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Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

OMB No 1545 0052

Department of the Treasury Internal Revenue Service

Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements

2009

G Che	eck all that apply. Initial return Initia	al Return of a former p	· —			Fin	al return	
	Amended return	Address o	:hange Na	me c	hange			
Use th	ne l	Α	1 7					
IRS lab		UNDATION		<u> </u>	52-1231801			
Otherwi print	10020 01111 111111211 211212			В	Telephone numb	•	instructions)	
or typ	e. DALITMONE, MD 21210			<u> </u>	410-467			
See Sper				C		•	pending, check here	
		(-)(2) avament provide f	oundation.	ן"	1 Foreign organiz		ck nere ting the 85% test, che	
H C	heck type of organization X Section 501 Section 4947(a)(1) nonexempt charitable tr	(c)(3) exempt private for			here and attach	computati	ong the 63 % lest, che	
		ounting method: X Ca		E	If private found	ation statu	s was terminated	
		Other (specify)	2311	J₽	under section 5), check here)-month termination	
►s		column (d) must be or	n cash basis)	† "	under section 5			
Part Î	Analysis of Revenue and		(b) Net investme	ont	(c) Adjuste	d net	(d) Disbursem	
	Expenses (The total of amounts in	(a) Revenue and expenses per books	income	ent	incom	e	for charitab	
	columns (b), (c), and (d) may not neces- sarily equal the amounts in column (a)						purposes (cash basis o	
	(see the instructions)				_		(Casii basis 0	
-	1 Contributions, gifts, grants, etc, received (att sch)	1,644,718.						
	2 Ck ► if the foundn is not req to att Sch B	3 3 . 3	<i>a</i> \		* /	` `	ļ	
	3 Interest on savings and temporary cash investments	35,654.					*	
	4 Dividends and interest from securities	33,031.					>	
	5a Gross rents							
	b Net rental income or (loss)	, , , , ,	STATEMENT 1	<u> </u>			1 8 3	
R	6a Net gain/(loss) from sale of assets not on line 10	7,017.	. *		* `	·		
E	b Gross sales price for all assets on line 6a 64,028.	* * * * * * * * * * * * * * * * * * * *	*				<u> </u>	
Ě	7 Capital gain net income (from Part IV, line 2)	, , ,	* * * * * * * * * * * * * * * * * * * *	*				
N U	8 Net short-term capital gain	,			 	-	*	
Ĕ	9 Income modifications	<u> </u>	, ,		* *			
	10a Gross sales less returns and allowances	* « *	* *		i,	′ š	* *	
	b Less Cost of goods sold	*	* * *		* * '	* \$	*	
	c Gross profit/(loss) (att sch)		* * *				, ,	
	11 Other income (attach schedule)	-						
		1.605.000			<u> </u>			
	12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc.	1,687,389. 20,597.		0.		0.	20,	
	13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages	20,331.						
	15 Pension plans, employee benefits			6.16	N 75.3	7		
А	16a Legal fees (attach schedule)		RE	UL.	IVED			
D M	b Accounting fees (attach sch)				16			
ï N	c Other prof fees (attach sch)		8 CE	9	1 7010 C			
O Î	17 Interest		4 051		2			
O I P S E T R R	18 Taxes (attach schedule)(see instr.)					-		
À À	19 Depreciation (attach sch) and depletion		OG	UE	N, UI			
i i	20 Occupancy						<u> </u>	
N V G E	21 Travel, conferences, and meetings	24,640.					24,	
A E N X D P	22 Printing and publications							
N X	23 Other expenses (attach schedule)	40 636	1		1		42,	
Ň	SEE STATEMENT 2	42,676.	 				42,	
Ē	24 Total operating and administrative expenses. Add lines 13 through 23	87,913.					87,	
S	25 Contributions, gifts, grants paid PART XV	1,524,860.			†		1,524,	
	26 Total expenses and disbursements.							
	Add lines 24 and 25	1,612,773.	<u> </u>	0.	· 	0.	1,612,	
	27 Subtract line 26 from line 12:		.		1			
	·		1		1		1	
	a Excess of revenue over expenses and disbursements	74.616.					<u> </u>	
	a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)	74,616.		0.		0.		

Form	990-F	PF (2009) LIFE SCIENCES RESEARCH FOUNDATION		52-12	31801 Page 2
<u></u>	. 1	Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	of year
Part	<u> </u>	Balance Sheets column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing .			
ļ	2	Savings and temporary cash investments	1,318,263.	1,396,905.	1,396,905.
	3	Accounts receivable			
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable		_	
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)			
Ì	7	Other notes and loans receivable (attach sch)			
A S E T		Less allowance for doubtful accounts ▶			
Š	8	Inventories for sale or use			
E	9	Prepaid expenses and deferred charges			
Ś	10 a	Investments – U S and state government obligations (attach schedule)			
	b	Investments — corporate stock (attach schedule)			
		Investments — corporate bonds (attach schedule)			
		Investments — land, buildings, and equipment: basis			
		Less. accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans.			
ļ		Investments – other (attach schedule)			
	14	Land, buildings, and equipment basis	, !:		
		Less' accumulated depreciation (attach schedule)			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers -	1 210 262	1,396,905.	1,396,905.
		see instructions. Also, see page 1, item l)	1,318,263.	1,390,903.	1,390,903.
ļ.		Accounts payable and accrued expenses			-
À	18	Grants payable	463,862.	476,386.	* · ·
B	19		403,002.	470,300.	- {*
Ļ	20	Loans from officers, directors, trustees, & other disqualified persons			,
÷	21	Mortgages and other notes payable (attach schedule)	59,955.	51,457.	* , • *
Ţ	22	Other liabilities (describe ► SEE STATEMENT 3)	39,933.		
<u>E</u> S	23	Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here X	523,817.	527,843.	***
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			,
ΝF	24	Unrestricted	794,446.	869,062.	, *
EU	_		734,440.	003,002.	1; ,
TND	25	Temporarily restricted			┪ 。
Α	20	Permanently restricted Foundations that do not follow SFAS 117, check here			-
A B S A E L A		and complete lines 27 through 31.			>
ΤĀ	27	• • • • • • • • • • • • • • • • • • • •	ļ	1.0	- I
SNC	28				-
OE	29	Retained earnings, accumulated income, endowment, or other funds	704 446	060 060	-
RS	30 31	Total net assets or fund balances (see the instructions) Total liabilities and net assets/fund balances	794,446.	869,062. 1,396,905.	-
	111 1	(see the instructions)	1,318,263.	1,330,303.	
		Analysis of Changes in Net Assets or Fund Balanc			1
1	Tota end-	I net assets or fund balances at beginning of year — Part II, colu of-year figure reported on prior year's return).	umn (a), line 30 (must aç	<u> </u>	794,446.
2	Ente	er amount from Part I, line 27a		2	74,616.
3	Other	increases not included in line 2 (itemize)		3	260,060
4		lines 1, 2, and 3		4	869,062.
5		ases not included in line 2 (itemize)		5	000 000
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5)) – Part II, column (b), li	ine 30 6	869,062.

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If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions

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Add lines 5 and 6

8 Enter qualifying distributions from Part XII, line 4

7

8

BAA

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BAA

charitable purposes?

the tax year beginning in 2009?

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3ь

4a

4b

N /A

4a Did the foundation invest during the year any amount in a manner that would jeopardize its

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could eopardize its charitable purpose that had not been removed from jeopardy before the first day of

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Part VII-B Statements Regarding Activiti	es for Which Form	4720 May Be Requ	uired (contınued)		
'5a During the year did the foundation pay or incu	-			_	
(1) Carry on propaganda, or otherwise attemp	ot to influence legislatio	n (section 4945(e))?	∐ Yes ⊠	No	
(2) Influence the outcome of any specific public on, directly or indirectly, any voter registra	lic election (see section stion drive?	4955), or to carry	Yes	No	
(3) Provide a grant to an individual for travel,	•		X Yes	No	
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	nan a charitable, etc, or 4940(d)(2)? (see instru	ganization described uctions)	Yes X	No	
(5) Provide for any purpose other than religion educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	c, literary, or or animals?	Yes	No No	
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to a current notice regard	qualify under the except ding disaster assistance	tions	5b	X
Organizations relying on a current notice rega	rding disaster assistand	ce check here	▶ [
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure responsible 'Yes,' attach the statement required by Region 1.	sibility for the grant?		N/A Yes	No	
6a Did the foundation, during the year, receive ar on a personal benefit contract?	ny funds, directly or ind	irectly, to pay premiums	S Yes 2	K No	
b Did the foundation, during the year, pay premi	iums, directly or indirec	tly, on a personal bene	fit contract?	6ь	X
If 'Yes' to 6b, file Form 8870.	dation a partir to a prob	ibited toy cholter transa	ction? Yes	K No	
7a At any time during the tax year, was the found b If yes, did the foundation receive any proceed			L	7b	N/A
Part VIII Information About Officers, D	rectors. Trustees.	Foundation Manag	iers. Highly Paid		
and Contractors					
1 List all officers, directors, trustees, foundation	n managers and their	compensation (see inst	ructions).		
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	other allo	
SEE STATEMENT 4					
		20,597.	0		0.
2 Compensation of five highest-paid employee	es (other than those in	luded on line 1— see ir	structions). If none.	enter 'NONE.'	
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allo	e account, wances
NONE					
Total number of other employees paid over \$50,000			L	•	
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	onbe the two largest program related investments made by the loandation during the tax year on lines 7 and 2	7 (1110 di 11
1	N/A	_
		_
2		_
		_
Αll	other program-related investments. See instructions	
3		

0.

Total. Add lines 1 through 3 Form 990-PF (2009) BAA

Form 990-PF (2009) LIFE SCIENCES RESEARCH FOUNDATION Page 8 PartX Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes. 1 a 4,752 a Average monthly fair market value of securities. 1ь 1,413,792 **b** Average of monthly cash balances 1 c c Fair market value of all other assets (see instructions) 1,418,544 1 d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 1c 0. 1 e (attach detailed explanation) 0. 2 2 Acquisition indebtedness applicable to line 1 assets 3 1,418,544. Subtract line 2 from line 1d Cash deemed held for charitable activities. Enter 1-1/2% of line 3 21,278. 4 (for greater amount, see instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 397,266. 69,863 6 Minimum investment return. Enter 5% of line 5 PartXI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and do not complete this part.) and certain foreign organizations check here 69,863. 1 Minimum investment return from Part X, line 6 2a Tax on investment income for 2009 from Part VI, line 5 2a 2b b Income tax for 2009 (This does not include the tax from Part VI) 2 c c Add lines 2a and 2b 3 69,863. Distributable amount before adjustments. Subtract line 2c from line 1 4 Recoveries of amounts treated as qualifying distributions. 5 69,863. Add lines 3 and 4 6 Deduction from distributable amount (see instructions) 69,863 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) 1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26 1 a 1,612,773 1 Ь **b** Program-related investments - total from Part IX-B 2 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3a

b Cash distribution test (attach the required schedule) Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)

Adjusted qualifying distributions. Subtract line 5 from line 4

BAA

The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years Form 990-PF (2009)

1,612,

612,773.

3 b

4

5 6

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				69,863.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
b Total for prior years 20, 20, 20		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004 1,394,244.				
b From 2005 1, 232, 416.				
c From 2006 1,280,159.				
d From 2007 1, 287, 050.				
e From 2008 1,188,773.				
f Total of lines 3a through e	6,382,642.			
4 Qualifying distributions for 2009 from Part	\$			
XII, line 4: ► \$ 1,612,773.				
a Applied to 2008, but not more than line 2a			_0.	
b Applied to undistributed income of prior years (Election required – see instructions)		0.	,	
c Treated as distributions out of corpus (Election required – see instructions)	0.	, '	h 14	ý
d Applied to 2009 distributable amount	* * * * * * * * * * * * * * * * * * * *	*		69,863.
e Remaining amount distributed out of corpus	1,542,910.			
5 Excess distributions carryover applied to 2009	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a).)				
Same amount must be shown in column (a).)	1			ž.
6 Enter the net total of each column as	· ,		,} * <u>,</u>	
indicated below:			·	
a Corpus Add lines 3f, 4c, and 4e. Subtract line 5	7,925,552.	() () () () () () () () () ()	<u> </u>	
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut-				
ed income for which a notice of deficiency has been issued, or on which the section			> 1 ⁵	**
4942(a) tax has been previously assessed	, i	0.	<u> </u>	4. 3
d Subtract line 6c from line 6b Taxable	, d			<i>"</i> *
amount - see instructions	<u> </u>	0.		
e Undistributed income for 2008 Subtract line 4a from	*		,	
line 2a Taxable amount — see instructions			0.	
f Undistributed income for 2009. Subtract lines				
4d and 5 from line 1. This amount must be distributed in 2010			4.4.	0.
7 Amounts treated as distributions out of		, , , , , , , , , , , , , , , , , , , ,	×,	
corpus to satisfy requirements imposed				
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	50,000.			
,				
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)	1,344,244.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	6,531,308.			**
10 Analysis of line 9.				
a Excess from 2005 1,232,416.				,
b Excess from 2006 1,280,159.]			
c Excess from 2007 1,287,050.]			
d Excess from 2008 1,188,773.			and the same of th	
e Excess from 2009 1,542,910.	1		<u> </u>	F 000 PF (0000)

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PartXIV Private Operating Foundation					N/A
1a If the foundation has received a ruling or a is effective for 2009, enter the date of the	determination letter	r that it is a private	operating foundation	n, and the ruling	
b Check box to indicate whether the foundation	-	erating foundation o	described in section	4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
Income from Part I or the minimum Investment return from Part X for each year listed	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
b 85% of line 2a					
 Qualifying distributions from Part XII, line 4 for each year listed 					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
 Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c 					~
3 Complete 3a, b, or c for the alternative test relied upon.					
a 'Assets' alternative test — enter:					
(1) Value of all assets		 			
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test — enter					
 Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) 					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from an exempt organization .					
(4) Gross investment income	<u> </u>	<u> </u>			
Supplementary Information assets at any time during the	(Complete this	part only if the	organization ha	d \$5,000 or moi	e in
1 Information Regarding Foundation Management		istructions.j			
List any managers of the foundation who close of any tax year (but only if they have NONE		nore than 2% of the than \$5,000) (See	total contributions re section 507(d)(2))	eceived by the found	dation before the
b List any managers of the foundation who	own 10% or more	of the stock of a cor	poration (or an equa	ally large portion of	the ownership of
a partnership or other entity) of which the NONE	foundation has a ?	10% or greater inter	est		·
2 Information Regarding Contribution, Gra	nt, Gift, Loan, Sch	olarship, etc, Progra	ams:		
Check here \(\bigcup \] If the foundation only requests for funds If the foundation make complete items 2a, b, c, and d.					
a The name, address, and telephone number	er of the person to	whom applications	should be addressed	d.	
SEE STATEMENT 5	1 1 1 1 1 1				
b The form in which applications should be	submitted and into	rmation and materia	ais they should inclu	ae:	
c Any submission deadlines			· · · · · · · · · · · · · · · · · · ·		
SEE STATEMENT FOR LINE 2A					
d Any restrictions or limitations on awards,	such as by geograp	ohical areas, charita	able fields, kinds of i	nstitutions, or other	factors:
SEE STATEMENT FOR LINE 2A			_		

Form 990-PF (2009) LIFE SCIENCES RESEARCH FOUNDATION Page 11 Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, oundation Recipient show any relationship to any foundation manager or Purpose of grant or contribution Amount status of recipient Name and address (home or business) substantial contributor a Paid during the year 1,524,860. SEE SCHEDULE ATTACHED NONE PUBLIC GRANTS PAID TO RECIPIENT FOR THE PURPOSE OF CONDUCTING BASIC BIOLOGICAL RESEARCH AT THE INSTITUTION CHOSEN BY THE RECIPIENT Total 3a 1,524,860. **b** Approved for future payment NONE PUBLIC GRANTS TO BE PAID TO 4,900,713. SEE SCHEDULE ATTACHED RECIPIENT FOR THE PURPOSE OF CONDUCTING BASIC BIOLOGICAL RESEARCH AT THE INSTITUTION CHOSEN BY THE RECIPIENT

3ь

Total

nter gross amounts unless otherwise indicated	Unrelated I	ousiness income	Excluded by	section 512, 513, or 514	
Program service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (see the instructions
· ·	<u> </u>				(SSS IIIS IIIS II GOLIOTIS
a b		 	 		
	+		+ + +		
			 		
-	1		1 1		
f	-		1 1	· · · · · · · · · · · · · · · · · · ·	-
g Fees and contracts from government agencies			1		
2 Membership dues and assessments					_
3 Interest on savings and temporary cash investments			14	35,654.	
4 Dividends and interest from securities				· -	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	7,017.	
9 Net income or (loss) from special events		·			
10 Gross profit or (loss) from sales of inventory	,			· , **	<u> </u>
11 Other revenue		\$ · · ·	·*		***
a	 				
b	+	- -			
С	 				
d	+		 		
e	 			42,671.	
13 Total. Add line 12, columns (b), (d), and (e)			1 1 2 1	13	42,671
See worksheet in the instructions for line 13 to verify	calculations)			13	

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See the instructions)
N/A	
-	
-	
•	
-	

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

								1	Yes	No
	 Did the description 	e organization directly	or indirectly e	ngage in any of the follow ther than section 501(c)(3	ving with a	ny other organi	zation tion 527		*	*
	relatir	ng to political organizat	tions?	ther than section sorteres	, organiza	101137 01 111 300	11011 327,			2
	a Trans	fers from the reporting	foundation to	a noncharitable exempt of	organizatio	n of:				
	(1) C	ash						1a (1)		X
	(2) O	ther assets						1 a (2)		Χ,
	b Other	transactions:								<u> </u>
	(1) S	ales of assets to a non	ncharitable exe	mpt organization				1 b (1)		X
	(2) P	urchases of assets fror	m a noncharita	ble exempt organization				1 b (2)		X
	(3) R	ental of facilities, equip	pment, or othe	r assets				1 b (3)		X
	(4) R	eimbursement arrange	ments					1 b (4)		X
	(5) Lo	oans or loan guarantee	es					1 b (5)	L	X
	(6) P	erformance of services	or membersh	ip or fundraising solicitati	ons			1 b (6)		X
	c Sharıı	ng of facilities, equipm	ent, mailing lis	its, other assets, or paid o	employees			1 c		X
	ad 16 Ab. a		shava ia Waa I	assemble to the fellowing of	shadula Ca	luma (h) abaul	d always show the for	markat val	of	
	the go	answer to any of the a oods, other assets, or s	services given	complete the following so by the reporting foundation how in column (d) the val	on If the fo	oundation recei	u always show the fair ved less than fair mark	et value in	ue oi	
		ansaction or sharing a	rrangement, s	how in column (d) the val	ue of the g					
-	Line no	(b) Amount involved	(c) Name o	of noncharitable exempt organiza	tion	(d) Description (of transfers, transactions, and	sharing arrai	ngement	<u>is</u>
N	/A		ļ							
		<u> </u>	<u> </u>							
										
										
_										
										
										
	<u>.</u>									
		<u> </u>	 							
						 _				
										
_		<u>-</u>	 							
_		· · · · ·	 							
-										
	2a Is the	foundation directly or	indirectly affili	ated with, or related to, o ther than section 501(c)(3	ne or more	tax-exempt or	ganızatıons	Yes	X	No
		, ,	-	ther than section 501(c)(3)))	JUN 327	•	☐ 1 es	, 1	INO
_	Dil 1e	s,' complete the follow (a) Name of organizati		(b) Type of organ	nzation.		(c) Description of re	lationship		
N	/A	(a) Name of Organizati	1011	(b) Type of organ	1124(1011		(c) Description of te	attoriship		
	/ 11									
										
						 				
										
	Under pena	alties of perjury, I declare that	I have examined the	is return, including accompanying	schedules and	d statements, and to	the best of my knowledge and	belief, it is tru	ie, corre	ct, and
	complete	Declaration of preparer (other	than taxpayer or fic	is return, including accompanying luciary) is based on all information	of which prep	arer has any knowle	edge	•		
		T T	\mathcal{Z}_{Δ}			, 9/18/	10 1/200	1. A		
3	▶	Umou	1 V C			<u> </u>				
3	Sign	ature of officer or trustee				Date	Title			
•	<u> </u>	Preparer's				Date	Check if (Se	parer's Identify e Signature in	ing num the insti	ber rs)
	Paid Pre-	1	S E. CRIS	P		8/30/10	self- employed ► N/	Α		
Ė	parer's		S MENDELS	OHN & ASSOCIATES	P.A.		EIN N/A			
	Use Only	yours if self- employed), > 36 S		ST STE 1800						
_		address, and ZIP code BALT	'IMORE, ME	21201-3102			Phone no ► (4	LO) 68 <u>5</u>	<u>-551</u>	.2
5	^^							Form 99	O-PE	(2009)

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF

OMB No 1545-0047

2009

Employer identification number Name of the organization LIFE SCIENCES RESEARCH FOUNDATION 52-1231801 Organization type (check one): Filers of: Section: Form 990 or 990-EZ (enter number) organization 501(c)(4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the **General Rule** or a **Special Rule**Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule -Tor an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II) Special Rules -For a section 501(c)(3) organization filing Form 990 or 990-EZ, that met the 33-1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990 EZ, that received from any one contributor, during the year contributions for use *exclusively* for religious, charitable, etc, purposes, but these contributions did not aggregate to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc, purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc, contributions of \$5,000 or more during the year Caution: An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF) but it must answer 'No' on Part IV, line 2 of their Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF) BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990, 990EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Schedule B	(Form 990,	990-EZ,	or 990-PF	(2009)
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Name of organization

Page 1

of 4

of Part I

Employer identification number

LIFE S	SCIENCES RESEARCH FOUNDATION	52-12	231801
Part I	Contributors (see instructions)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	GILEAD COLORADO, INC. 7575 WEST 103RD AVENUE	\$ 57,000.	Person X Payroll Noncash
	WESTMINSTER, CO 80021		(Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>2</u>	AMGEN, INC.	-	Person X Payroll
	ONE AMEGEN CENTER DRIVE	\$94,000.	Noncash
	THOUSAND OAKS, CA 91320		(Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	HOWARD HUGHES MEDICAL INSTITUTE 4000 JONES BRIDGE ROAD CHEVY CHASE, MD 20815	\$ <u>224,000.</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4	THE ELLISON MEDICAL FOUNDATION 4710 BETHESDA AVENUE BETHESDA, MD 20814	\$84,500.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>5</u>	GENENTECH, INC. 1 DNA WAY SOUTH SAN FRANCISCO, CA 94080	\$82,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
6	ROCHE PHARMACEUTICALS 340 KINGSLAND STREET	\$75,073.	Person X Payroll Noncash
	NUTLEY N.I 07100		(Complete Part II if there

Schedule	R	(Form	ggn	990.F7	٥r	990.PF	(2009)
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of **4**

of Part I

Name of organization

LIFE SCIENCES RESEARCH FOUNDATION

Employer identification number 52-1231801

Pang [Contributors	(see instructions)
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(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	LILLY RESEARCH LABORATORIES LILLY CORPORATE CENTER INDIANAPOLIS, IN 46285	\$ <u>117,000.</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
8	MERCK & CO., INC. 770 SUMNEYTOWN PIKE WEST POINT, PA 19486	\$ <u>50,136.</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
9	NOVARTIS INST. FOR BIOMEDICAL 220 MASSACHUSETTS AVENUE CAMBRIDGE, MA 02139	\$122,787.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(5)	(b)	(2)	(4)
(a) Number	Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	· · ·	Aggregate	
Number	Name, address, and ZIP + 4 SCHERING-PLOUGH FOUNDATION 1095 MORRIS AVENUE	Aggregate contributions	Person X Payroll Noncash (Complete Part II if there
10 (a) Number	Name, address, and ZIP + 4 SCHERING-PLOUGH FOUNDATION 1095 MORRIS AVENUE UNION, NJ 07083 (b) Name, address, and ZIP + 4 BALTIMORE FAMILY FUND	\$ 56,500. \$ 56,500. (c) Aggregate contributions	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
10 (a) Number	Name, address, and ZIP + 4 SCHERING-PLOUGH FOUNDATION 1095 MORRIS AVENUE UNION, NJ 07083 (b) Name, address, and ZIP + 4 BALTIMORE FAMILY FUND 55 WALLS DRIVE, 3RD FLOOR	\$ 56,500. \$ 56,500. (c) Aggregate contributions	Type of contribution Person X Payroll Noncash (Complete Part II if there is a noncash contribution) (d) Type of contribution Person X Payroll Noncash (Complete Part II if there
(a) Number 11 (a) Number	Name, address, and ZIP + 4 SCHERING-PLOUGH FOUNDATION 1095 MORRIS AVENUE UNION, NJ 07083 (b) Name, address, and ZIP + 4 BALTIMORE FAMILY FUND 55 WALLS DRIVE, 3RD FLOOR FAIRFIELD, CT 06824 (b) Name, address, and ZIP + 4 SUSAN G. KOMEN FOR THE CURE	\$56,500. (c) Aggregate contributions (c) Aggregate contributions \$50,000.	Type of contribution Person X Payroll Noncash (Complete Part II if there is a noncash contribution) (d) Type of contribution Person X Payroll Noncash (Complete Part II if there is a noncash contribution)

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Page 3

of 4

of Part I

LIFE SCIENCES RESEARCH FOUNDATION

Employer identification number

52-12318	80	1
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Part I	Contributors (see instructions.)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
13_	PFIZER, INC. EASTERN POINT RD GROTON, CT 06340	\$171,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
14_	DR. DOUGLAS E. KOSHLAND 301 KENDALL LANE BALTIMORE, MD 21210	\$57,011.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>15</u>	ABBOTT LABORATORIES 100 ABBOTT PARK ROAD ABBOTT PARK, IL 60064	\$51,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
16	O'DONNELL FOUNDATION 100 CRESCENT COURT, SUITE 1660 DALLAS, TX 75201	\$ 59,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
17	WYETH 500 ARCOLA ROAD COLLEGEVILLE, PA 19426	\$ <u>140,500.</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
18	JOHNSON & JOHNSON ONE JOHNSON & JOHNSON PLAZA NEW BRUNSWICK, NJ 08933	\$43,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)

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Schedule	B (Form 990, 990-EZ, or 990-PF) (2009)	Page 4	of 4 of Part I
Name of org	anization	Employer	identification number
LIFE S	CIENCES RESEARCH FOUNDATION	[52-12	231801
Part I	Contributors (see instructions)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
19	DEPARTMENT_OF_ENERGY		Person X Payroll
	9800 SOUTH CASS AVENUE	\$56,000.	Noncash 🗌
	ARGONNE, IL 60439		(Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash

Person Payroll Noncash

(c) Aggregate contributions (Complete Part II if there is a noncash contribution)

(d)

Type of contribution

(a)

Number

(b)

Name, address, and ZIP + 4

Page

of 1

of Part II

Name of organization

LIFE SCIENCES RESEARCH FOUNDATION

Employer identification number 52-1231801

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
14	1845 SHARES OF CVS CAREMARK		
		\$ 57,011	. 7/09/09
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	+
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	<u> </u>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
			
		\$\$	

Name of organization

Employer identification number

LIFE SCIENCES RESEARCH FOUNDATION

52-1231801

	CIENCES RESERVOIL LOONDWITON			<u> </u>			
Rari III	Exclusively religious, charitable, e organizations aggregating more the	tc, individual contribution an \$1,000 for the year.(Co	ns to section omplete cols (a) to	501(c)(7), (8), or (10) hrough (e) and the followir	ng line entry)		
	For organizations completing Part III, enter contributions of \$1,000 or less for the year	total of exclusively religious, ch (Enter this information once —	naritable, etc, see instructions) ► \$	N/A		
(a)	(b)	(c)		(d)			
	1			• •			
No. from Part I	Purpose of gift	Use of gift		Description of how gift	is held		
Taiti	N/A						
		(e)					
	Transferee's name, addres	Transfer of gift ss, and ZIP + 4	Relation	ship of transferor to trans	feree		
(a)	(b)	(c)		(d)			
No. from Part I	Purpose of gift	Use of gift		Description of how gift	is held		
	-				··		
	(e) Transfer of gift						
	Transferee's name, addres	Relation	Relationship of transferor to transferee				
(a)	(b)	(c)		(d)			
No. from Part I	Purpose of gift	Use of gift		Description of how gift	is held		
		(e) Transfer of gift					
	Transferee's name, addres		Relation	ship of transferor to trans	sferee		
(a)	(b)	(c)		(d)			
No. from Part I	Purpose of gift	Use of gift		Description of how gift	is held		
		(e)	111				
	Transferee's name, addres	Transfer of gift	Relation	ship of transferor to trans	sferee		
	Transièree 3 name, auures		- Neidilon	one of dansieror to dalls			

2009

FEDERAL STATEMENTS

LIFE SCIENCES RESEARCH FOUNDATION

52-12:11:001

STATEMENT 1 FORM 990-PF, PART I, LINE 6A NET GAIN (LOSS) FROM NONINVENTORY SALES PER BOOKS ASSETS NOT INCLUDED IN PART IV

DESCRIPTION:

1845 SHARES CVS CAREMARK

DATE ACQUIRED: HOW ACQUIRED:

7/09/2009

DATE SOLD:

PURCHASE 8/12/2009

TO WHOM SOLD:

GROSS SALES PRICE: COST OR OTHER BASIS: BASIS METHOD: DEPRECIATION: 64,028. 57,011.

COST

0.

7,017.

TOTAL \$

GAIN (LOSS)

7,017.

STATEMENT 2 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FUNDRAISING EXPENSES MISCELLANEOUS EXPENSES OFFICE EXPENSES POSTAGE & SHIPPING PROFESSIONAL FEES TELEPHONE	\$ 149. 20. 31,123. 345. 10,950. 89. TOTAL \$ 42,676.	<u>\$ 0.</u>	\$ 0.	\$ 149. 20. 31,123. 345. 10,950. 89. \$ 42,676.

STATEMENT 3 FORM 990-PF, PART II, LINE 22 OTHER LIABILITIES

ESCROW PAYABLE

51,457.

TOTAL \$ 51,457.

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FEDERAL STATEMENTS

PAGE 2

LIFE SCIENCES RESEARCH FOUNDATION

52-1231801

STATEMENT 4 FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	ACCOUNT/
DR. DONALD D. BROWN 3520 SAN MARTIN DRIVE BALTIMORE, MD 21218	PRESIDENT 2.00	\$ 0.	\$ 0.	\$ 0.
DOUGLAS E. KOSHLAND 3520 SAN MARTIN DRIVE BALTIMORE, MD 21218	CHAIRMAN 2.00	0.	0.	0.
SOLOMON H. SNYDER 3520 SAN MARTIN DRIVE BALTIMORE, MD 21218	DIRECTOR 2.00	0.	0.	0.
BRUCE ALBERTS 3520 SAN MARTIN DRIVE BALTIMORE, MD 21218	TRUSTEE 2.00	0.	0.	0.
DAVID BALTIMORE 3520 SAN MARTIN DRIVE BALTIMORE, MD 21218	TRUSTEE 2.00	0.	0.	0.
PAUL BERG 3520 SAN MARTIN DRIVE BALTIMORE, MD 21218	TRUSTEE 2.00	0.	0.	0.
MICHAEL S. BROWN 3520 SAN MARTIN DRIVE BALTIMORE, MD 21218	TRUSTEE 2.00	0.	0.	0.
CHRISTINE PRATT 3520 SAN MARTIN DRIVE BALTIMORE, MD 21218	TREASURER 24.00	11,904.	0.	0.
PETER AGRE 3520 SAN MARTIN DRIVE BALTIMORE, MD 21218	TRUSTEE 2.00	0.	0.	0.
JAMES E. DARNELL, JR. 3520 SAN MARTIN DRIVE BALTIMORE, MD 21218	TRUSTEE 2.00	0.	0.	0.
MARK FISHMAN 3520 SAN MARTIN DRIVE BALTIMORE, MD 21218	TRUSTEE 2.00	0.	0.	0.
ALFRED G. GILMAN 3520 SAN MARTIN DRIVE BALTIMORE, MD 21218	TRUSTEE 2.00	0.	0.	0.

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FEDERAL STATEMENTS

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LIFE SCIENCES RESEARCH FOUNDATION

52-1230800

STATEMENT 4 (CONTINUED) FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	 COMPEN- SATION	CONTRI- BUTION TO EBP & DC	ACCOUNT/
DAVID V. GOEDDEL 3520 SAN MARTIN DRIVE BALTIMORE, MD 21218	TRUSTEE 2.00	\$ 0.	\$ 0.	\$ 0.
JOSEPH L. GOLDSTEIN 3520 SAN MARTIN DRIVE BALTIMORE, MD 21218	TRUSTEE 2.00	0.	0.	0.
PETER JACKSON 3520 SAN MARTIN DRIVE BALTIMORE, MD 21218	TRUSTEE 2.00	0.	0.	0.
STEVEN L. MCKNIGHT 3520 SAN MARTIN DRIVE BALTIMORE, MD 21218	TRUSTEE 2.00	0.	0.	0.
CECIL PICKETT 3520 SAN MARTIN DRIVE BALTIMORE, MD 21218	TRUSTEE 2.00	0.	0.	0.
WILLIAM RUTTER 3520 SAN MARTIN DRIVE BALTIMORE, MD 21218	TRUSTEE 2.00	0.	0.	0.
PHILLIP A. SHARP 3520 SAN MARTIN DRIVE BALTIMORE, MD 21218	TRUSTEE 2.00	0.	0.	0.
MAXINE F. SINGER 3520 SAN MARTIN DRIVE BALTIMORE, MD 21218	TRUSTEE 2.00	0.	0.	0.
SHIRLEY M TILGHMAN 3520 SAN MARTIN DRIVE BALTIMORE, MD 21218	TRUSTEE 2.00	0.	0.	0.
ROBERT TJIAN 3520 SAN MARTIN DRIVE BALTIMORE, MD 21218	TRUSTEE 2.00	0.	0.	0.
JAMES WATSON 3520 SAN MARTIN DRIVE BALTIMORE, MD 21218	TRUSTEE 2.00	0.	0.	0.
MARK B. ROTH 3520 SAN MARTIN DRIVE BALTIMORE, MD 21218	TRUSTEE 2.00	0.	0.	0.

STATEMENT 4 (CONTINUED) FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	 COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
SUSAN DIRENZO 3520 SAN MARTIN DRIVE BALTIMORE, MD 21218	ASST DIRECTOR 16.00	\$ 8,693.	\$ 0.	\$ 0.
JAMES BROACH 3520 SAN MARTIN DRIVE BALTIMORE, MD 21218	CO-DIRECTOR 2.00	0.	0.	0.
THOMAS SILHAVY 3520 SAN MARTIN DRIVE BALTIMORE, MD 21218	CO-DIRECTOR 2.00	0.	0.	0.
SUSAN WESSLER 3520 SAN MARTIN DRIVE BALTIMORE, MD 21218	TRUSTEE 2.00	0.	0.	0.
	TOTAL	\$ 20,597.	\$ 0.	\$ 0.

STATEMENT 5 FORM 990-PF, PART XV, LINE 2A-D APPLICATION SUBMISSION INFORMATION

NAME OF GRANT PROGRAM: SEE ATTACHED STATEMENT

NAME: CARE OF:

STREET ADDRESS: CITY, STATE, ZIP CODE: TELEPHONE:

FORM AND CONTENT: SEE ATTACHED STATEMENT SUBMISSION DEADLINES: SEE ATTACHED STATEMENT RESTRICTIONS ON AWARDS: SEE ATTACHED STATEMENT

2009

FEDERAL SUPPLEMENTAL INFORMATION

PAGE 1

LIFE SCIENCES RESEARCH FOUNDATION

52-1231801

FEDERAL FOOTNOTE

IN AUGUST 1984, THE FOUNDATION ELECTED TO BE TREATED AS A PRIVATE FOUNDATION FOR ALL CODE PURPOSES OTHER THAN SECTION 4940 (EXCISE TAX ON INVESTMENT INCOME). THIS ELECTION WAS MADE IN ORDER FOR THE FOUNDATION TO BE TREATED AS A QUALIFIED FUND UNDER CODE SECTION 44F(E)4 (NOW CODE SECTION 41(E)(6)(D)).

Part XV - Line 2(a) through 2(d), Page 9

Eligibility:

Three year fellowships will be awarded on a competitive basis to graduates of medical schools and graduate schools in the biological sciences holding M D. or Ph.D. degrees. Awards will be based solely on the quality of the individual applicant's previous accomplishments and on the merit of his/her proposal for postdoctoral research. All U S. citizens are eligible to apply with no restrictions on the laboratory of their choice. Foreign applicants will be eligible for study in U S laboratories. We are especially interested in supporting individuals who wish to change their field of research by bringing new ideas and methods from one area of biology to another. This might be carried out during a second postdoctoral term or as in independent research associate.

a. Purpose of Grants:

The Life Sciences Research Foundation (LSRF) was founded to provide an alternative to the usual forms of corporate support for research in academic institutions. Most companies have primarily supported research projects with some prospects for short term commercial application. Now, by means of its Peer Review Committee and the overview provided by its Founding Board, the Foundation offers donors an inexpensive and professionally grounded means for directing aid to individuals based solely on their merit. The sponsors have no say in choosing the fellows nor in targeting their research project A sponsor will receive no patent rights or rights on refusal from the work of fellows bearing the sponsor's name, though recipients will be invited to visit company facilities and report early results of research at annual meetings of the Foundation's fellows. The Foundation's goal is to strengthen research and training in all areas of the life sciences.

b. How Solicited:

In the spring of each year, an application notice is sent to every graduate school in biology and every medical school in the U.S. This list is obtained from the "Graduate Programs and Admissions Manual, Volume A" put out by the Graduate Record Examination Board. This same application sheet is sent to all applicants who write or call LSRF. The deadline for applications is October of each year for funding beginning as early as summer of the following year.

Part XV - Line 2(a) through 2(d), Page 9 (Continued)

c. How Selected:

Application (to be submitted in 3 copies) - The front page of the application must include name, date of birth, citizenship, present address, telephone number, position, location and name of supervisor of proposed research, title of project and a one paragraph summary of the project. The front page should be followed by a curriculum vitae and description of the research project. In addition, the candidate is responsible for having three letters of commendation from faculty members familiar with the candidate's research sent to LSRF. The proposed advisor must acknowledge acceptance of the candidate and the willingness of the institution to administer the award. This letter should indicate the role expected of the candidate in the broad framework of the advisor's research noting the size of the research group and the degree of independence that the candidate will have. Address correspondence to: LSRF, 3520 San Martin Drive, Baltimore, Maryland 21218.

2. Terms and Conditions Under Which the Foundation Makes Individual Grants

The grant constitutes a fellowship grant which is to be used by the recipients at the U.S Laboratory of their choice. Each awardee is given a topic of research in the life sciences. The purpose of the grant is to train and support high quality young scientists in the very best research environments.

A fellowship of \$56,000 per year is used to pay salary, fringe benefits, travel to the laboratory and annual meeting It is also expected to support the fellow's research expenses

FORM 990PF, PART XV, LINE 3(a) - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

GRANTS PAID TO RECIPIENT FOR THE PURPOSE OF CONDUCTING BASIC BIOLOGICAL RESEARCH AT THE INSTITUTION CHOSEN BY THE RECIPIENT.

RECIPIENT	ADDRESS	AMOUNT TO BE PAID
Dr Eric Eckland	University of California, San Francisco San Francisco, CA 94143	19,073
Dr Lucy O"Впеп	University of California, Berkeley Berkeley, CA 94720	25,000
Dr Ido Bachelet	Massachusetts Institute of Technology Cambridge, MA 02139	53,787
Dr Oliver Kent	Johns Hopkins University School of Medicine Baltimore, MD 21205-2196	56,000
Dr Dennis Ko	University of Washington Seattle, WA 98195	50,000
Dr Meng Wang	Massachusetts General Hospital Boston, MA 02114	14,000
Dr Nicholas Bonawitz	Purdue University West Lafayette, IN 47907	56,000
Dr Christopher Brown	The University of Chicago Chicago, IL 60637	56,000
Dr Michael Cohen	University of California, San Francisco San Francisco, CA 94143	92,000
Dr. Dirk Hockemeyer	Whitehead Institute for Biomedical Research Cambridge, MA 02142	56,000
Dr Xıaoyı Hu	The Scripps Research Institute La Jolla, CA 92037	56,000
Dr David Savage	Harvard Medical School Boston, MA 02115	56,000
Dr Mohammad Seyedsayamdost	Harvard Medical School Boston, MA 02115	54,500
Dr Yoav Shaul	Johns Hopkins University School of Medicine Baltimore, MD 21205-2196	54,500
Dr Juan Song	Johns Hopkins University School of Medicine Baltimore, MD 21205-2196	56,000
Dr Qı Zhang	University of California - Los Angeles Los Angeles, CA 90095	56,000
Dr Sviatoslav Bagriantsev	University of California, San Francisco San Francisco, CA 94143	56,000
Dr Hung-Chun Chang	Massachusetts Institute of Technology Cambridge, MA 02139	56,000
Dr. Ilana Chefetz-Menaker	Yale University New Haven, CT 06520	56,000
Dr Xing Chen	Harvard Medical School Boston, MA 02115	56,000
Dr Salvatore Chiantia	Stony Brook University Stony Brook, NY 11794	56,000
Dr Guo N Huang	University of Texas Southwestern Medical Center	56,000

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\$1,524,860

	Dallas, TX 75390	
Dr Jessica Hutti	University of North Carolina at Chapel Hill Chapel Hill, NC 27599	56,000
Dr. Chnstian Kastrup	Koch Institute/Massachusetts Institute of Technology Cambridge, MA 02139	42,000
Dr Enrico Magnani	Carnegie Institute/Stanford University Stanford, CA 94305	56,000
Dr Lauren Mashburn-Warren	University of Illinois - Chicago Chicago, IL 60612	56,000
Dr. Nıtın Phadnıs	Fred Hutchinson Cancer Research Center Seattle, WA 98109	56,000
Dr Xınnan Wang	Children's Hospital Boston/Harvard Medical School Boston, MA 02115	14,000
Dr Xianfeng Xu	Cold Spring Harbor Laboratory Cold Spring Harbor, NY 11724	42,000
Dr Keren Zıv	Stanford University School of Medicine Stanford, CA 94305	56,000

TOTAL GRANTS AND CONTRIBUTIONS PAID

FORM 990PF, PART XV, LINE 3(b) - GRANTS AND CONTRIBUTIONS APPROVED FOR FUTURE PAYMENT

GRANTS PAID TO RECIPIENT FOR THE PURPOSE OF CONDUCTING BASIC BIOLOGICAL RESEARCH AT THE INSTITUTION CHOSEN BY THE RECIPIENT.

RECIPIENT	ADDRESS	AMOUNT TO BE PAID
Dr Evren Azeloglu	Mount Sinai School of Medicine New York, NY 10029	168,000
Dr Chase Beisel	National Institute of Child Health and Human Development Rockville, MD 20847	168,000
Dr Arpita Bose	Harvard University Boston, MA 02115	168,000
Dr Daniel Chitwood	University of California, Davis Davis, CA 95616	168,000
Dr Xın Duan	Harvard University Boston, MA 02115	168,000
Dr Justin Gerke	Princeton University Princeton, NJ 08544	168,000
Dr Hun-Way Hwang	National Human Genome Research Institute Bethesda, MD 20892	168,000
Dr Carla Klattenhoff	Massachusetts Institute of Technology Cambridge, MA 02139	168,000
Dr Daryl Klein	Harvard Medical School Boston, MA 02115	168,000
Dr Katherine Ralston	University of Virginia Charlottesville, VA 22908	168,000
Dr Thomas Ream	University of Wisconsin-Madison Madison, WI 53706	168,000
Dr Kathenne Ryan	University of California-San Diego/Scripps Institution of Oceanography La Jolla, CA 92037	168,000
Dr Ashley Shade	Yale University New Haven, CT 06520	168,000
Dr Kımberly Tu	University of Utah School of Medicine Salt Lake City, UT 84132	168,000
Dr Julian Wong	The Scripps Research Institute La Jolla, CA 92037	168,000
Dr David Zhang	Wyss Institute-Harvard Medical School Boston, MA 02115	168,000
Dr Sviatoslav Bagnantsev	University of California, San Francisco San Francisco, CA 94143	112,000
Dr Hung-Chun Chang	Massachusetts Institute of Technology Cambridge, MA 02139	112,000
Dr Ilana Chefetz-Menaker	Yale University New Haven, CT 06520	112,000
Dr Xing Chen	Harvard Medical School Boston, MA 02115	98.000
Dr Salvatore Chiantia	Stony Brook University Stony Brook, NY 11794	112,000
Dr Guo N Huang	University of Texas Southwestern Medical Center Dallas, TX 75390	112,000
Dr Jessica Hutti	University of North Carolina at Chapel Hill Chapel Hill, NC 27599	112,000
Dr Christian Kastrup	Koch Institute/Massachusetts Institute of Technology Cambridge, MA 02139	126,000

Dr Dennis Ko

Cambridge, MA 02139	2,213
University of Washington Seattle, WA 98195	12,500
TOTAL CONTRIBUTIONS TO BE PAID	\$4,900,713

LIFE SCIENCES RESEARCH FOUNDATION FORM 990-PF YEAR 2009 FY MAY 31, 2010 EIN: 52-1231801

Part XIII, Line 7

ELECTION UNDER REGULATIONS SECTION 53.4942(a)-3(c)(2)TO SATISFY THE REQUIREMENTS OF SECTION 4942(g)(3)

Life Sciences Research Foundation is making an election under Regulation section 53 4942(a)-3(c)(2) to treat \$50,000 of qualifying distributions as a distribution that was made out of corpus, as described in Section 4942(g)(3).

The Foundation received a \$50,000 contribution from a private foundation during the year ended May 31, 2010. In order for that private foundation to treat this contribution as a qualifying distribution on its Form 990-PF, the Foundation made a qualifying distribution of \$50,000 during the year ended May 31, 2010 and hereby makes this election to treat such qualifying distribution as a distribution out of corpus

Election made by

Donal Brown Signature
Trisiles

Title