Form 990

# **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private

2016

DLN: 93493314015687 OMB No 1545-0047

29	foundations)	`	• •	<b>401</b>	U					
Department of the Treasur Internal Revenue Service	<ul> <li>Do not enter social security numbers on this form as it m</li> <li>Information about Form 990 and its instructions is at www</li> </ul>			Open to Pu Inspection						
A For the 2016 ca	lendar year, or tax year beginning 01-01-2016 , and ending 12-3	31-2016								
<b>B</b> Check if applicable  ☐ Address change ☐ Name change	change 52									
☐ Initial return	Doing business as									
Final □deturn/terminated □ Amended return □ Application pending	Number and street (or P O box if mail is not delivered to street address) Room/si 1201 MARYLAND AVENUE SW NO 900	E Telephor	e number 62-9200							
Application pending	City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20024		<b>G</b> Gross re	ceipts \$ 77,004,582						
	F Name and address of principal officer  JAMES C GREENWOOD  1201 MARYLAND AVENUE SW NO 900  WASHINGTON, DC 20024	H(a) Is this suborce H(b) Are all include	linates? subordinat	□Yes						
I Tax-exempt status	☐ 501(c)(3) ☑ 501(c)(6) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527			ıst (see instructions)						
J Website: ► WWV	N BIO ORG	H(c) Group	exemption	number <b>&gt;</b>						
<b>K</b> Form of organization	✓ Corporation ☐ Trust ☐ Association ☐ Other ►	<b>L</b> Year of forma	tion 1993	<b>M</b> State of legal domicil	e					
Part I Sumn	nary				_					
SUPPORT T	ribe the organization's mission or most significant activities HE BIOTECHNOLOGY INDUSTRY TO EXPAND THE BOUNDARIES OF SCIEI	NCE TO BENEFI	T MANKIND	1						
ž					_					
E					_					
	box $\blacktriangleright$ $\square$ if the organization discontinued its operations or disposed of if voting members of the governing body (Part VI, line 1a)		of its net a	ssets <b>3</b>						
≫ 4 Number of	Fundamendant voting members of the governing body (Part VI, line 1h)			4	_					

		1201 MARYLAND AVENUE SW NO 900 WASHINGTON, DC 20024  mpt status	H(b) Are all subordinates included?  If "No," attach a li  H(c) Group exemption	st (see	•						
<b>(</b> Fo	rm of c	organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶	<b>L</b> Year of formation 1993	<b>M</b> State	of legal domicile DC						
P	art I	Summary	I								
Hance		Briefly describe the organization's mission or most significant activities     SUPPORT THE BIOTECHNOLOGY INDUSTRY TO EXPAND THE BOUNDARIES OF SCIENCE TO BENEFIT MANKIND									
ACTIVILIES & GOVETIALICE	2 3	Check this box ▶ ☐ if the organization discontinued its operations or disposed of m Number of voting members of the governing body (Part VI, line 1a)		sets <b>3</b>	114						
	4	Number of independent voting members of the governing body (Part VI, line 1b) $$ .		4	114						
≝	5	Total number of individuals employed in calendar year 2016 (Part V, line 2a)		5	210						
}	6	Total number of volunteers (estimate if necessary)		6	176						
Ĭ	7a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	411,568						
	Ь	Net unrelated business taxable income from Form 990-T, line 34	<u> </u>	7b	-462						
			Prior Year		Current Year						
Rəvenue	8	Contributions and grants (Part VIII, line 1h)		0	0						
	9	Program service revenue (Part VIII, line 2g)	59,447,7	99	64,830,661						
Α Ş	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d )	9,300,1	67	1,712,696						
V.	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	5,776,5		10,372,053						
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	74,524,5	20	76,915,410						
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3 )	484,8	33	596,583						
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0	0						
3	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	30,323,6	73	31,655,808						
Expenses	16	a Professional fundraising fees (Part IX, column (A), line 11e)		0	0						
Š	b	Total fundraising expenses (Part IX, column (D), line 25) ▶0									
ш	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	36,991,3	28	47,122,286						
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	67,799,8	34	79,374,677						
		Revenue less expenses Subtract line 18 from line 12	6,724,6	86	-2,459,267						
S 8			Beginning of Current Ye	ar	End of Year						
sees alan	20	Total assets (Part X, line 16)	73,452,8		73,322,307						
S B S	21	Total liabilities (Part X, line 26)	33,238,6		33,540,196						
Net Assets of Fund Balances	22	Net assets or fund balances Subtract line 21 from line 20	40,214,1		39,782,111						
	rt II		10/211/1		33,,02,111						
Jnd (no	er per	alties of perjury, I declare that I have examined this return, including accompanying and belief, it is true, correct, and complete Declaration of preparer (other than office									
		******	2017-11-10								

Date Sign Here YVETTE WHITE-WIGGINS CFO AND SVP, FINANCE & ADMIN Type or print name and title Print/Type preparer's name DAVID TRIMNER CPA Preparer's signature DAVID TRIMNER CPA Date PTIN P00444822 Check  $\square$  if **Paid** self-employed Firm's name CLIFTONLARSONALLEN LLP Firm's EIN ► 41-0746749 Preparer Firm's address ▶ 901 N GLEBE ROAD SUITE 200 Phone no (571) 227-9500 **Use Only** ARLINGTON, VA 22203 ☑ Yes ☐ No May the IRS discuss this return with the preparer shown above? (see instructions) Cat No 11282Y Form **990** (2016)

Form	990 (2016)				Page <b>2</b>
Par	tiiii Sta	ement of Program Service Acco	mplishments		
	Chec	k if Schedule O contains a response or n	ote to any line in this Part III		🗹
1		ibe the organization's mission			
WAS IN TI REPF ALSO	HINGTON DC HE LIFE SCIEI RESENT COMF ) INCLUDE UI	DGY INNOVATION ORGANIZATION (BIO) STATE CAPITALS, AND INTERNATIONAL ICES TO OVERCOME CHALLENGES IN HE ANIES OFFERING A SPECTRUM OF BIOTI IVERSITIES, NONPROFITS, PATIENT GR S BIO'S ACTIVITIES ARE BROKEN DOW	FORA BIO IS FOUNDED ON THE PI ALTH CARE, AGRICULTURE, INDUST CHNOLOGY APPLICATIONS ACROSS DUPS, AND OTHER ORGANIZATIONS	RINCIPLE THAT POLICY MUST N FRY, AND THE ENVIRONMENT ( S MAJOR SECTORS OF THE ECC S THAT PLAY AN IMPORTANT RO	JURTURE INNOVATION OUR MEMBERS NOMY BIO MEMBERS
2	Did the orga	nization undertake any significant progr	am services during the year which w	vere not listed on	
	the prior Fo	m 990 or 990-EZ?			🗌 Yes 🗹 No
	,	cribe these new services on Schedule O			
3	_	nization cease conducting, or make sign	•	any program	☐ Yes ☑ No
		cribe these changes on Schedule O			⊔ Yes ⊻ No
4	Describe the Section 501	e organization's program service accomp (c)(3) and 501(c)(4) organizations are re nd revenue, if any, for each program ser	equired to report the amount of gran		
4a	(Code See Additiona	) (Expenses \$ Data	including grants of \$	) (Revenue \$	)
4b	(Code See Additiona	) (Expenses \$ Data	including grants of \$	) (Revenue \$	)
4c	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
4d	Other progr	am services (Describe in Schedule O )			
	(Expenses		ants of \$	(Revenue \$	)
4e	Total prog	am service expenses ▶			

Yes

Page 3

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or X as applicable

Section 501(c)(3) organizations.

	A.TV. Charlist of Bassisad Caladulas	
201	t IV Checklist of Required Schedules	
1	Is the organization described in section $501(c)(3)$ or $4947(a)(1)$ (other than a private foundation)? If "Yes," complete Schedule $A$	1
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates	

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

Did the organization receive or hold a conservation easement, including easements to preserve open space,

the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 🛸 . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🥞 . . . . . . . . . .

to provide advice on the distribution or investment of amounts in such funds or accounts?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

foreign organization? If "Yes," complete Schedule F, Parts II and IV . . . . . .

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? . . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) . . . .

**b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV . . . . . . . . . . . . . Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

b Was the organization included in consolidated, independent audited financial statements for the tax year?

assessments, or similar amounts as defined in Revenue Procedure 98-19?

Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?

Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 . . . . . . . If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX,

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Yes

Yes

Yes

Yes

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Par	t IV Checklist of Required Schedules (continued)					
			Yes	No		
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No		
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b				
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No		
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes			
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of					

	government on Part IX, column (A), line 1 ? If "Yes," complete Schedule 1, Parts I and II			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2° If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and		·	NI -

**b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

Did the organization maintain an escrow account other than a refunding escrow at any time during the year

**d** Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, 

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . .

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV . . . 💆 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

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instructions for applicable filing thresholds, conditions, and exceptions)

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Yes

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Yes

	t V Statements Regarding Other IRS Filings and Tax Compliance			Page 5
Fell	Check if Schedule O contains a response or note to any line in this Part V			П
	Check in Deficultie of Contains a response of flore to any line in this yard vir.		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable   1a   157			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by			
	this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
2.	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3a 3b	Yes	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a		163	
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?			
		4a	Yes	
b	If "Yes," enter the name of the foreign country ►IN  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
	See instructions for filling requirements for Filicely Form 114, Report of Foreign Bank and Financial Accounts (FBAK)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
Ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	35		
·	The rest, to line 3a of 3b, did the organization me form 6000-1.	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization	6a		No
_	solicit any contributions that were not tax deductible as charitable contributions?			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7				
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services	7a		
	provided to the payor?			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
А	If "Yes," indicate the number of Forms 8282 filed during the year	<del>,</del>		
u	The rest, indicate the number of forms 0202 filed during the year 1. 1. 1.			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			
_		7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	7f		
g	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form			
	1098-C?	7h		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during			
	the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12   10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them )			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for			
	additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
r	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
	, and a contract of the contra		orm <b>99</b>	<b>0</b> (2016

OHIII	990 (2016)			Page <b>o</b>
Par	<b>TVI</b> Governance, Management, and DisclosureFor each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	o" respo	nse to li	nes
	Check if Schedule O contains a response or note to any line in this Part VI			<b>✓</b>
Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 114	+		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent  1b 11a	, 		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervisio of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	ie Code		
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
Ь	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt			
	status with respect to such arrangements?	16b		
	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records >YVETTE WHITE-WIGGINS 1201 MARYLAND AVENUE SW SUITE 990 WASHINGTON, DC 20024 (202) 962-9200			

orm 990 (2	2016)	Page <b>7</b>
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors	
	Check if Schedule O contains a response or note to any line in this Part VII	
Section	A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees	
La Complete	e this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's	tax

year • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid

• List all of the organization's current key employees, if any See instructions for definition of "key employee" • List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee)

who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(B)

(A)

• List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(C)

(D)

Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless person compensation compensation amount of other week (list is both an officer and a from the from related compensation any hours director/trustee) organization (Worganizations from the for related 2/1099-MISC) (W- 2/1099organization and Highest compensated employee Individual trustee or director Former organizations MISC) related Institutional Trustee below dotted employee organizations line) See Additional Data Table

(F)

(E)

MCCALL & ASSOC EVENTS MANAGEMENT INC

compensation from the organization ▶ 94

350 FLORIDA STREET SAN FRANCISCO, CA 94110

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) (B) (C) (D) (E) (F)

Page 8

FCII	Section A. Officers, Direct	tors, rrustees	s, Key	LIIIPI	Oye	.cs,	allu	ıngı	lest compensate	d Lilipioyees (co	ricinaec	1)	
	<b>(A)</b> Name and Title	(B) Average hours per week (list any hours	than d	one bo	ox, u an off	t che unles ficer	eck moss pers r and a tee)	son	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	amou com		ited f other sation
		for related organizations below dotted line)	individ or dire	Institu	Officer	Key en	Highes	Former	2/1099-MISC)	2/1099-MISC)	•	relate	on and ed ations
		inic)	individual trustee or director	Institutional Trustee		key employee	Highest compensat emplovee						
			1. 1.	istee			nsat ed						
See /	Additional Data Table												
				_			_				-		
16.6	Sub-Total						<u> </u>						
c T	Sub-Total	art VII, Sectio	nΑ.				•		6,475,550	0		1	1,122,041
2	Total number of individuals (including of reportable compensation from the	g but not limited	l to thos					rec		00,000			· · ·
											Y	es	No
3	Did the organization list any <b>former</b> of line 1a? <i>If "Yes," complete Schedule 3</i>										3		No
4	For any individual listed on line 1a, is organization and related organization individual									the	4 Y	es	
5	Did any person listed on line 1a receiv services rendered to the organization									vidual for	5		No
Se	ection B. Independent Contract	ors			—								
1	Complete this table for your five high- from the organization Report comper	est compensate									ensatior	ו	
	Name a	(A) and business addre	ess						Descr	(B) ription of services	Со	(C mpen	) sation
WHIT	E64 WESTWOOD CENTER DRIVE 4TH FLO									ATION SERVICES			637,817
TYSO	NS, VA 22182 MAN EXPOSITIONS								CONVENTIO	N & CONFERENCES		2,	429,567
	DX 660613 AS, TX 75266								GENERAL CO				·
SMG I	FOOD & BEVERAGE								CATERING			1,	778,324
WEST	ONSHOHOCHEN STATE ROAD CONSHOSHOCHEN, PA 19428 ECTION INC								AV				987,425
	DX 890472 LOTTE, NC 28289												
	LL A ACCOC EVENTS MANAGEMENT THE								EVENT ****	CEMENT			070.005

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

872,995

EVENT MANAGEMENT

Part		I Statement of	Revenue									rage <b>3</b>
				a respo	onse or note to any	line in thi	ıs Part VIII					🗆
						( <b>A</b> Total re		Relat exe fund	B) ted or mpt ction	(C) Unrelat busine revent	ss	(D) Revenue excluded from tax under sections
	12	Federated campaign	ns	1a				rev	enue			512-514
ons, Gifts, Grants Similar Amounts		<b>b</b> Membership dues		1b								
iral nou		c Fundraising events		1c								
s, G An		d Related organizatio		1d								
Giffs, nilar A		e Government grants (co		1e								
S E		F All other contributions,	·	<u>re</u>								
tior er S	'	and similar amounts no above		1f								
tributio Other	١,	Noncash contribution	ons included									
Contributions, and Other Sim		ın lınes 1a-1f \$										
<u>ة</u> ك	<u> </u>	Total.Add lines 1a-1	.f		<u> ▶</u> _							
КIе					Business							
YeV.		CONFERENCE/MEETING	REVENUE			541800 900099		66,250	35,903	·	362,8	72
υ ČĚ		MEMBERSHIP DUES INTERNATIONAL EFFOR	TC			900099		80,251 21,119	27,980	1,119		
Service Revenue		ALLIANCE/OUTREACH S				900099		63,041		3,041		
ૠ	e	·										
Program	_	All other program se	rvice revenue	<u>.</u>								
<b>P</b>	g	<b>Total.</b> Add lines 2a-2f	f		<b>▶</b>	830,661						
	3	Investment income (ii	ncluding divid	lends, ı	nterest, and other	1	. 710.10					1 710 101
		similar amounts) . Income from investme			• • • • • • • • • • • • • • • • • • • •	`	1,712,494	+				1,712,494
		Royalties		•	•		8,671,027	7				8,671,027
			(ı) Rea		(II) Personal	<del>                                     </del>						
	6a	Gross rents				7						
	h	Less rental expenses		36,959 36,959		-						
		, 2300 Torreat exported		00,505								
	c	; Rental income or (loss)		0								
	d	Net rental income o	r (loss) .     .			1						
			(ı) Securi	ties	(II) Other	1						
	7a	Gross amount from sales of		52,415		1						
		assets other than inventory		52,115								
	h	Less cost or				-						
	_	other basis and sales expenses		52,213								
	c	Gain or (loss)		202		1						
	d	Net gain or (loss) .			<b>&gt;</b>	]	202	2				202
۵.	8a	Gross income from for (not including \$	undraising ev	ents of								
Other Revenue		contributions reporte										
eve		See Part IV, line 18				4						
ä		Less direct expense: Net income or (loss)		<b>b</b>   sına ev	ents 🏲	_						
the		Gross income from g	amıng actıvıt			1						
0		See Part IV, line 19		a								
	ь	Less direct expense	s	b		-						
		: Net income or (loss)		activiti	ies Þ	_						
	10a	Gross sales of invent returns and allowand	ory, less									
		returns and anoware		a								
	b	Less cost of goods s	sold	b								
	c	Net income or (loss)		invent								
	11	Miscellaneous aLEGAL	Revenue		Business Code 90009	9	648,068	3	648,068			
		LEGAL			30003		010,000		0 10,000			
	h	EPF MEMBER SUPPO	PT.		90009	9	500,000		500,000			
	_	LIT MEMBER SUPPO	181				,					
	c	POLICY SUPPORT			90009	9	244,000		244,000			
		J.										
	d	All other revenue .					308,958	3	150,000		48,696	110,262
	e	Total. Add lines 11a	-11d		>		1,701,026	5				
	12	<b>Total revenue.</b> See	Instructions				76,915,410		66,009,857		411,568	10 402 005
							, 0, 213,410	1	00,009,03/	I	111,300	10,493,985 Form <b>990</b> (2016)

exceeds 10% of line 25, column (A) amount, list line 24e

25 Total functional expenses. Add lines 1 through 24e

26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)

expenses on Schedule O )

a DUES & SUBSCRIPTIONS

c BIO LEGISLATIVE DAY/FLY

**b** OUTREACH

d TAXES PAID

e All other expenses

For	m 990 (2016)				Page <b>10</b>
	Irt IX Statement of Functional Expenses tion 501(c)(3) and 501(c)(4) organizations must complete all co	lumns All other orga	nızatıons must com	plete column (A)	
	Check if Schedule O contains a response or note to any	line in this Part IX			🗹
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	596,583	·		
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	5,082,613			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	21,261,323			
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	1,168,393			
9	Other employee benefits	2,813,420			
10	Payroll taxes	1,330,059			
11	Fees for services (non-employees)				
i	a Management				
ı	b Legal	1,043,520			
•	c Accounting	67,104			
	d Lobbying	2,699,234			
	e Professional fundraising services See Part IV, line 17				
1	f Investment management fees	57,103			
,	g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	12,324,820			
12	Advertising and promotion	320,067			
13	Office expenses	858,339			
14	Information technology	1,434,956			
15	Royalties				
16	Occupancy	4,119,901			
17	Travel	1,537,522			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19	Conferences, conventions, and meetings	16,599,092			
20	Interest	5,308			
21	Payments to affiliates	3,198,613			
22	Depreciation, depletion, and amortization	691,793			
23	Insurance	135,749			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount				

1,107,420

511,460

190,343

161,239

58,703 79,374,677

Form **990** (2016)

					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			61,943	1	5,985,669
	2	Savings and temporary cash investments .		[	12,937,952	2	2,007,963
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net		[	2,130,779	4	3,306,569
s	6	Loans and other receivables from current and for trustees, key employees, and highest compensations of Schedule L Loans and other receivables from other disquals section 4958(f)(1)), persons described in section contributing employers and sponsoring organizations voluntary employees' beneficiary organizations Part II of Schedule L	rsons (as defined under (c)(3)(B), and frection 501(c)(9)		5		
sset	7	Notes and loans receivable, net				7	
SS	8	Inventories for sale or use				8	
⋖	9	Prepaid expenses and deferred charges		[	2,095,808	9	2,073,003
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	10,206,672			
	۱ ۲	Local perumulated depresention	106	9 633 777	1 910 704	100	1 572 805

et	7	Notes and loans receivable, net				7	
Ass	8	Inventories for sale or use				8	
A	9	Prepaid expenses and deferred charges			2,095,808	9	2
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	10,206,672			
	Ь	Less accumulated depreciation	<b>10</b> b	8,633,777	1,810,704	<b>10</b> c	1
	11	Investments—publicly traded securities .	54,290,166	11	58		
	12	Investments—other securities See Part IV, line	11 .			12	
	13	Investments—program-related See Part IV, line	≥ 11 .			13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11	125,448	15			
	16	Total assets.Add lines 1 through 15 (must equ	73,452,800	16	73		
-	17	Accounts payable and accrued expenses		15,615,548	17	17	
	l						

	D	Less accumulated depreciation	100	0,033,777	1,610,704	100	1,572,695
	11	Investments—publicly traded securities .			54,290,166	11	58,032,455
	12	Investments—other securities See Part IV, line		12			
	13	Investments—program-related See Part IV, line	11 .			13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			125,448	15	343,753
	16	Total assets.Add lines 1 through 15 (must equa	al line	34)	73,452,800	16	73,322,307
	17	Accounts payable and accrued expenses			15,615,548	17	17,667,769
	18	Grants payable				18	
	19	Deferred revenue			12,736,910	19	11,510,981
	20	Tax-exempt bond liabilities				20	
Š	21	Escrow or custodial account liability Complete P	art IV	of Schedule D		21	
ilitie	21 22 23	Loans and other payables to current and former key employees, highest compensated employees					
iat iat		persons Complete Part II of Schedule L $$ .				22	
L	23	Secured mortgages and notes payable to unrela	ted thi	rd parties		23	
	24	Unsecured notes and loans payable to unrelated	third	parties		24	

	I	, , , , , , , , , , , , , , , , , , ,	I		1
	16	Total assets.Add lines 1 through 15 (must equal line 34)	73,452,800	16	73,322,307
	17	Accounts payable and accrued expenses	15,615,548	17	17,667,769
	18	Grants payable		18	
	19	Deferred revenue	12,736,910	19	11,510,981
	20	Tax-exempt bond liabilities		20	
Ś	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
iabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
iab		persons Complete Part II of Schedule L		22	
Ľ	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties,	4,886,185	25	4,361,446

iabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
<u> </u>		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	4,886,185	25	4,361,446
	26	Total liabilities. Add lines 17 through 25	33,238,643	26	33,540,196

40.214.157

40,214,157

73,452,800

27

28

29

30

32

33

34

39.782.111

39,782,111 73,322,307

Form **990** (2016)

Organizations that follow SFAS 117 (ASC 958), check here ightharpoonup and

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.

Capital stock or trust principal, or current funds . . . .

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Unrestricted net assets

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Assets or Fund Balances

27

28

29

30

31

32

33

☐ Both consolidated and separate basis

2c

3a

3b

Yes

No

Form 990 (2016)

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Consolidated basis

consolidated basis, or both

Separate basis

Audit Act and OMB Circular A-133?

### Additional Data

Software ID:

**Software Version:** 

**EIN:** 52-1224577

ADVOCACY BIOTECHNOLOGY INNOVATION ORGANIZATION (BIO)'S ADVOCACY EFFORTS REFLECT THE PRIORITIES IDENTIFIED BY THE BIO BOARD OF DIRECTORS AND

Name: BIOTECHNOLOGY INNOVATION ORGANIZATION

Form 990 (2016)

#### Form 990, Part III, Line 4a:

THE FOUR SECTION GOVERNING BOARDS THE BOARD OF DIRECTORS FOCUSES ON ISSUES OF IMPORTANCE TO ALL BIO MEMBERS, REGARDLESS OF THEIR SIZE OR TECHNOLOGY THESE CROSS-CUTTING ADVOCACY ACCOMPLISHMENTS IN 2016 ARE LISTED BELOW - SAFEGUARDED AND ADVANCED INTELLECTUAL PROPERTY PROTECTIONS, DOMESTICALLY AND INTERNATIONALLY - FOSTERED A DIALOGUE ABOUT BIOETHICS AND PROACTIVELY ADVANCED THE SOCIALLY RESPONSIBLE USE OF BIOTECHNOLOGY - PROMOTED INVESTMENT IN GOVERNMENT AND ACADEMIC RESEARCH - PROMOTED COMPREHENSIVE REFORM OF THE U.S. TAX CODE TO SPUR INNOVATION AND INVESTMENT IN BIOTECHNOLOGY - EXPANDED OUTREACH TO FOREIGN GOVERNMENTS AND INTERNATIONAL ENTITIES TO EDUCATE ON POLICY ISSUES OF IMPORTANCE TO THE BIOTECHNOLOGY INDUSTRY AND TO IMPROVE THE INVESTMENT AND REGULATORY CLIMATE FOR BIOTECH PRODUCTS THE HEALTH SECTION 2016 ADVOCACY ACCOMPLISHMENTS - ADVOCATED FOR THE PASSAGE OF THE 21ST CENTURY CURES ACT - SUCCESSFULLY FINISHED NEGOTIATIONS ON REAUTHORIZING THE PRESCRIPTION DRUG USER FEE ACT TO IMPROVE THE U.S. FOOD AND DRUG ADMINISTRATION'S (FDA'S) PROCESS FOR HUMAN DRUG REVIEW -PROMOTED HEALTHCARE POLICIES THAT RECOGNIZE BOTH THE PROMISE AND VALUE OF INNOVATION - ADVOCATED FOR A SAFE AND PREDICTABLE REGULATORY ENVIRONMENT FOR VALUE-BASED PAYMENT ARRANGEMENTS FOR DRUGS AND BIOLOGICS - ENHANCED AND PROTECTED PATIENT ACCESS TO INNOVATIVE THERAPIES AND PROMOTED THE NEED FOR GREATER NONDISCRIMINATION ENFORCEMENT AGAINST INSURANCE BENEFIT DESIGNS - ADVOCATED FOR BIOSIMILARS POLICIES THAT PROTECT PATIENT SAFETY, PROMOTE BIOMEDICAL INNOVATION, AND ADVANCE THE SCIENCE-BASED REVIEW AND APPROVAL OF BIOSIMILARS AND INTERCHANGEABLE BIOLOGICAL PRODUCTS - PROMOTED THE VALUE OF U.S. GOVERNMENT INVESTMENTS IN PROGRAMS THAT IMPROVE ACCESS TO IMMUNIZATIONS AND FOSTER VACCINE INNOVATION, STRENGTHENED OUR ABILITY TO RESPOND TO BIOTERROR THREATS OR EMERGING INFECTIOUS DISEASES, AND ENCOURAGED DEVELOPMENT OF NEW PRODUCTS TO FIGHT ANTIMICROBIAL RESISTANCE (AMR) - INFLUENCED IMPROVEMENTS TO THE INTERNATIONAL ENVIRONMENT FOR BIOMEDICAL INNOVATION AND GLOBAL PUBLIC HEALTH PREPAREDNESS THE EMERGING COMPANIES SECTION 2016 ADVOCACY ACCOMPLISHMENTS - ADVANCED THE INTEREST OF EMERGING COMPANIES IN CAPITAL FORMATION AND FINANCIAL SERVICES POLICY - ADVOCATED FOR TAX POLICIES SUPPORTING INNOVATIVE EMERGING COMPANIES AND INVESTMENT IN GROUNDBREAKING R&D, ENHANCED THE VOICE OF PRE-REVENUE, R&D-INTENSIVE BUSINESSES IN THE TAX REFORM DEBATE - ADVOCATED FOR THE REMOVAL OF BURDENSOME FINANCIAL REPORTING REGULATIONS ON EMERGING COMPANIES - SUPPORTED THE SEC SMALL BUSINESS ADVOCATE ACT TO ENHANCE THE ROLE OF SMALL BUSINESSES IN THE SEC'S DECISION-MAKING PROCESS, WHICH WAS SIGNED INTO LAW BY PRESIDENT OBAMA IN DECEMBER 2016 THE FOOD & AGRICULTURE SECTION 2016 ADVOCACY ACCOMPLISHMENTS - SUCCESSFULLY ADVOCATED FOR PASSAGE OF THE NATIONAL BIOENGINEERED FOOD DISCLOSURE LAW -WORKED WITH THE ADMINISTRATION AND CONGRESS TO ADVANCE IMPROVEMENTS TO THE U.S. AND GLOBAL REGULATORY SYSTEMS FOR AG-BIOTECH PRODUCTS. WORKED WITH MEMBERS OF THE AGRICULTURAL VALUE CHAIN TO ADDRESS TRADE ISSUES IN AGRICULTURAL EXPORT MARKETS SUCH AS CHINA AND EUROPE -WORKED WITH AGRICULTURAL INDUSTRY ALLIES TO OPPOSE FEDERAL AND STATE-LEVEL INITIATIVES AIMED AT MANDATING GMO FOOD LABELING - ADVOCATED IN LEGISLATURES AND COURTS TO PRESERVE THE RIGHTS OF FARMERS TO PLANT GENETICALLY ENGINEERED CROPS THE INDUSTRIAL & ENVIRONMENTAL SECTION 2016 ADVOCACY ACCOMPLISHMENTS - PRODUCED A RENEWABLE CHEMICALS REPORT TO CAPTURE THE BROAD SCOPE OF TECHNOLOGIES. PARTNERSHIPS. AND RAPID GROWTH OF THE RENEWABLE CHEMICALS SECTOR - ADVOCATED FOR EPA TO TREAT ALL SUSTAINABLY SOURCED BIOMASS AS ELIGIBLE MEASURES FOR EMISSIONS REDUCTION CREDIT (ERC) GENERATION - ADVOCATED REGARDING THE PASSAGE AND IMPLEMENTATION OF THE TOXIC SUBSTANCES CONTROL ACT (TSCA) AS AMENDED BY CONGRESS. AS WELL AS ISSUES RELATING TO THE NATIONAL BIOENGINEERED FOOD DISCLOSURE ACT - ENGAGED WITH THE ADMINISTRATION'S REVIEW OF THE COORDINATED FRAMEWORK FOR BIOTECHNOLOGY, INCLUDING WITH RESPECT TO THE REGULATION OF GENETICALLY ENGINEERED (GE) ALGAE - SUCCESSFULLY SECURED POSITIVE CHANGES TO EPA'S FINAL RENEWABLE FUEL STANDARDS (RFS) RULE FOR 2017 - URGED CONGRESS TO EXTEND A SUITE OF CRITICAL ADVANCED BIOFUELS TAX INCENTIVES BEYOND 2016

SERVICES BIO'S SERVICES INCLUDE CONFERENCES AND ACTIVITIES THAT BRING TOGETHER INDUSTRY PARTNERS AND INVESTORS FOR EVENTS RANGING FROM THE BIO INTERNATIONAL CONVENTION TO CONFERENCES FOR BUSINESS DEVELOPMENT EXECUTIVES. THE BIO INTERNATIONAL CONVENTION ATTRACTS APPROXIMATELY 16.000 OF THE MOST INFLUENTIAL BIOTECH AND PHARMA ATTENDEES FROM 76 COUNTRIES AND 48 U.S. STATES, AS WELL AS THE DISTRICT OF COLUMBIA, PUERTO RICO AND THE US VIRGIN ISLANDS, INCLUDING 300 MEMBERS OF THE MEDIA, AND OFFERS THREE DAYS OF PROFESSIONAL AND BUSINESS DEVELOPMENT

OPPORTUNITIES THE NET INCOME FROM THE CONVENTION SUPPORTS OUR ADVOCACY, PUBLIC OUTREACH, AND OTHER MEMBER SERVICE ACTIVITIES THE KEY

Form 990, Part III, Line 4b:

INVESTORS AND OTHER ORGANIZATIONS

ELEMENTS OF THE BIO INTERNATIONAL CONVENTION ARE EDUCATIONAL PROGRAMMING, EXHIBITION, THE BIO BUSINESS FORUM, AND NETWORKING EVENTS. THESE ELEMENTS PROVIDE AN OPPORTUNITY FOR BIOTECHNOLOGY AND PHARMACEUTICAL COMPANIES, ACADEMIC RESEARCH INSTITUTIONS, AND INVESTORS FROM AROUND THE WORLD TO LEARN ABOUT RECENT SCIENTIFIC AND POLICY DEVELOPMENTS. AND SCHEDULE ONE-ON-ONE MEETINGS TO DISCUSS POTENTIAL BUSINESS OPPORTUNITIES IN 2016, THE BIO BUSINESS FORUM ALONE HELPED HOST A RECORD NUMBER OF OVER 35,700 PARTNERING MEETINGS AMONG MORE THAN 3,400

COMPANIES, ALONG WITH 192 COMPANY PRESENTATIONS, OVER 800 SPEAKERS, 1,800 EXHIBITIONS WITH 50 INTERNATIONAL, REGIONAL AND STATE PAVILIONS AND SEVEN PRODUCT FOCUS ZONES BEYOND THE CONVENTION. BIO HOSTS OR CO-HOSTS A NUMBER OF NATIONAL AND INTERNATIONAL CONFERENCES THAT PROVIDE

VENUES FOR MEMBER AND NON-MEMBER COMPANIES TO PRESENT NEW DATA, MEET AND PARTNER WITH FELLOW BIOTECH COMPANIES, AND ATTRACT FUNDING FROM

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (E) (D) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless compensation compensation amount of other hours per person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and Highest compensa Former Individual trustee or director Institutional organizations MISC) MISC) related below dotted organizations employee line) Truste

			·ī		1 ed			
RON COHEN MD	2 00	×		v		0	0	
CHAIRMAN		^		^				
DAVID P MEEKER MD	2 00	I ↓		V		0	0	
SECRETARY		^		^		0		
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DAVID P MEEKER MD	2 00	¥	¥		Ī
SECRETARY		^	^		L
BRADFORD A ZAKES	2 00	×	x		
TREASURER		χ	`		
DANIEL JUNIUS	2 00				Ī

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TREASURER (PARTIAL YEAR)

SECRETARY (PARTIAL YEAR)

DEBORAH DUNSIRE MD

ADAM MONROE

BOARD MEMBER

BOARD MEMBER

**BOARD MEMBER** 

ALBERT BOURLA

BOARD MEMBER

BOARD MEMBER

ALEX AZAR

ALAN SHAW

ADELENE PERKINS

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless compensation compensation amount of other person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and Highest compensatemplovee Former Individual trustee or director Institutional organizations MISC) MISC) related director below dotted organizations employee line)

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ANNA RATH	2 00	×			0	0	
BOARD MEMBER		^					

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BRIAN BARKER BOARD MEMBER

BOARD MEMBER

BOARD MEMBER

BOARD MEMBER

BOARD MEMBER

CLIVE MEANWELL

**BOARD MEMBER** 

DAN MEAGHER

BOARD MEMBER

DAPHNE PREUSS

BOARD MEMBER

CHRISTIAN NOLET

CHRISTOPHER BOERNER

CARLOS PAYA

C DAVID NICHOLSON

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless hours per compensation compensation amount of other person is both an officer week (list from the from related compensation and a director/trustee) any hours organizations organization from the for related (W-2/1099-(W-2/1099organization and Highest compensati Former Individual trustee or director Key employee Institutional organizations MISC) MISC) related below dotted organizations line) Truste

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DAVID STACK	2 00	×			0	0	
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EDDIE SULLIVAN	2 00	V			0	0	
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ELT BEN-SHOSHAN	2 00						

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ELI BEN-SHOSHAN	2 00	l			0	0	0
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ELIZABETH LEWIS	2 00	l			0	0	0
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EMIL KAKKIS

**BOARD MEMBER** 

**BOARD MEMBER** 

**GARY PHILLIPS** 

BOARD MEMBER

FRANK TERHORST

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (E) (D) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless compensation compensation amount of other person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and Highest compensatemplovee Former Individual trustee or director Institutional organizations MISC) MISC) related director below dotted organizations employee line) 2 00 GARY ZIEZIULA

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BOARD MEMBER								
GIL VAN BOKKELEN PHD	2 00							
BOARD MEMBER		*						
GLENN GORMLEY	2 00						0	
BOARD MEMBER		^					٥	

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HAROLD E VAN WART PHD

BOARD MEMBER

HENRI A TERMEER

BOARD MEMBER

HERVE HOPPENOT

BOARD MEMBER

HOWARD ROBIN

BOARD MEMBER

**BOARD MEMBER** 

BOARD MEMBER

JACK BERNENS

BOARD MEMBER

IAN CLARK

HUGH C WELSH JD

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless compensation compensation amount of other person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and Highest compensatemplovee Former Individual trustee or director Institutional organizations MISC) MISC) related below dotted organizations employee line) 2 00 JAMES HEALY

BOARD MEMBER	•••••	×			0	0	
JAMES LEVINE BOARD MEMBER	2 00	x			0	0	
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JAMES SAPIRSTEIN	2 00	¥
BOARD MEMBER		^
JAMES SULLIVAN	2 00	

BOARD MEMBER

BOARD MEMBER

BOARD MEMBER

BOARD MEMBER

**BOARD MEMBER** 

BOARD MEMBER

JEFFREY CLELAND

BOARD MEMBER

JEAN-CHRISTOPHE TELLIER

JEAN-CHRISTOPHE WESTPHAL

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JEAN-FRANCOIS FORMELA

JEAN-JACQUES BIENAIME

JAY SIEGEL

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless compensation compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and Highest compensatemplovee Former Individual trustee or director Institutional related organizations MISC) MISC) below dotted organizations employee line) 2 00 JENNIFER HOLMGREN ...... Χ BOARD MEMBER 2 00 JEREMY LEVIN . . . . . . . . . . . . . . . . . . Х 0 BOARD MEMBER 2 00 JERRY FLINT 2 00 Х 2 00

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BUARD MEMBER
JIM MEYERS
BOARD MEMBER
JOEL MARCUS
BOARD MEMBER

JOHN CROWLEY

BOARD MEMBER

JOHN GLASSPOOL

JOHN MARAGANORE

BOARD MEMBER

**BOARD MEMBER** 

BOARD MEMBER

JOHN MENDLEIN

BOARD MEMBER

JOHN MELO

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless compensation compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and Highest compensatemplovee Former Individual trustee or director Institutional organizations MISC) MISC) related below dotted organizations employee line) 2 00 JOHN ORWIN ...... Χ BOARD MEMBER 2 00 JOHN SWART

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BOARD MEMBER

JONATHAN LEFF BOARD MEMBER

BOARD MEMBER

JOSEPH LAROSA

BOARD MEMBER

BOARD MEMBER

BOARD MEMBER

**BOARD MEMBER** 

KATRINE BOSLEY

BOARD MEMBER

BOARD MEMBER

JOSEPH SHAULSON

JULIE GERBERDING

KATHLEEN TREGONING

KIRAN MAZUMDAR-SHAW

JONATHAN WOLFSON

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless compensation compensation amount of other person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and Highest compensat Former Individual trustee or director Institutional organizations MISC) MISC) related below dotted organizations employee line) Trust

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MARK ALLES	2 00	·		
BOARD MEMBER		<b>~</b>		
MARK ENYEDY	2 00	·		
BOARD MEMBER		^		
MARK IONES	2 00			

BOARD MEMBER

MARK PRUZANSKI

BOARD MEMBER

MARK SKALETSKY

BOARD MEMBER

BOARD MEMBER

BOARD MEMBER

MARTIN BABLER

**BOARD MEMBER** 

MAXINE GOWEN

BOARD MEMBER

BOARD MEMBER

MICHAEL KNUTZEN

MARKUS POMPEJUS

MARK TIMNEY

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless hours per compensation compensation amount of other person is both an officer week (list from the from related compensation any hours organizations and a director/trustee) organization from the for related (W-2/1099-(W-2/1099organization and Office Highest compensa Former Individual trustee or director Institutional MISC) organizations MISC) related below dotted organizations employee line) Truste

MICHAEL NARACHI  BOARD MEMBER  MICHAEL RAAB  BOARD MEMBER  X  0  0  0  0  0  0  0  0  0  0  0  0			ग		ted			
BOARD MEMBER  MICHELLE DIPP  2 00  0		l 🗸				0	0	
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MONCEF SLAOUI	2 00	V				0	
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NANCY SIMONIAN	2 00	<b> </b>			0	0	
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BOARD MEMBER

NICK LESCHLY

**BOARD MEMBER** 

PAUL EISENBERG

**BOARD MEMBER** 

PAUL HASTINGS

BOARD MEMBER

BOARD MEMBER							
NEIL GOLDSMITH	2 00	l .			0	0	(
BOARD MEMBER							
NETL V MADMA	2 00						

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless compensation compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and Highest compensatemplovee Former Individual trustee or director Institutional organizations MISC) MISC) related director. below dotted organizations employee line) 2 00 PERRY KARSEN ...... ...... BOARD MEMBER

PETER GREENLEAF	2 00					
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BOARD MEMBER		.,				
PHILIP MILLER	2 00					
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BOARD MEMBER						

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PAUL BACKMAN

**BOARD MEMBER** 

BOARD MEMBER

RICHARD POPS

BOARD MEMBER

BOARD MEMBER

**BOARD MEMBER** 

ROBERT REPELLA

BOARD MEMBER

ROBERT WILLS

BOARD MEMBER

RICK WINNINGHAM

RICK VAN GENDEREN

RACHEL KING

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent, Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless hours per compensation compensation amount of other person is both an officer from related week (list from the compensation any hours and a director/trustee) organizations organization from the for related (W-2/1099-(W-2/1099organization and Highest compensated employee Former Individual trustee or director Institutional MISC) related organizations MISC) below dotted organizations employee line) Trustee

RONALD STOTISH	2 00								
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BOARD MEMBER		'`					_	Ĭ	
RUSSELL HERNDON	2 00								
		Ιx					l o	l o	
BOARD MEMBER		''					Ĭ	_	

RUSSELL HERNDON	2 00	×			0	0	
BOARD MEMBER		^			3	3	
SANDY MACRAE	2 00	x			0	0	
BOARD MEMBER		^			9	0	
CARINE LLITY	2 00						

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BOARD MEMBER

STEVEN MENTO

BOARD MEMBER

**BOARD MEMBER** 

BOARD MEMBER

BOARD MEMBER

THOMAS MATHERS

STUART A ARBUCKLE

STEVEN PAUL

BOARD MEMBER		^			0		
SANDY MACRAE	2 00	_			0	0	
BOARD MEMBER		^			U		
SABINE LUIK	2 00	_			0	0	
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BOTTO TIETEER							
SANDY MACRAE	2 00	×			0	0	0
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SABINE LUIK	2 00	V			0	0	0
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SABINE LUIK		١.,					1
BOARD MEMBER		×			0	0	0
SCOTT HOLMSTROM	2 00	l <sub>v</sub>			0	0	0
BOARD MEMBER		^					
SCOTT KOENIG	2 00						

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation any hours organizations and a director/trustee) organization from the for related (W-2/1099-(W-2/1099organization and Highest compensated employee Former Individual trustee or director Institutional organizations MISC) MISC) related below dotted organizations employee line)

THOMAS WIGGANS	2 00	×			0	0	
BOARD MEMBER							
TIMOTHY P WALBERT	2 00						
BOARD MEMBER		^					

SOARD MEMBER						
IMOTHY P WALBERT	2 00	v			0	
SOARD MEMBER		^			0	
JERK DE RUITER	2 00	V				
SOARD MEMBER		^				

THY P WALBERT	2 00	l x			0	
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D MEMBER		*			U	
IAM FIZSIMMONS	2 00					
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WILLIAM NEWELL

BOARD MEMBER

ADRIAN ADAMS

ARLENE MORRIS

BILL LIS

BOARD MEMBER (PARTIAL YEAR)

BOARD MEMBER (PARTIAL YEAR)

BOARD MEMBER (PARTIAL YEAR)

BOARD MEMBER (PARTIAL YEAR)

BRADLEY A SHURDUT ESQ

TJERK DE RUITER	2 00	,			_	0	_
BOARD MEMBER		_ ^			Ĭ		
WILLIAM FIZSIMMONS	2 00	V				0	
BOARD MEMBER		^				0	U
WILLIAM HINSHAW	2 00	v			0	0	0
BOARD MEMBER		^			ľ	١	

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless compensation amount of other hours per compensation person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and Highest compensat Former Individual trustee or director Institutional organizations MISC) MISC) related below dotted employee organizations line)

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BOARD MEMBER (PARTIAL YEAR)		^			3	Ì
CHRISTI L SHAW	2 00	,,				_
BOARD MEMBER (PARTIAL YEAR)		×			0	_
CHRISTOPHER STANDLEE	2 00					

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BOARD MEMBER (PARTIAL YEAR)

DAVID SCHENKEIN MD

EDWARD WILLIAMS

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DANIEL APEL

DANIEL CUMMINGS

DANIEL TASSE

DAVID HALLAL

DAVID PYOTT

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless hours per amount of other compensation compensation person is both an officer week (list from the from related compensation any hours and a director/trustee) organizations organization from the for related (W-2/1099-(W-2/1099organization and Highest compensat Former Individual trustee or director Institutional organizations MISC) MISC) related below dotted organizations employee line) Trustee

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FAHEEM HASNAIN	2 00	l 🗸			0	0	
BOARD MEMBER (PARTIAL YEAR)		_ ^			0	0	
FLEMING ORNSKOV	2 00	V			0	0	
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JEFFREY HATFIELD

JEFFREY WREN

JOHN MILLIGAN

BOARD MEMBER (PARTIAL YEAR)

BOARD MEMBER (PARTIAL YEAR)

BOARD MEMBER (PARTIAL YEAR)

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (E) (D) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless compensation compensation amount of other person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and Highest compensat Former Individual trustee or director Institutional organizations MISC) MISC) related below dotted organizations employee line) 2 00 JOSEF APPEL

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KLEANTHIS XANTHOPOULOUS	2 00	×			0	
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KRISTINE PETERSON	2 00	v			0	
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MARC BEER	2 00					

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KRISTINE PETERSON BOARD MEMBER (PARTIAL YEAR)	2 00	×			0	
MARC BEER BOARD MEMBER (PARTIAL YEAR)	2 00	x			0	
MARC VERBRUGGEN PHD BOARD MEMBER (PARTIAL YEAR)	2 00	x			0	

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MATTHIAS MEDER

PATRICK GRUBER

PAUL HUDSON

MICHAEL SEVERINO MD

PARIS PANAYIOTOPOULOS

BOARD MEMBER (PARTIAL YEAR)

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KRISTINE PETERSON	2 00	×				0	0	
BOARD MEMBER (PARTIAL YEAR)		_ ^				Ĭ		l
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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless compensation compensation amount of other hours per person is both an officer week (list from the from related compensation any hours organizations and a director/trustee) organization from the for related (W-2/1099-(W-2/1099organization and Highest compensat Former Individual trustee or director Institutional organizations MISC) MISC) related below dotted organizations employee line) Trust

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RAYMOND SACCHETTI	2 00				0	0	
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BOARD MEMBER (PARTIAL YEAR)						
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STEPHAN B TANDA

STEVEN H HOLTZMAN

WILLIAM FEEHERY

WILLIAM LIS

BOARD MEMBER (PARTIAL YEAR)

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ROBIN READNOUR	2 00	V				0	
BOARD MEMBER (PARTIAL YEAR)		×				0	
ROGER WYSE	2 00	v			0	0	0
BOARD MEMBER (PARTIAL YEAR)						0	

BOARD MEMBER (PARTIAL YEAR)		^				0	
ROGER WYSE	2 00	×			0	0	0
BOARD MEMBER (PARTIAL YEAR)						J	
STANLEY T CROOKE	2 00	×			0	0	0
BOARD MEMBER (PARTIAL YEAR)					ľ	Ĭ	ľ

0

0

Compensated Employees, and Independent Contractors (C) (D) (E) Name and Title Average Position (do not check more Reportable Reportable than one box, unless amount of other hours per compensation compensation week (list person is both an officer from the from related any hours and a director/trustee) organization organizations for related (W-2/1099-(W-2/1099organization and individu or direc X Highest employ Office Former Institut organizations MISC) MISC) below dotted ŝ

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

line)

	,	ual trustee stor	oonal Trustee		peyold	ee ee	,			
JAMES GREENWOOD PRESIDENT & CHIEF EXECUTIVE OFFICER	40 00			×				2,167,665	0	
YVETTE WHITE-WIGGINS SVP & CHIEF FINANCIAL OFFICER	40 00			×				285,042	0	
A SCOTT WHITAKER	40 00			¥				378 365	0	

JAMES GREENWOOD	40 00		×			2,167,665	0	679,191
PRESIDENT & CHIEF EXECUTIVE OFFICER			^			2,107,003		0/9,191
YVETTE WHITE-WIGGINS	40 00		х			285,042	0	61,304
SVP & CHIEF FINANCIAL OFFICER			^			283,042		01,304
A SCOTT WHITAKER	40 00		х			378,365	0	6,100
COO (PARTIAL YEAR)			^			376,303		0,100
THOMAS DILENGE	40 00			.,		604 200		64.631

FICER								
	40 00		×			285,042	0	
	40 00		×			378,365	0	
LIC POLICY DIV	40 00			×		604,209	0	
	40.00							

Х

Χ

Х

Х

425,151

457,292

508,453

469,065

(F)

Estimated

compensation

from the

related

organizations

5,499

34,286

48,380

50,536

65,176

0

0

0

A SCOTT WHITAKER	40 00		x			378,365	0	6,100
COO (PARTIAL YEAR)			$ \hat{\ } $			370,303		0,100
THOMAS DILENGE	40 00			¥		604,209	0	64.621
PRESIDENT, ADVOCACY, LAW & PUBLIC POLICY DIV				^		004,203		04,021
JOANNE DUNCAN	40 00			x		548.530	0	60.802

		l .	 	I	1			
THOMAS DILENGE	40 00		x			604.209	0	64,621
PRESIDENT, ADVOCACY, LAW & PUBLIC POLICY DIV						001,203		01,021
JOANNE DUNCAN	40 00		V			548,530	0	60.802
PRESIDENT, MEMBERSHIP & BUS OPER DIVISION			^			548,530	l o	60,802
AMY FINAN	40 00							

PRESIDENT, ADVOCACY, LAW & PUBLIC POLICY DIV			^		604,209	l o	04
JOANNE DUNCAN	40 00		х		548,530	0	60
PRESIDENT, MEMBERSHIP & BUS OPER DIVISION					3 10,330		
AMY FINAN	40 00		x		221,285	0	,
SVP, BUSINESS DEV (PARTIAL YEAR)			^		221,203		,

PRESIDENT, ADVOCACY, LAW & PUBLIC POLICY DIV			^		001,203	9	
JOANNE DUNCAN PRESIDENT, MEMBERSHIP & BUS OPER DIVISION	40 00		×		548,530	0	
AMY FINAN	40 00		X		221,285	0	

40 00

40 00

40 00

40 00

......

......

......

KATHLEEN HOLCOMBE

SVP, SCIENCE POLICY

EVP, HEALTH POLICY

EVP, INDUSTRIAL & ENVIRONMENT

SVP, INTERNATIONAL AFFAIRS

......

BRENT ERICKSON

JOSEPH DAMOND

DANIEL DURHAM

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors(C) (E) (D) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average hours per than one box, unless compensation compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization organizations from the

	C							/14/ 3/4000	/114/ 7/
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	<u>∓</u>	Ť	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/ MIS
IZABETH ECHAM	40 00		l	ıl		l			

. . . . . . . . . . . . . . . . . .

2/1099organization and SC) organizations

410,493

related

46,146

EVP, ECS & VP, SCIENCE & REGULATORY

ELIZABETH ESHAM

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

## **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. ▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at

OMB No 1545-0047

DLN: 93493314015687

Open to Public

Internal Revenue Service

EZ)

SCHEDULE C (Form 990 or 990-

Department of the Treasury www.irs.gov/form990. Inspection If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then • Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C • Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B Section 527 organizations Complete Part I-A only If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then • Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B • Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** BIOTECHNOLOGY INNOVATION ORGANIZATION 52-1224577 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV Political expenditures Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 1 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes Was a correction made? ☐ Yes □ No h If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization fileForm 1120-POL for this year? 4 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received funds If none, enter and promptly and -0directly delivered to a separate political organization If none, enter -0-3 5

Schedule C (Form 990 or 990-EZ) 2016

Total lobbying expenditures

Grassroots ceiling amount (150% of line 2d, column (e))

Grassroots nontaxable amount

Grassroots lobbying expenditures

Grants to other organizations for lobbying purposes?

If "Yes," enter the amount of any tax incurred under section 4912

Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?

Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?

If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

Did the organization agree to carry over lobbying and political expenditures from the prior year?

Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political

If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political

Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues

Were substantially all (90% or more) dues received nondeductible by members?

Did the organization make only in-house lobbying expenditures of \$2,000 or less?

#### (a) For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity Yes No During the year, did the filing organization attempt to influence foreign, national, state or local legislation, 1

including any attempt to influence public opinion on a legislative matter or referendum, through the use of

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)

and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see

Explanation

(b)

Amount

Yes

Yes

1

2

1

2a

2b

2c

3

4 5

Schedule C (Form 990 or 990EZ) 2016

No

No

No

27,980,251

9,095,951

-428.871

8.667.080

9,233,483

-566,403

Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? b Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements?

2a

1

2

3

1

2

c Total

Part IV

3

Part III-A

Part III-B

Current year

Carryover from last year

expenditure next year?

Return Reference

Volunteers?

Other activities?

Total Add lines 1c through 1i

(6).

answered "Yes."

Dues, assessments and similar amounts from members

Supplemental Information

expenses for which the section 527(f) tax was paid).

Taxable amount of lobbying and political expenditures (see instructions)

instructions), and Part II-B, line 1 Also, complete this part for any additional information

efile GRAPHIC print - DO NOT PROCESS SCHEDULE D

(Form 990)

As Filed Data -

DLN: 93493314015687 OMB No 1545-0047

**Supplemental Financial Statements** ▶ Complete if the organization answered "Yes," on Form 990,

> Open to Public Inspection

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990. Department of the Treasury Internal Revenue Service

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Employer identification number

BIC	DTECHNOLOGY INNOVATION ORGANIZATION			52-1224577		
Pa	Organizations Maintaining Donor Complete if the organization answere					
		(a) Donor advised fu	nds	(b)Funds and ot	her accounts	
1	Total number at end of year					
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor funds are the organization's property, subject to t			vised	☐ Yes	□ No
6	Did the organization inform all grantees, donors, used only for charitable purposes and not for the conferring impermissible private benefit?				☐ Yes	□ No
Pa	<b>Conservation Easements.</b> Complet	e if the organization ans	wered "Yes" on Forn	n 990, Part IV, lır	ne 7.	
1	Purpose(s) of conservation easements held by the	e organızatıon (check all tha –	t apply) —			
	Preservation of land for public use (e g , rec	reation or education) L	Preservation of an	historically importa	nt land area	
	Protection of natural habitat	L	Preservation of a c	ertified historic stru	cture	
	Preservation of open space					
2	Complete lines 2a through 2d if the organization leasement on the last day of the tax year	neld a qualified conservation	contribution in the for .		e End of the	Year
а	Total number of conservation easements			2a		
b	Total acreage restricted by conservation easemen		, ,	2b		
С.	Number of conservation easements on a certified		` '	2c		
d	structure listed in the National Register		l	2d		
3	Number of conservation easements modified, transtax year ▶	nsferred, released, extinguis	hed, or terminated by	the organization dui	ring the	
4	Number of states where property subject to conse	ervation easement is located	<b></b>			
5	Does the organization have a written policy regar and enforcement of the conservation easements i	ding the periodic monitoring t holds?	, inspection, handling o	of violations,	Yes 🗆 N	lo
6	Staff and volunteer hours devoted to monitoring,	inspecting, handling of viola	itions, and enforcing co	onservation easeme	nts during the	year
7	Amount of expenses incurred in monitoring, insper	ecting, handling of violations	, and enforcing conserv	vation easements di	uring the year	
8	Does each conservation easement reported on lin	e 2(d) above satisfy the req	uirements of section 1	70(h)(4)(B)(ı)		
	and section 170(h)(4)(B)(II)?				Yes 🗆 N	lo
9	In Part XIII, describe how the organization report balance sheet, and include, if applicable, the text the organization's accounting for conservation ea	of the footnote to the organ			es	
Pai	Organizations Maintaining Collect Complete if the organization answere			er Similar Asset	ts.	
1a	If the organization elected, as permitted under SF art, historical treasures, or other similar assets he provide, in Part XIII, the text of the footnote to it	eld for public exhibition, edu	cation, or research in f			of
b	If the organization elected, as permitted under SF historical treasures, or other similar assets held fo following amounts relating to these items					
1	(i) Revenue included on Form 990, Part VIII, line 1			<b>&gt;</b> \$		
(	ii)Assets included in Form 990, Part X			<b>▶</b> \$		
2	If the organization received or held works of art, following amounts required to be reported under					
a	Revenue included on Form 990, Part VIII, line 1			<b>&gt;</b> \$		
b	Assets included in Form 990, Part X			<b>&gt;</b> \$		
For	Paperwork Reduction Act Notice, see the Instr	uctions for Form 990.	Cat No	52283D <b>Schedu</b>	le D (Form 99	90) 2016

Par	t III	Organizations Maintaining	Collections of	of Art, Hist	orical Tr	easures,	or Other	Similar A	ssets (cont	inued)	
3		the organization's acquisition, access (check all that apply)	ssion, and othei	r records, che	eck any of	the following	g that are a	significant i	use of its col	lection	
а		Public exhibition d									
b		Scholarly research			е 🗌	Other					
С		Preservation for future generations									
4	Provid Part >	de a description of the organization's KIII	collections and	d explain how	they furth	er the organ	nization's e	xempt purpo	se in		
5		g the year, did the organization solio s to be sold to raise funds rather tha						nılar	☐ Yes	□ No	
Pa	rt IV	Escrow and Custodial Arrar Complete if the organization a X, line 21.		s" on Form 9	990, Part	IV, line 9,	or reporte	ed an amou	unt on Forr	n 990, Part	
1a		e organization an agent, trustee, cus led on Form 990, Part X?	todian or other	intermediary	for contrib	outions or ot	her assets	not	Yes	□ No	
ь	If "Ye	s," explain the arrangement in Part	XIII and comple	ete the follow	ıına table			A	mount		
c		ning balance					1c				
d	_	ons during the year					1d				
е		butions during the year					1e				
f		g balance					1f				
<b>2</b> a		ne organization include an amount of	n Form 990 Pa	rt X line 21	for escrow	or custodia	l account lis	ability?			
b		s," explain the arrangement in Part	·					•	Yes	□ No	
Pa	rt V	Endowment Funds. Complet									
		·	(a)Currer		<b>b)</b> Prior year			(d)Three year		Four years back	
<b>1</b> a	Beginn	ing of year balance									
b	Contrib	outions									
C	Net inv	estment earnings, gains, and losses									
d	Grants	or scholarships									
e		expenditures for facilities ograms									
f	Admını	strative expenses									
g	End of	year balance									
2	Provid	de the estimated percentage of the c	urrent year end	d balance (lın	e 1g, colur	nn (a)) held	as				
а	Board	designated or quasi-endowment 🕨									
Ь	Perma	anent endowment ►									
c	Temp	orarily restricted endowment <b>&gt;</b>									
	The p	ercentages on lines 2a, 2b, and 2c s	hould equal 10	0%							
3а		nere endowment funds not in the pos iization by	ssession of the	organization	that are he	eld and adm	ınıstered fo	r the		Yes No	
	(i) ur	nrelated organizations							3a(i)		
b		elated organizations s" s" on 3a(ii), are the related organiza	tions listed as	· · · · required on S	 Schedule R	, ,			3a(ii) 3b		
4		ibe in Part XIII the intended uses of									
Pa	rt VI	Land, Buildings, and Equip									
		Complete if the organization a									
	Descri		or other basis stment)	(b)Cost or of	ther basis (o	ther) (c)A	ccumulated d	epreciation	( <b>d</b> )B	ook value	
1a	Land										
b	Buildin	gs									
c	Leaseh	old improvements			6,18	3,915		5,124,316		1,059,599	
d	Equipm	nent			78	8,262		736,242		52,020	
е	Other				3,23	4,495		2,773,219		461,276	
Tat	- I Add	lines 12 through 10 (Column (d) mu	et equal Form C	100 D==+ V =	aliana (D)	line 10(a)	1			4 572 605	

			on answered		Part IV, line 11b.
	See Form 990, Part X, line 12.  (a) Description of security or category (including name of security)	(	<b>b)</b> Book value	(c)Method o	
(1)Financial					
( <b>3</b> )Other	leid equity interests				
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
Total. (Colum Part VIII	n (b) must equal Form 990, Part X, col (B) line 12 )  Investments—Program Related. Complete	if the organizat	ion answered	l 'Yes' on Form 990	Part IV. line 11c.
	See Form 990, Part X, line 13.			(c) Method o	
	(a) Description of investment	<b>(b)</b> Boo	k value	Cost or end-of-ye	
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Part IX	on (b) must equal Form 990, Part X, col (B) line 13)  Other Assets. Complete if the organization answer	ed 'Yes' on Form	990, Part IV, lı	ne 11d See Form 990	, Part X, line 15
(1)	(a) Descripti	ion			(b) Book value
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9) <b>Total.</b> (Colu	umn (b) must equal Form 990, Part X, col (B) line 15 )				<b>&gt;</b>
(9) <b>Total.</b> (Colu	omn (b) must equal Form 990, Part X, col (B) line 15 )  Other Liabilities. Complete if the organization See Form 990, Part X, line 25.	answered 'Yes			or 11f.
(9) Total. (Colu Part X 1.	Other Liabilities. Complete if the organization See Form 990, Part X, line 25.  (a) Description of liability	answered 'Yes	on Form 99		▶ or 11f.
(9) Total. (Colu Part X 1.	<b>Other Liabilities.</b> Complete if the organization See Form 990, Part X, line 25.	answered 'Yes			or 11f.
(9)  Total. (Colu Part X  1. (1) Federal I	Other Liabilities. Complete if the organization See Form 990, Part X, line 25.  (a) Description of liability	answered 'Yes			or 11f.
(9)  Total. (Colu Part X  1.  (1) Federal    CAPITAL LEA	Other Liabilities. Complete if the organization See Form 990, Part X, line 25.  (a) Description of liability income taxes  ASE OBLIGATION	answered 'Yes	(b) Book val	ue	or 11f.
(9)  Total. (Colu Part X  1.  (1) Federal    CAPITAL LEA  DEFERRED R  (3)	Other Liabilities. Complete if the organization See Form 990, Part X, line 25.  (a) Description of liability income taxes  ASE OBLIGATION	answered 'Yes	(b) Book val	ue	or 11f.
(9)  Total. (Colu Part X  1. (1) Federal    CAPITAL LEA  DEFERRED R (3) (4)	Other Liabilities. Complete if the organization See Form 990, Part X, line 25.  (a) Description of liability income taxes  ASE OBLIGATION	answered 'Yes	(b) Book val	ue	or 11f.
(9)  Total. (Colu Part X  1. (1) Federal    CAPITAL LEA  DEFERRED R (3) (4) (5)	Other Liabilities. Complete if the organization See Form 990, Part X, line 25.  (a) Description of liability income taxes  ASE OBLIGATION	answered 'Yes	(b) Book val	ue	or 11f.
(9)  Total. (Colu Part X  1. (1) Federal I  CAPITAL LEA  DEFERRED R (3) (4) (5) (6)	Other Liabilities. Complete if the organization See Form 990, Part X, line 25.  (a) Description of liability income taxes  ASE OBLIGATION	answered 'Yes	(b) Book val	ue	or 11f.
(9)  Total. (Colu Part X  1. (1) Federal I  CAPITAL LEA  DEFERRED R (3) (4) (5) (6) (7)	Other Liabilities. Complete if the organization See Form 990, Part X, line 25.  (a) Description of liability income taxes  ASE OBLIGATION	answered 'Yes	(b) Book val	ue	or 11f.
(9)  Total. (Colu Part X  1. (1) Federal I  CAPITAL LEA  DEFERRED R (3) (4) (5) (6) (7) (8)	Other Liabilities. Complete if the organization See Form 990, Part X, line 25.  (a) Description of liability income taxes  ASE OBLIGATION	answered 'Yes	(b) Book val	ue	or 11f.
Part X  1. (1) Federal   CAPITAL LEA  DEFERRED R (3) (4) (5) (6) (7) (8) (9)	Other Liabilities. Complete if the organization See Form 990, Part X, line 25.  (a) Description of liability income taxes  ASE OBLIGATION	answered 'Yes	(b) Book val	ue	or 11f.

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b .

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) . . . . . . . .

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,

Other (Describe in Part XIII ) . . . . .

Supplemental Information

Donated services and use of facilities .

Prior year adjustments . . .

Other (Describe in Part XIII ) .

Add lines 2a through 2d .

Add lines 4a and 4b .

Return Reference

See Additional Data Table

Subtract line 2e from line 1 .

Other losses .

Part XI

2

а

b

а b

d

е 3

а

b

c

Part XIII

5

4

Schedule D (Form 990) 2016

Page 4

3,625,117

57,103

79,374,677

Schedule D (Form 990) 2015

79.317.574

#### Net unrealized gains (losses) on investments . . . 2a 2,027,221 Donated services and use of facilities . 2b 2c

c Recoveries of prior year grants . . . Other (Describe in Part XIII ) . . 2d 3,588,158 Add lines 2a through 2d . . . . 2e

d е Subtract line 2e from line 1 . 3

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

5,615,379 3 76,895,266 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b. 57,103 4a Other (Describe in Part XIII ) . . . . . . 4b -36.959 b

Add lines 4a and 4b . . . 4c c 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) . . . . . . .

20,144 76,915,410 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1 Total expenses and losses per audited financial statements . 82,942,691 2 Amounts included on line 1 but not on Form 990, Part IX, line 25

Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

2a

2b

2c

2d

4b

Explanation

3,625,117

57,103

2e

3

4c

5

Page <b>5</b>	Schedule D (Form 990) 2015
inued)	Part XIII Supplemental Information (co
Explanation	Return Reference

Schedule D (Form 990) 2016

### Additional Data

Software Version:

**EIN:** 52-1224577

Name: BIOTECHNOLOGY INNOVATION ORGANIZATION

**Supplemental Information** Return Reference Explanation

PART XI, LINE 2D - OTHER FOOD & AG SGR FUND 2,815,701 FOOD & AG LEGAL FUND 81,494 BIOSIMILARS REVENUE 405,963 FGR ADJUSTMENTS SPECIAL INITIATIVES REVENUE 285,000

Software ID:

upplemental Information								
Return Reference	Explanation							
PART XI, LINE 4B - OTHER ADJUSTMENTS	RENTAL EXPENSES -36,959							

Supplemental Information Return Reference Explanation PART XII, LINE 2D - OTHER FOOD & AG LEGAL FUND EXPENSES 81,494 BIOSIMILAR EXPENSES 405,963 RENTAL EXPENSES 36,959 FGR SPECIAL INITIATIVE EXPENSES 285,000 FOOD & AG SGR FUND 2,815,701 I ADJUSTMENTS

efile GRAPHIC prin	t - DO NOT I	PROCESS	As Filed Data	DLN: 9349331401				
SCHEDULE F (Form 990)	State	ement of	Activities (	OMB No 1545-0047				
(1 01111 000)		► Complet	_	n answered "Yes" to Form	990,	2016		
		- A++		14b, 15, or 16. See separate instructions.		Open to Public		
Department of the Treasurv Internal Revenue Service	▶ Informa			and its instructions is at wi	vw.irs.gov/form990.	Inspection		
Name of the organization BIOTECHNOLOGY INNOV		ZATION			Employer ider	ntification number		
BIOTECHNOLOGT INNOV	ATION ORGANI	IZATION			52-1224577			
	<b>Information</b> , Part IV, line		s Outside the U	<b>Jnited States.</b> Comple	ete if the organization a	enswered "Yes" to		
other assistance, to award the gran	other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes No  For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance							
3 Activites per Regio	n (The followir	ng Part I, line 3	table can be dupli	cated if additional space is	needed )			
(a) Region		<b>(b)</b> Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region		
(1) See Add'l Data								
( 2)								
(3)								
(4)								
( 5)								
3a Sub-total b Total from continua Part I			0 10			829,617		
c Totals (add lines 3 For Paperwork Reduction		the Instruction	0 10		No 50082W <b>Schedu</b>	829,617		

(4) (5) (6)

(7) (8) (9)

(10) (11) (12) (13) (14) (15) (16)

(17) (18) Page **3** 

Schedule F (Form 990) 2016

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III Part III can be duplicated if additional space is needed. (c) Number of (d) Amount of (e) Manner of cash (f) Amount of (h) Method of (a) Type of grant or assistance (b) Region (a) Description

(a) Type of grant of assistance	(D) Region	recipients	cash grant	disbursement	non-cash assistance	of non-cash assistance	valuation (book, FMV, appraisal, other)
(1)							
( 2)	•						

			assistance	assistance	(book, FMV, appraisal, other)
(1)					
( 2)					

(1)				
(2)				
(3)				

Sche	dule F (Form 990) 2016		Page <b>4</b>
Par	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	<b>☑</b> No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)		
		☐ Yes	<b>✓</b> No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)		
	Corporations (see Instructions for Form 5471)	☐ Yes	<b>✓</b> No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	<b>☑</b> No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)		
		☐ Yes	<b>✓</b> No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713)	□Yes	<b>☑</b> No

Schedule F (	Form 99	0) 2016 Page <b>5</b>					
Part V	Provid- amour metho	emental Information e the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; its of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting d); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide iditional information (see instructions).					
Return Reference		Explanation					
PART I, LINE 2		THE ORGANIZATION HAS SUPPORTING DOCUMENTATION FOR THE AMOUNT THAT IS INVOICED FROM THE COMPANIES					

#### **Additional Data**

AFRICA

# Software ID: Software Version:

**EIN:** 52-1224577

Name: BIOTECHNOLOGY INNOVATION ORGANIZATION

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA, CAMBODIA,	0	4	PROGRAM SERVICES	CONFERENCES, ADVOCACY AND EDUCATION	350,737
EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM	0	2	PROGRAM SERVICES	CONFERENCES, ADVOCACY AND EDUCATION	238,389
MIDDLE EAST AND NORTH	0	0	PROGRAM SERVICES	ADVOCACY	2,500

Form 990 Schedule F Part I - Activities Outside The United States										
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region					
NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	0	0	PROGRAM SERVICES	ADVOCACY	47,137					
SOUTH AMERICA - ARGENTINA, BOLIVIA, BRAZIL, CHILE, COLUMBIA, ECUADOR,	0	2		CONFERENCES, ADVOCACY AND EDUCATION	188,301					
SOUTH ASIA - AFGHANISTAN, BANGLADESH, BHUTAN, INDIA, MALDIVES, NEPAL,	0	2		EDUCATION AND ADVOCACY	2,553					

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493314015687 OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations,** (Form 990) **2016** Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization **Employer Identification number** BIOTECHNOLOGY INNOVATION ORGANIZATION 52-1224577 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part III Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant ıf applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance other) or government assistance See Additional Data Table (1)(2)(3)(4)(6)

(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . . . . 36

Schedule I (Form 990) 2	2016					Page <b>2</b>
	d Other Assistance to be duplicated if addition		als. Complete if the org	janization answered "Yes"	on Form 990, Part IV, line 22	
	nt or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
Part IV Suppl	emental Informati	on. Provide the inf	ormation required in	Part I, line 2, Part III,	, column (b), and any other ac	lditional information.
Return Reference	Explanation	on				
PART I, LINE 2				HE GRANT RECIPIENTS TO TO THE FUNDS GRANTED		R USAGE IN SOME CASES, BIO PERSONNEL ATTEND

## **Additional Data**

507 CAPITOL COURT NE SUITE WASHINGTON, DC 20002

Software ID: **Software Version:** 

**EIN:** 52-1224577

Name: BIOTECHNOLOGY INNOVATION ORGANIZATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
AIDS INSTITUTE PO BOX 34043 BETHESDA, MD 208270043	03-0458239	501(C)(3)	7,000				GENERAL SUPPORT				
ALLIANCE FOR AGING RESEARCH	52-1316086	501(C)(3)	15,000				GENERAL SUPPORT				

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 83-0264665 501(C)(3) 5.000 SPONSORSHIP ALLIANCE FOR LUPUS RESEARCH

PO BOX 465
ENCAMPMENT, WY 82325

ALS ASSOCIATION 13-3271855 501(C)(3) 7,000

SPONSORSHIP 1275 K STREET NW SUITE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1050

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 13-3223946 501(C)(3) 5.000 AMERICAN CANCER SOCIETY IGENERAL SUPPORT ACTION NETWORK 55 KENOSIA AVENUE 53-0218495 501(C)(3) 25.000 GENERAL SUPPORT

DANBURY, CT 06810 AMERICAN ENTERPRISE INSTITUTE FOR PUBLIC POLICY RESEARCH 1789 MASSACHUSETTS AVENUE NW

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 54-1379174 501(C)(3) 7.500 SPONSORSHIP AMERICAN FARM BUREAU 750 17TH STREET NW SUITE

110 WASHINGTON, DC 20006 20-4039120 501(C)(3) 50.000 SPONSORSHIP AMERICAN HEART

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

ASSOCIATION 515 NORTH MIDLAND AVENUE

UPPER NYACK, NY 10960

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance FRAL SUPPORT

C-CHANGE	87-0509416	501(C)(3)	15,000		GENER
9160 SOUTH 300 WEST 21					i
SANDY, UT 84070					i

200 MARYLAND AVENUE NE WASHINGTON, DC 20002

CAREGIVER ACTION NETWORK 52-0796820 501(C)(3) 5,000 SPONSORSHIP

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 71-0874241 501(C)(3) 15.000 SPONSORSHIP CITIZENS FOR A RESPONSIBLE BOLDER PO BOX 2371

ALEXANDRIA, VA 22301 31-1581756 501(C)(3) 10.000 IGENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

FPILEPSY FOUNDATION

901 E STREET NW SUITE 405 WASHINGTON, DC 20004

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 13-1614906 501(C)(3) 10,000 SPONSORSHIP EVERYLIFE FOUNDATION FOR

RARE DISEASES 2000 N BEAUREGARD STREET 6TH FLOOR ALEXANDRIA, VA 22311					
FRIENDS OF CANCER	06-1565950	501(C)(3)	5,000		SPONSORSHIP

RESEARCH 330 7TH AVENUE SUITE 1701

NEW YORK, NY 10001

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

GALIEN FOUNDATION 99 JOHN STREET SUITE 2502 NEW YORK, NY 10038	26-4549935	501(C)(3)	20,000		SPONSORSHIP
GLOBAL GENES	52-1694732	501(C)(3)	20,833		SPONSORSHIP

PO BOX 791139

BALTIMORE, MD 212791139

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 26-3542537 501(C)(6) 20.000 CONTRIBUTION GROWTH ENERGY PO BOX 30273 OMAHA, NE 68103 31-1750942 501(C)(3) 8.750 SPONSORSHIP

OMAHA, NE 68103

JDRF INTERNATIONAL
1200 NEW HAMPSHIRE
AVENUE NW SUITE
575

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 52-1931357 501(C)(3) 5.000 SPONSORSHIP LEADERS OF AMERICAN AGRICULTURE 4720 MONTGOMERY LANE

SUITE 205
BETHESDA, MD 20814

MELANO RESEARCH ALLIANCE 26-1636099 501(C)(3) 10,000
FOUNDATION 1101 NEW YORK AVENUE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

SUITE 620

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance MICHAEL J FOX FOUNDATION 13-2912529 501(C)(3) 5.000 IGENERAL SUPPORT 52 VANDERBILT AVENUE NEW YORK, NY 10017 NAT'L ORG FOR RARE 94-3172675 501(C)(3) 5.000 SPONSORSHIP

DISORDERS

1120

1025 VERMONT AVENUE SUITE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 13-5644916 501(C)(3) 10.000 NATIONAL ALLIANCE OF STATE IGENERAL SUPPORT AND TERRITORIAL 5845 RICHMOND HIGHWAY SUITE 800 ALEXANDRIA, VA 22303 5,000 NATIONAL ALLIANCE ON 11-3485631 501(C)(3) IGENERAL SUPPORT

MENTAL ILLNESS

FLOOR

750 FIRST STREET NW 7TH

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance ONSORSHIP

SPONSORSHIP

NATIONAL FARMERS UNION 4699 MURPHY CANYON ROAD	95-2644377	501(C)(3)	10,000		SPON
SAN DIEGO, CA 92123					

NATIONAL HEALTH COUNCIL 13-1624107 501(C)(3) 25,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1730 M STREET NW SUITE 500 WASHINGTON, DC 200364561

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 75-1835298 501(C)(3) 7.500 SPONSORSHIP NATIONAL OILSEED PROCESSORS 5005 LBJ TEXAS FREEWAY

SUITE 250
DALLAS, TX 75244

PARENT PROJECT MUSCULAR DYSTROPHY
101 YGNACIO VALLEY ROAD

SPONSORSHIP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

SUITE 110

WALNUT CREEK, CA 94596

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 94-3172675 501(C)(3) 7,000 SPONSORSHIP PARKINSON'S ACTION NETWORK

PREVENT CANCER	52-1429544	501(C)(3)	5,000		SPONSORSHIP
1025 VERMONT AVENUE SUITE 1120 WASHINGTON, DC 20005					

FOUNDATION 1600 DUKE STREET SUITE 500

ALEXANDRIA, VA 22314

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance or government other) assistance 26-3727917 501(C)(3) 5.000 SPONSORSHIP REAGAN-UDALL FOUNDATION FOR FDA

1025 CONNECTICUT AVENUE NW SUITE 1000 WASHINGTON, DC 20036 RETIRESAFE 26-1636099 501(C)(3) 5,000 SPONSORSHIP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1101 NEW YORK AVENUE

WASHINGTON, DC 20006

SUITE 620

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 52-1429544 501(C)(3) 15.000 SPONSORSHIP SOCIETY FOR WOMENS HEALTH

1600 DUKE STREET SUITE 500 ALEXANDRIA, VA 22314					
THE CONGRESSIONAL HUNGER CENTER 701 SW 27TH AVENUE SUITE	59-2767754	501(C)(3)	10,000		SPONSORSHIP

705 MIAMI, FL 33135

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 501(C)(3) 25.000 THE MILKEN INSTITUTE 26-4614274 IGENERAL SUPPORT 750 9TH STREET NW SHITE

IGENERAL SUPPORT

750 WASHINGTON, DC 20001					
US CHAMBER OF COMMERCE	53-0045720	501(C)(3)	166,000		MEMBERSHIP AND

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1101 K STREET SUITE 610

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance UTAH FAMILIES FOUNDATION

678 EAST VINE STREET MURRAY, UT 84107

501(C)(3) 5.000 87-0509416 ISPONSORSHIP efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493314015687

OMB No 1545-0047

2015

Open to Public Inspection

## Schedule J

## Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** 

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ► Attach to Form 990.

Department of the Treasury Internal Revenue Service

(Form 990)

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization Employer identification number BIOTECHNOLOGY INNOVATION ORGANIZATION 52-1224577 **Questions Regarding Compensation** Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Νo Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Yes Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? 4a Νo Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b Yes Participate in, or receive payment from, an equity-based compensation arrangement? 4с Νo If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? 5а 5h Any related organization? If "Yes," on line 5a or 5b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? 6a Any related organization? 6b If "Yes," on line 6a or 6b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 67 If "Yes," describe in Part III 7 Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

Schedule 3 (Form 990) 2015							Page Z	
Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.								
For each individual whose compensal instructions, on row (ii) Do not list al <b>Note.</b> The sum of columns (B)(i)-(iii)	ny individuals that are	not listed on Form 990	, Part VII	• , ,	-	·		
(A) Name and Title (B) Breakdown of W-2 and/or 1099-MISC compensation (C) Retirement and (D) Nontaxable (E) Total of c						(E) Total of columns	<b>(F)</b> Compensation in	
	Base (1) compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred on prior Form 990	

Cahadula 1 (Farm 000) 201 F

See Additional Data Table

Page 3							
Part III Supplemental Inf	ormation						
Provide the information, explanatio	n, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information						
Return Reference	Explanation						
PART I, LINE 1A	JAMES GREENWOOD - NOT INCLUDED IN TAXABLE COMPENSATION TO THE INDIVIDUAL - FIRST CLASS OR CHARTER TRAVEL - \$20,334 - INCLUDED IN TAXABLE COMPENSATION TO THE INDIVIDUAL - TRAVEL FOR COMPANIONS - \$7,020						
PART I, LINE 1B	THE CHIEF EXECUTIVE OFFICER HAS A PREPAID SPENDING ACCOUNT AT A LOCAL RESTAURANT, USED EXCLUSIVELY FOR BUSINESS PURPOSES						

Schodule 1 (Form 990) 2015

Schedule J (Form 990) 2015

### Software ID: Software Version:

**EIN:** 52-1224577

Name: BIOTECHNOLOGY INNOVATION ORGANIZATION

### Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

	column (B) eported as deferred on prior Form 990  0
PRESIDENT & CHIEF EXECUTIVE OFFICER  (II)  0  0  0  0  0  0  1YVETTE WHITE-WIGGINS SVP & CHIEF FINANCIAL OFFICER  (II)  0  0  0  0  10  10  10  10  10  10  1	0 0
1   1   1   1   1   1   1   1   1   1	0
SVP & CHIEF FINANCIAL OFFICER  (II)  0  0  0  0  0  0  0  0  0  0  0  0  0	0
OFFICER  (II)  0  0  0  0  0  0  0  0  0  0  0  0  0	•
2A SCOTT WHITAKER COO (PARTIAL YEAR)  (I) 130,153 214,570 33,642 0 6,100 384,465 (II) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
COO (PARTIAL YEAR)  (II)  0  0  0  0  0  0  354,465  0  3THOMAS DILENGE	
3THOMAS DILENGE (I) 455.803 148.406 0 35.000 20.631 668.830	0
	0
	0
& PUBLIC PO (II) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0
4JOANNE DUNCAN PRESIDENT, MEMBERSHIP & (I) 431,966 116,564 0 35,000 25,802 609,332	0
BUS OPER DIV (II) 0 0 0 0 0 0	0
5AMY FINAN (I) 95,475 111,316 14,494 2,492 3,007 226,784	0
YEAR) (II) 0 0 0 0 0 0 0	0
6KATHLEEN HOLCOMBE (I) 320,779 104,372 0 32,426 1,860 459,437 SVP, SCIENCE POLICY	0
	0
7DANIEL DURHAM (I) 407,292 50,000 0 28,225 20,155 505,672 EVP, HEALTH POLICY	0
	0
8BRENT ERICKSON (I) 381,753 126,700 0 35,000 15,536 558,989 EVP, INDUSTRIAL &	0
ENVIRONMENT (II) 0 0 0 0 0 0	0
9JOSEPH DAMOND (I) 351,542 117,523 0 35,000 30,176 534,241	0
AFFAIRS (II) 0 0 0 0 -	0
10	0
REGULATORY (II) 0 0 0 0 0 0 0 0	0

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Schedule L (Form 990 or 990	<b>NS With Ir</b> ete if the orga art IV, lines 2! 990-EZ, Part	anization and 5a, 25b, 26, 3	swered 27, 28a, 28b,		с,			<sup>18 No</sup>					
Department of the Trea	asurv	ormation abo	► Attac	th to Form 99 le L (Form 99 www.irs.gov	0 or Form 99 00 or 990-EZ	0-EZ.	ructio	ns is	at		pen		ublic
Name of the org		ZATION						•	yer ide	entifica			
	ss Benefit Trar												
	) Name of disquali			Relationship be				(c) [	escrip ansact	tion of	(d) Corrected? Yes No		
Part II Loa Con rep (a) Name of	mount of tax, if and ans to and/or I ans to and/or I and orted an amount of (b) Relationship with organization	From Interestation answer n Form 990, F	ested Per red "Yes" or Part X, line (d) Loan	<b>rsons.</b> n Form 990-EZ, 5, 6, or 22				t IV, In	( Appro	5, or if by the	(	ganıza i)Wrıt greem	ten:
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Total Part IIII Gra	nts or Assistar	sa Banafiti	ina Tetau		<b>\$</b>								
	nplete if the orga					line 27.							
(a) Name of inter	rested person (b	) Relationship erested persoi organizati	n and the	(c) Amount	of assistance	<b>(d)</b> Type	of assı	stanc	e	<b>(e)</b> Pu	rpose (	of assi	stance
									-				
For Danerwork Ded	luction Act Notice s	ae the Instruc	tions for Eo	rm 990 or 990-1	<b>7</b> C:	at No 50056A		C-I		I (Form	000 -	- 000	F7\ 201

(a) Name of interested person	between interested person and the organization	transaction	(a) Description of transaction	of organization's revenues?	
				Yes	No
(1) LAURA GREENWOOD	DAUGHTER OF CEO		PAID EMPLOYEE OF ORGANIZATION		No
_					

Explanation

Schedule I (Form 990 or 990-FZ) 2016

Part V **Supplemental Information** 

Return Reference

Provide additional information for responses to questions on Schedule L (see instructions)

efile GRAPH	IC prir	nt - DO NOT PROCESS	As Filed Data -		DLN:	93493314015687	
SCHEDULE O (Form 990 or 990- EZ)  Department of the Treasury  Supplement Complete to prov Form 990 or Form 990 or Form 990 or			al Information to Form 990 or 990-EZ vide information for responses to specific questions on 990-EZ or to provide any additional information.  Attach to Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) and its instructions is at			OMB No 1545-0047  2016 Open to Public Inspection	
	INNOVATI	ON ORGANIZATION			Employer identi 52-1224577	fication number	
Return Reference	e O, Su	pplemental Informatio	n 	Explanation			
FORM 990, PART VI, SECTION A, LINE 1	THAN COMM IN ART CTION THE IM T-LARG ECUTI EXCEF E OF T THE FI FICER	THE BOARD OF DIRECTORS SHALL DESIGNATE, BY RESOLUTION AND WITH A QUORUM PRESENT, NOT MORE THAN NINETEEN (19) DIRECTORS OF THE BOARD TO ACT AS AN EXECUTIVE COMMITTEE THE EXECUTIVE COMMITTEE SHALL CONSIST OF THE SEVEN (7) ELECTED OFFICERS OF THE ORGANIZATION (AS DEFINED IN ARTICLE VIII), THE IMMEDIATE PAST CHAIR OF THE ORGANIZATION, THE VICE CHAIRS OF EACH SE CTION'S GOVERNING BOARD, AND THE BALANCE BEING AT-LARGE DIRECTORS FROM THE FULL BOARD IF THE IMMEDIATE PAST CHAIR IS NO LONGER ELIGIBLE TO SERVE ON THE FULL BOARD, AN ADDITIONAL A T-LARGE DIRECTOR FROM THE FULL BOARD SHALL BE SELECTED FOR THE EXECUTIVE COMMITTEE THE EXECUTIVE COMMITTEE SHALL HAVE, AND BE AUTHORIZED TO EXERCISE, ALL POWERS OF THE FULL BOARD, EXCEPT (A) THE POWER TO ELECT OR REMOVE ELECTED OFFICERS OR DIRECTORS, TO CHANGE THE SIZE OF THE BOARD, TO CHANGE ELIGIBILITY, QUALIFICATIONS OR RIGHTS OF MEMBERSHIP, TO APPROVE THE FINANCIAL BUDGET FOR THE ORGANIZATION, OR TO MAKE DETERMINATIONS AS TO DIRECTOR AND OF FICER COMPENSATION, WHERE APPLICABLE, AND (B) THE POWER TO AMEND THE ARTICLES OF INCORPORA TION OR THE BYLAWS OF THE ORGANIZATION					

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Reference	Explanation
FORM 990,	THE BIOTECHNOLOGY INDUSTRY ORGANIZATION OFFICIALLY CHANGED ITS NAME TO THE BIOTECHNOLOGY I
PART VI,	NNOVATION ORGANIZATION ON JANUARY 5, 2016 AS A RESULT, THE BYLAWS FOR THE FULL BIO BOARD
SECTION A,	OF DIRECTORS AND THE FOUR BIO SECTIONS MUST BE AMENDED TO REFLECT THAT CHANGE THE BYLAWS
LINE 4	AMENDMENTS WERE PRESENTED AND FORMALLY APPROVED BY THE BIO GOVERNANCE & COMPLIANCE COMMITT
	EE AT ITS MEETING ON MAY 9, 2016 REVISION OF BYLAWS WAS ISSUED ON JUNE 6, 2016

Funlametics.

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	THE MEMBERS OF THE ORGANIZATION SHALL BE DIVIDED INTO FOUR CLASSES, CORE MEMBERS, ASSOCIAT E MEMBERS, AFFILIATE MEMBERS, AND CENTER MEMBERS, DEFINED AS FOLLOWS (A) CORE MEMBERS AN Y CORPORATION, PARTNERSHIP, ASSOCIATION, OR OTHER ENTITY ORGANIZED FOR PROFIT, A SUBSTANTI AL PERCENTAGE OF WHOSE BUSINESS ACTIVITIES INVOLVE BIOTECHNOLOGY, GENOMICS, BIOINFORMATICS OR RELATED NEW TECHNOLOGIES, IS ELIGIBLE FOR MEMBERSHIP CORE MEMBERS ARE THOSE ENTITIES THAT UTILIZE BIOTECHNOLOGY, GENOMICS, BIOINFORMATICS OR OTHER RELATED NEW TECHNOLOGIES IN RESEARCH, DEVELOPMENT, TESTING, MANUFACTURING, OR SALES OF PRODUCT OR INFORMATION, AS WELL AS OTHER FIRMS THE BOARD SO CHARACTERIZES AND PLACES IN THIS CATEGORY CORE MEMBERS SHALL BE GROUPED IN THE FOLLOWING SUBCATEGORIES (I) EMERGING COMPANIES, WHICH ARE FIRMS THAT E MPLOY LESS THAN 350 PERSONS AND THAT DO NOT HAVE A THERAPEUTIC OR DIAGNOSTIC PRODUCT APPROVED FOR SALE IN THE U S MARKET, (II) ESTABLISHED FIRMS, WHICH ARE THOSE FIRMS THAT EMPLOY 350 OR MORE PERSONS OR THAT HAVE A THERAPEUTIC OR DIAGNOSTIC PRODUCT APPROVED FOR SALE IN THE U S MARKET, AND (III) LARGE FIRMS, WHICH ARE ESTABLISHED FIRMS THAT HAVE ANNUAL WORL DWIDE SALES OF BIOTECHNOLOGY PRODUCTS IN EXCESS OF \$1 5 BILLION, AND (IV) NON-DOMESTIC COMPANIES, WHICH ARE CORE MEMBERS WITHOUT SIGNIFICANT OPERATIONS IN THE UNITED STATES OR SIGN IFICANT COLLABORATIONS WITH A U S ENTITY (B) ASSOCIATE MEMBERS ANY CORPORATION, PARTNER SHIP, ASSOCIATION, OR OTHER ENTITY ORGANIZED FOR PROPIT, A SUBSTANTIAL PORTION OF WHOSE AC TUTITIES INVOLVE PROVIDING SERVICES OR PRODUCTS OF BENEFIT TO COMPANIES WHOSE PRINCIPAL BUSINESS IS BIOTECHNOLOGY, IS ELIGIBLE FOR ASSOCIATE MEMBERSHIP ASSOCIATE MEMBERS ARE THOSE COMMERCIAL ENTITIES WHICH DO NOT NECESSARILY UTILIZE BIOTECHNOLOGY, E G TECHNICAL SUPPORT TO THE PROPERSIONAL ASSOCIATION OF WHOSE AC TUTILIZE BIOTECHNOLOGY INDUSTRY, TRADE OR PROFESSIONAL ASSOCIATION OR NOT ACADEMY. OR A MANDATE TO PROMOTE THE D EVELOPMENT OF, BIOTECHNOLOGY IS ELIGIBLE FOR AFFILIATE MEMBERS ANY INSTITUTION, NOT GEN ERA

# 990 Schedule O, Supplemental Information Return Explanation

Reference	
FORM 990,	AT ALL MEMBERSHIP MEETINGS OF THE ORGANIZATION, EACH CURRENT MEMBER SHALL HAVE ONE (1) VOT
PART VI,	E AND MAY TAKE PART IN THE VOTING IN PERSON OR BY PROXY FOR EACH SECTION IN WHICH THE MEM
SECTION A,	BER PARTICIPATES, EACH MEMBER SHALL HAVE THE RIGHT TO VOTE ON THE ELECTION OF DIRECTORS FO
LINE 7A	R THE SECTION GOVERNING BOARD, BUT SHALL HAVE NO OTHER VOTING RIGHTS EXCEPT ON MATTERS BRO
	UGHT TO THE MEMBERSHIP BY ANY SUCH GOVERNING BOARD OR THE ORGANIZATION'S BOARD OF DIRECTOR

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE FORM 990 AND RELATED SCHEDULES ARE PREPARED BY THE ORGANIZATION'S CERTIFIED PUBLIC ACC OUNTANTS UNDER THE GUIDANCE OF THE CHIEF FINANCIAL OFFICER (CFO) THE CFO AND THE CONTROLL ER THOROUGHLY REVIEW ALL CALCULATIONS AND SCHEDULES TO CONFIRM THEY REFLECT THE ACTUAL FIN ANCIAL RESULTS OF THE ORGANIZATION THE COMPLETE FORM 990 IS THEN REVIEWED INTERNALLY BY THE CEO, DIVISION PRESIDENTS, CFO, AND CONTROLLER IN CONSULTATION WITH LEGAL COUNSEL AND, AS APPROPRIATE, FURTHER CONSULTATION WITH THE ORGANIZATION'S CERTIFIED PUBLIC ACCOUNTANTS FINALLY, THE FORM 990 IS PROVIDED TO THE CHAIRMAN OF THE BOARD AND BIO EXECUTIVE COMMITTEE MEMBERS FOR THEIR REVIEW, QUESTIONS AND/OR COMMENTS ALL REVIEWS ARE COMPLETED BEFORE THE FORM IS FILED WITH THE IRS

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	BIOTECHNOLOGY INNOVATION ORGANIZATION (BIO) TAKES SEVERAL STEPS TO ADDRESS COMPLIANCE BY E MPLOYEES AND DIRECTORS WITH ITS CONFLICTS OF INTEREST POLICY BIO TRAINS ALL NEW EMPLOYEES AND DIRECTORS ON VARIOUS ASPECTS OF BIO'S COMPLIANCE PROGRAM, INCLUDING CONFLICTS OF INTEREST, AND BIO'S WRITTEN CONFLICTS OF INTEREST POLICY REQUIRES ALL EMPLOYEES TO DISCLOSE AN Y OUTSIDE PERSONAL BUSINESS INTERESTS TO THEIR SUPERVISORS BIO'S GENERAL COUNSEL REGULARLY ADVISES BIO'S EXECUTIVES AND SUPERVISORS ON SUCH MATTERS BIO ALSO CONTRACTS WITH AN INDE PENDENT ORGANIZATION TO PROVIDE EMPLOYEES AND OTHERS WITH THE ABILITY TO FILE ANONYMOUS RE PORTS CONCERNING THE VIOLATION OF ANY LAWS OR BIO POLICIES, INCLUDING ALLEGATIONS OF POTEN TIAL CONFLICTS OF INTEREST, AND BIO HAS A PROCESS IN PLACE TO FOLLOW UP ON ANY SUCH COMPLA INTS IN A TIMELY AND THOROUGH MANNER FURTHER, BIO UNDERTAKES A QUESTIONNAIRE SENT TO EACH MEMBER OF ITS BOARD OF DIRECTORS SEEKING DISCLOSURE OF ANY POTENTIAL CONFLICTS OF INTERES TS THEY MAY HAVE, OR THEIR FAMILY MEMBERS MAY HAVE, ASSOCIATED WITH BUSINESSES OR ORGANIZA TIONS THAT DO BUSINESS WITH BIO POTENTIAL CONFLICTS ARE MONITORED AND REVIEWED AT THE MAN AGEMENT AND SENIOR MANAGEMENT LEVEL OF THE ORGANIZATION, AND DEPENDING ON THE CONFLICT, DE TERMINATIONS MAY BE MADE AT THE BOARD OR SENIOR MANAGEMENT LEVEL A CONFLICT AT THE BOARD LEVEL WILL NORMALLY RESULT IN RECUSAL OF THE INDIVIDUAL FROM PARTICIPATION OR ACTIVITIES W ITH RESPECT TO THE RELEVANT SUBJECT MATTER AT THE STAFF LEVEL, THE APPLICABLE BIO SUPERVI SOR IS INFORMED OF THE POTENTIAL CONFLICT AND IS REQUIRED TO TAKE ALL APPROPRIATE STEPS TO ENSURE THAT THE INDIVIDUAL DOES NOT PARTICIPATE IN, OR RECEIVE CONFIDENTIAL INFORMATION R ELATING TO, ANY BIO ACTIVITY RELATED TO THE SUBJECT MATTER OF THE CONFLICT, UP TO AND INCLUDING, WHERE APPROPRIATE, TERMINATION OF SUCH EMPLOYEE

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	FOR 2016, THE PRESIDENT AND CHIEF EXECUTIVE OFFICER (CEO) OF BIO WAS COMPENSATED PER THE T ERMS OF A MULTI-YEAR CONTRACT THAT WAS DETERMINED WITH INDEPENDENT REVIEW, COMPARABILITY D ATA, AND CONTEMPORANEOUS SUBSTANTIATION OF THE DELIBERATION AND DECISION AS INDICATED IN P RIOR FORM 990 SUBMISSIONS IN ADDITION, BASED ON THE EXECUTIVE COMMITTEE'S EVALUATION OF T HE PRESIDENT AND CEO'S PERFORMANCE FOR 2016, THE COMMITTEE DETERMINED THE APPROPRIATE AMOU NT FOR THE DISCRETIONARY COMPONENT OF HIS COMPENSATION FOR THAT YEAR, IN ACCORDANCE WITH P ROVISION OF THE EXECUTIVE AGREEMENT DECISIONS REGARDING THE COMPENSATION FOR OFFICERS AND KEY EMPLOYEES OF THE ORGANIZATION ARE NEGOTIATED INDIVIDUALLY AND ARE PERFORMANCE-BASED, IN ACCORDANCE WITH AN ANNUAL WRITTEN EVALUATION PROCESS THAT HAS BEEN ESTABLISHED FOR ALL EMPLOYEES OF THE ORGANIZATION THE CHIEF OPERATING OFFICER AND THE ACTING CHIEF OPERATING OFFICER LED THE PROCESS, IN COORDINATION WITH THE PRESIDENT & CEO AN INDEPENDENT CONSULTA NT PROVIDES COMPARATIVE BENCHMARKING SERVICES FOR SENIOR MANAGEMENT POSITIONS, AND OTHER I NFORMATION ON COMPENSATION ISSUES, TRENDS, POLICIES, AND BEST PRACTICES FOR USE BY THE ORG ANIZATION THE ORGANIZATION ALSO HAS AN ESTABLISHED COMPENSATION POLICY FOR ALL OF ITS EMP LOYEES, WHICH SETS FORTH THE GENERAL PARAMETERS GOVERNING BIO'S COMPENSATION PRACTICES

Return Explanation
Reference

LINE 19

FORM 990, PART VI, SECTION C,

990 Schedule O, Supplemental Information

Return Explanation

Reference

FORM 990,	EC EMERGING PRIORITIES 8,709,179 CONSULTANTS AND OTHER PROFESSIONAL FEES 2,371,728 WORKP
PART IX,	LAN OBJECTIVES 358,994 ECONOMIC STUDIES 252,345 RECRUITMENT 179,801 TEMPORARY HELP 141,
LINE 11G	470 PROGRAM INITIATIVES 84,770 BUSINESS STRATEGIES 78,312 EDUCATION 62,036 INTERNS 34,
	755 BIO-PAC ADMINISTRATIVE 28,948 I&E INITIATIVES 13,592 I&E FOCUS GROUPS 5,000 CEO DE
	LEGATION EXPENSE 3,890