once the international travel was opened a little bit more, you had the added step of making sure that families who could be, were vaccinated. Of course, you know, whether a child patient is vaccinated was up to the healthcare team, but in order to keep families safe, we needed families to be vaccinated to come here.

But the international family population has been increasing and when you think about a city like New York, and you think about the immigrant populations, this is an international city. So, so much of what we learn from our international experience has very, very clear implications for New York City families as well.

SHARTIA BRANTLEY: I just want to remind everyone, we have about ten minutes left. If you have any questions you can add them to the chat and I can ask them to Dr. Browne. One thing I do want to expand on, when we talk about what's next, you mentioned growing out your grant procurement and seeking funds in that manner. What are some of the other innovative strategies your team is putting into place now? As you mentioned before, when donors support, they're not looking at today, they're looking at the organization four or five years down the road. So what are some of the other things that, as the CEO, that is top of mind for you to ensure that Ronald McDonald House-New York is just a key member of the New York City community for many years to come?

DR. RUTH C. BROWNE: I think our visibility is really important. As a long-established organization that has a focus on children and families, our family-centric perspective becomes really important. And it's important at many, many tables that we haven't been participating in. And so the representation of Ronald McDonald House at some of those tables, whether they're policymaking, whether they are programmatic in the way that organizations like ours get supported, those kinds of discussions become important. And the family experience outside of the clinical care becomes a really important perspective to be able to offer at those tables.

And so as our team is building out what Ronald McDonald House is doing and how

we're functioning as a healthcare-hospitality organization, I think that voice at those tables becomes important. It's important in terms of the kinds of partnerships we build and many of the partnerships we're building become models for how you address social determinants of health and health equity focused on children and families. And so that, I think is really one of the innovative ways that we are building our capacity but also building awareness about Ronald McDonald House and the services that we offer in terms of the model that Ronald McDonald House can be for other organizations and with other organizations that are focused on children.

SHARTIA BRANTLEY: One question we have here, does the Ronald McDonald House-New York still have a relationship with its founder, McDonald's? If so, what does that look like today?

DR. RUTH C. BROWNE: Sure. Absolutely. So McDonald's is a legacy partner. Ronald McDonald House-New York has representatives on our board from McDonald's owner-operators and McDonald's corporate. That's really important to us. McDonald's, as a corporation, supports our international charity but our local McDonald's owner-operators of the restaurants also support, not only our House in New York City, but the other New York Houses. And so there's a House in Long Island. There's a House in Westchester. And the owner-operators raise funds through the change boxes you see in the restaurants. Those are pooled and then each House gets a percentage of that.

But there was also recently a fry tax which has raised even more dollars during this pandemic for the Houses. We also reached out to McDonald's corporate regional for some of their vendor relationships when we were trying to create safety precautions within the House. They were doing that in the restaurants. And so they are active participants in the way we are thinking about and building for the future.

SHARTIA BRANTLEY: That's good to hear. Another question. If someone does have a child sick with cancer, how do they access the Ronald McDonald House services?

DR. RUTH C. BROWNE: So access to the House is done through the social work team at our partner hospitals. You could speak to them or they would identify you as a family that would benefit from the services of Ronald McDonald House-New York.

SHARTIA BRANTLEY: Interesting. Another question. These are great questions, by the way, everyone. Keep them coming. They are excellent questions. As someone with a very successful career history, do you have any tips for the next generation of folks on the call? Remember Barbara said we have students tuning in from some amazing institutions today.

DR. RUTH C. BROWNE: That's a great question. So I think that leading with authentic voice is really important. If you were to spend the time that you're going to spend in a

job, you want to be able to lead with your authentic voice. And that means you need to be targeting a career that allows you to do that. And I think, you know, the flipside of that is making room at the table for authentic voices. And so if you're an employer and you're thinking about the next generation of your employees, then you need to make sure there's room at the table, including the leadership table for authentic voices to be heard.

This whole discussion around equity and around health disparities becomes a real entry point in public health, but it's a real entry point across sectors. And so when many organizations or corporations are involved in healthcare, and however they touch it, that issue of social determinants of health beyond clinical care become really important. And so for those entering the field, for those in the field, being well-versed in issues around health equity becomes really important because that voice has to be represented at the table.

SHARTIA BRANTLEY: I really do like that. And, you know, we have a multi-generational workforce today, and I'm just so impressed by my Gen Z colleagues and just the energy and the thought that they bring to work. They've had a very positive influence on me. What has been your experience working with the multi-generational workforce at Ronald McDonald?

DR. RUTH C. BROWNE: It's been fantastic. We do have a very multi-generational workforce. And one of the things I think that really emerged during Covid was the important of representation. And so one of the things we were very intentional about was opening up the decision-making to include multi-generational voices and also showing our younger workforce that there was room for growth. Right?

SHARTIA BRANTLEY: Yes, that is so, so critical, to have their voice heard and to feel like they're part of the decision-making process. Very important. Well, we must leave it there. It was just an absolute joy speaking with you, Dr. Browne, President and CEO of Ronald McDonald House-New York. I can't thank you enough for joining us today. We appreciate you so, so much. I see Barbara is back online so that means it's time for me to turn it back over to her. Barbara...

PRESIDENT BARBARA VAN ALLEN: Well, thank you so much, Ruth and Shartia. That was just a wonderful conversation. I think everyone participating today learned a lot. And this recording will also be on our YouTube channel and will also be part of our podcast work which we're pushing out starting this fall. So again, many thanks to both of you.

For those listening, I want to say we have a Signature Luncheon next up with Charlie Cook of the Cook Political Report, with Bob Rubin. That will be next Tuesday, October

18th. And we do have a special luncheon pricing for that one if you're interested. Lee Zeldin, Congressman Zeldin actually, is a candidate for Governor of New York, and he's going to join us virtually October 26th for our New York Series. And we await a date and time for Governor Hochul to also address the Club, ideally pre-election clearly.

Sebastian Mallaby, the author of a very fascinating book, an inside look at Silicon Valley, will be joining us October 27th. On November 10th, we have a webinar with James Runcie, the CEO for the Partnership for Education. And we have Steve Squeri, the President and CEO of American Express, joining us the same day, November 10th. So Steve will be in-person and James Runcie will be virtual. As we already mentioned, on November 14th, we have an exciting celebration planned for the celebration of our 115th anniversary. We then go to November 17th, where we have Arvind Krishna, the CEO of IBM, followed by Club Chair, John Williams, for a webinar on November 28th. And then Mike Wirth of Chevron is going to do a luncheon December 1st. And then we will have Secretary Marcia Fudge, December 7th for a luncheon. And then we close out the year with a dinner, end-of-year dinner with The Honorable Joe Manchin, U.S. Senator from West Virginia on December 8th. So as always keep your eye on our website. We're adding all of the time.

And we always have a special thanks to members of the Centennial Society, which provides the financial backbone of our Club and enables us to do all of our wonderful programming. And I encourage those that are not in Centennial to consider joining and

those that are in Centennial consider looking at the new categories that you could also consider being a part of. So again, thank you everyone for joining us today. We look forward to having you again in the future. Ruth and Shartia, thank you, just a wonderful conversation. Thanks so much.