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Form 990  Department of the Treasury Internal Revenue Service	Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)	OMB No 1545-0047 <div> <div>2009</div> <div>Open to Public Inspection</div> </div>
	The organization may have to use a copy of this return to satisfy state reporting requirements	

A For the 2009 calendar year, or tax year beginning 07-01-2009 and ending 06-30-2010		B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending		C Name of organization THE TRANSLATIONAL GENOMICS RESEARCH INST FDN Doing Business As Number and street (or P O box if mail is not delivered to street address) Room/suite 400 E VAN BUREN SUITE 850 City or town, state or country, and ZIP + 4 PHOENIX, AZ 85004		D Employer identification number 33-1092191 E Telephone number (602) 343-8423 G Gross receipts \$ 8,955,393	
		F Name and address of principal officer MICHAEL BASSOFF 400 E VAN BUREN SUITE 850 PHOENIX, AZ 85004		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number			
I Tax-exempt status <input checked="" type="checkbox"/> 501(c) (3) (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527							
J Website: WWW.HELPTGEN.ORG							
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of formation 2004		M State of legal domicile AZ			

Part I		Summary		
Activities & Governance	1	Briefly describe the organization's mission or most significant activities BIOGENOMIC MEDICAL RESEARCH FUNDRAISING FOR THE TRANSLATIONAL GENOMICS RESEARCH INSITUTE (TGEN) 		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3	Number of voting members of the governing body (Part VI, line 1a)	3 <u>1</u>	
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4 <u>1</u>	
	5	Total number of employees (Part V, line 2a)	5 <u> </u>	
	6	Total number of volunteers (estimate if necessary)	6 <u>6</u>	
	7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a <u> </u>	
	b	Net unrelated business taxable income from Form 990-T, line 34	7b <u> </u>	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	4,359,865	8,918,909
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0	0
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	49,477	36,484
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	0	0
			4,409,342	8,955,393
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	4,545,907	4,259,390
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,077,559	1,094,471
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) <u>1,298,565</u>		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	369,195	534,251
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	5,992,661	5,888,112
	19	Revenue less expenses Subtract line 18 from line 12	-1,583,319	3,067,281
Net Assets or Fund Balances			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	7,543,043	10,267,142
	21	Total liabilities (Part X, line 26)	369,491	785,648
	22	Net assets or fund balances Subtract line 21 from line 20	7,173,552	9,481,494

Part II Signature Block	
Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge
	<div> <div></div> <div>Signature of officer</div> </div> <div> <div></div> <div>2011-05-16</div> </div> <div> <div></div> <div>Date</div> </div>
	<div> <div></div> <div>MICHAEL BASSOFF PRESIDENT</div> </div> <div>Type or print name and title</div>
Paid Preparer's Use Only	<div> <div>Preparer's signature</div> <div></div> </div> <div>Date</div> <div> <div>Check if self-employed</div> <div><input checked="" type="checkbox"/></div> </div> <div>Preparer's identifying number (see instructions)</div>
	<div> <div>Firm's name (or yours if self-employed), address, and ZIP + 4</div> <div> <div>ERNST & YOUNG US LLP</div> <div>TWO NORTH CENTRAL AVENUE STE 2300</div> <div>PHOENIX, AZ 85004</div> </div> </div> <div>EIN</div>
	<div>Phone no (602) 322-3000</div>

1 Briefly describe the organization's mission

BIOGENOMIC MEDICAL RESEARCH FUNDRAISING FOR THE TRANSLATIONAL GENOMICS RESEARCH INSTITUTE (TGEN)

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a	(Code) (Expenses \$ 4,259,390 including grants of \$ 4,259,390) (Revenue \$)
	SEE SCHEDULE O









4b (Code) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)

4e	Total program service expenses	\$ 4,259,390
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Part IV Checklist of Required Schedules

		Yes	No	
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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		No
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	6		No
7	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 	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10	Yes	
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.	11	Yes	
	• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.			
	• Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	• Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	• 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? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII 	12		No
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?	Yes	No	
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	12A	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
14b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Part II	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 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 the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable	1a	2	
	b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	Yes
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return	2a	0	
	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		No
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b If "Yes," enter the name of the foreign country: <input type="text"/> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b	No
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?			5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b	
7 Organizations that may receive deductible contributions under section 170(c).				
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			7a	No
b If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c	No
d If "Yes," indicate the number of Forms 8282 filed during the year			7d	
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e	No
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f	No
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g	
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?			7h	
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			8	
9 Sponsoring organizations maintaining donor advised funds.				
a Did the organization make any taxable distributions under section 4966?			9a	
b Did the organization make a distribution to a donor, donor advisor, or related person?			9b	
10 Section 501(c)(7) organizations. Enter				
a 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				
a Gross income from members or shareholders			11a	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			11b	
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			12b	

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body . . .	1a	19	
b	Enter the number of voting members that are independent . . .	1b	16	
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 supervision 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 organizational documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets? . . .	5		No
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . . .	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	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

Section B. Policies

(This Section B requests information about policies not required by the Internal Revenue Code.)

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does 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?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line a or b, 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," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed▶AZ
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 make these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ ELIZABETH MONTEMAYOR 400 E VAN BUREN SUITE 850 PHOENIX, AZ 85004 (602) 343-8508

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

☐ Check this box if the organization did not compensate any current or former officer, director, trustee or key employee

Form **990** (2009)

1b Total	0	2,025,377	60,968
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2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **0**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
TRANSLATIONAL GENOMICS RESEARCH INS 445 NORTH 5TH STREET STE 600 PHOENIX, AZ 85004	MANAGEMENT	108,000

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

Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	8,918,909			
	g	Noncash contributions included in lines 1a-1f \$ 12,595					
	h	Total. Add lines 1a-1f		8,918,909			
Program Service Revenue	2a		Business Code				
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		0			
	Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		36,484		
4		Income from investment of tax-exempt bond proceeds . .		0			
5		Royalties		0			
6a		Gross Rents	(i) Real	(ii) Personal			
b		Less rental expenses					
c		Rental income or (loss)					
d		Net rental income or (loss)					
7a		Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
b		Less cost or other basis and sales expenses					
c		Gain or (loss)					
d		Net gain or (loss)			0		
8a		Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18					
b		Less direct expenses					
c		Net income or (loss) from fundraising events . .			0		
9a		Gross income from gaming activities See Part IV, line 19					
b		Less direct expenses					
c		Net income or (loss) from gaming activities . .			0		
10a		Gross sales of inventory, less returns and allowances					
b		Less cost of goods sold					
c		Net income or (loss) from sales of inventory . .			0		
	Miscellaneous Revenue	Business Code					
11a							
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d			0			
12	Total revenue. See Instructions			8,955,393			36,484

Part IX

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	4,259,390	4,259,390		
2	Grants and other assistance to individuals in the U S See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	617,000		61,700	555,300
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	329,659		32,966	296,693
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	0			
9	Other employee benefits	147,812		14,781	133,031
10	Payroll taxes	0			
11	Fees for services (non-employees)				
a	Management	113,712		113,712	0
b	Legal	5,335		5,335	0
c	Accounting	0			
d	Lobbying	0			
e	Professional fundraising See Part IV, line 17	0			
f	Investment management fees	0			
g	Other	15,151		15,151	0
12	Advertising and promotion	33,081		3,308	29,773
13	Office expenses	149,787		14,979	134,808
14	Information technology	0			
15	Royalties	0			
16	Occupancy	74,383		7,438	66,945
17	Travel	31,855		0	31,855
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	84,272		42,136	42,136
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	18,112		18,112	0
23	Insurance	0			
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a	SEMINARS AND EDUCATION	5,393		539	4,854
b	DUES AND SUBSCRIPTIONS	3,170		0	3,170
c					
d					
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	5,888,112	4,259,390	330,157	1,298,565
26	Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing				1	
	2	Savings and temporary cash investments			4,985,857	2	5,732,940
	3	Pledges and grants receivable, net			2,227,657	3	4,362,848
	4	Accounts receivable, net				4	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L				5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges				9	13,833
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	168,169	32,687	10c	14,575
	b	Less accumulated depreciation	10b	153,594			
	11	Investments—publicly traded securities			285,972	11	68,117
	12	Investments—other securities See Part IV, line 11				12	67,964
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			10,870	15	6,865
	16	Total assets. Add lines 1 through 15 (must equal line 34)			7,543,043	16	10,267,142
Liabilities	17	Accounts payable and accrued expenses			66,121	17	83,573
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 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 Complete Part X of Schedule D			303,370	25	702,075
	26	Total liabilities. Add lines 17 through 25			369,491	26	785,648
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			1,716,947	27	580,912
	28	Temporarily restricted net assets			5,394,512	28	8,838,489
	29	Permanently restricted net assets			62,093	29	62,093
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			7,173,552	33	9,481,494
	34	Total liabilities and net assets/fund balances			7,543,043	34	10,267,142

Part XI Financial Statements and Reporting

	Yes	No
1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? . . .		No
b Were the organization's financial statements audited by an independent accountant?	Yes	
c If "Yes," to 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits . . .		

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
THE TRANSLATIONAL GENOMICS RESEARCH INST FDN

Employer identification number
33-1092191

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1

☐

A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**

2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)

8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10

☐

An organization organized and operated exclusively to test for public safety See**section 509(a)(4).**

11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box

g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
Total									

Part II

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	10,836,405	4,804,855	5,598,863	4,359,865	721,605	26,321,593
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	10,836,405	4,804,855	5,598,863	4,359,865	721,605	26,321,593
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						9,891,364
6 Public Support. Subtract line 5 from line 4						16,430,229

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	10,836,405	250,673	5,598,863	4,359,865	721,605	26,321,593
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	175,433	250,673	188,867	74,077	33,934	722,984
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11 Total support (Add lines 7 through 10)						27,044,577

12

Gross receipts from related activities, etc (See instructions)

12

13

First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

14	Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f))	14	60 752 %
15	Public Support Percentage for 2008 Schedule A, Part II, line 14	15	63 509 %

16a

33 1/3% support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

b

33 1/3% support test—2008. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

17a

10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization

b

10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization

18

Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions

Part IIISupport Schedule for Organizations Described in IRC 509(a)(2)
(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3Gross receipts from activities that are not an unrelated trade or business under section 513						
4Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5The value of services or facilities furnished by a governmental unit to the organization without charge						
6Total. Add lines 1 through 5						
7aAmounts included on lines 1, 2, and 3 received from disqualified persons						
bAmounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
cAdd lines 7a and 7b						
8Public Support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9Amounts from line 6						
10aGross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
bUnrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
cAdd lines 10a and 10b						
11Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13Total support (Add lines 9, 10c, 11 and 12.)						
14First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

15Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f))	15	
16Public support percentage from 2008 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))	17	
18Investment income percentage from 2008 Schedule A, Part III, line 17	18	
19a33 1/3% support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
b33 1/3% support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
20Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions		

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

SCHEDULE D
(Form 990)

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
THE TRANSLATIONAL GENOMICS RESEARCH INST FDN

Employer identification number
33-1092191

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit	<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1

Purpose(s) of conservation easements held by the organization (check all that apply)
☐ Preservation of land for public use (e g , recreation or pleasure) ☐ Preservation of an historically importantly land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

2

Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _____

4

Number of states where property subject to conservation easement is located ▶ _____

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶ _____

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a

If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i)

Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

(ii)

Assets included in Form 990, Part X ▶ \$ _____

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a

Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

b

Assets included in Form 990, Part X ▶ \$ _____

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐

Public exhibition

b

☐

Scholarly research

c

☐

Preservation for future generations

d

☐

Loan or exchange programs

e

☐

Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a Beginning of year balance	62,093	62,093			
b Contributions					
c Investment earnings or losses	7,353	6,606			
d Grants or scholarships					
e Other expenditures for facilities and programs	7,353	6,606			
f Administrative expenses					
g End of year balance	62,093	62,093			

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶ 100.000 %

c

Term endowment ▶

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations

3a(i)

Yes

No

(ii) related organizations

3a(ii)

Yes

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

3b

Yes

4

Describe in Part XIV the intended uses of the organization's endowment funds

Part VI

Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		11,053	11,053	0
d Equipment		40,791	40,791	0
e Other		116,325	101,750	14,575
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				14,575

Schedule D (Form 990) 2009

Part XIReconciliation of Change in Net Assets from Form 990 to Financial Statements			
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	

Part XIIReconciliation of Revenue per Audited Financial Statements With Revenue per Return			
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	

Part XIIIReconciliation of Expenses per Audited Financial Statements With Expenses per Return			
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	

Part XIVSupplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
SCHEDULE D, PART V	SUPPLEMENTAL INFORMATION - ENDOWMENTS	THE INSTITUTE'S POLICY FOR APPROPRIATING THE DISTRIBUTION OF ITS SUMMER INTERNSHIP PROGRAM ENDOWMENT HAS BEEN DESIGNED TO SUPPORT A SPECIFIC NUMBER OF SUMMER INTERNS EACH YEAR FOR THE NEXT 25 YEARS. THE INSTITUTE CONSIDERED THE LONG-TERM EXPECTED RETURN ON ITS ENDOWMENT. THE INSTITUTE CLASSIFIES AS PERMANENTLY RESTRICTED NET ASSETS: (1) THE ORIGINAL VALUE OF THE GIFT DONATED TO THE PERMANENT ENDOWMENT, (2) THE ORIGINAL VALUE OF SUBSEQUENT GIFTS TO THE PERMANENT ENDOWMENT, AND (3) ACCUMULATIONS TO THE PERMANENT ENDOWMENT MADE IN ACCORDANCE WITH THE DIRECTION OF THE APPLICABLE DONOR GIFT INSTRUMENT.
SCHEDULE D, PART X - FIN 48 FOOTNOTE		IN FISCAL 2009, THE INSTITUTE ADOPTED A "MORE LIKELY THAN NOT" THRESHOLD FOR FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OF AN UNCERTAIN TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. THE INSTITUTE RECOGNIZES INTEREST AND PENALTIES RELATED TO UNCERTAIN TAX POSITIONS IN OTHER EXPENSES, IF THEY EXIST. THE ADOPTION OF THE MORE LIKELY THAN NOT THRESHOLD FOR FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OF UNCERTAIN TAX POSITIONS HAD NO SIGNIFICANT IMPACT ON THE INSTITUTE'S CONSOLIDATED FINANCIAL STATEMENTS FOR THE YEARS ENDED JUNE 30, 2010 AND 2009.

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1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II **Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed  

2	Enter total number of section 501(c)(3) and government organizations	1
3	Enter total number of other organizations	0

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Use Schedule I-1 (Form 990) if additional space is needed.

[illegible]

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

[illegible]

Schedule J
(Form 990)

Compensation Information

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization
THE TRANSLATIONAL GENOMICS RESEARCH INST FDN

Employer identification number
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Part I

Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <div><div><input checked="" type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Discretionary spending account</div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input checked="" type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div>		
b	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 the expenses described above? If "No," complete Part III to explain	1b	Yes
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply. <div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input checked="" type="checkbox"/> Independent compensation consultant</div><div><input type="checkbox"/> Form 990 of other organizations</div><div><input type="checkbox"/> Written employment contract</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div>		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization: <div>a Receive a severance payment or change-of-control payment?</div> <div>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</div> <div>c Participate in, or receive payment from, an equity-based compensation arrangement?</div> If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	4a	No
		4b	No
		4c	No
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: <div>a The organization?</div> <div>b Any related organization?</div> If "Yes," to line 5a or 5b, describe in Part III	5a	No
		5b	No
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: <div>a The organization?</div> <div>b Any related organization?</div> If "Yes," to line 6a or 6b, describe in Part III	6a	No
		6b	No
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	No
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

Part II

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
MICHAEL BASSOFF	(i)	0	0	0	0	0	0	0
	(ii)	415,239	0	22,000	9,800	5,991	453,030	0
DENISE MCCLINTIC	(i)	0	0	0	0	0	0	0
	(ii)	159,098	0	7,864	6,292	3,779	177,033	0
JEFFREY M TRENT PHD	(i)	0	0	0	0	0	0	0
	(ii)	746,703	232,685	66,658	9,800	7,753	1,063,599	0
TERESA BURLESON	(i)	0	0	0	0	0	0	0
	(ii)	334,354	24,276	16,500	9,800	7,753	392,683	0

Part III

Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
SCHEDULE J, PART I, LINE 1A		FIRST CLASS TRAVEL IS PERMITTED BY EXECUTIVE STAFF ONLY AND MUST, PER TGEN POLICY, BE PRE-APPROVED BY THE CHIEF OPERATING OFFICER. TGEN DOES PROVIDE MEMBERSHIP TO DR. TRENT AT THE PARADISE VALLEY COUNTRY CLUB. THIS EXPENSE WAS PRE-APPROVED BY THE CHIEF OPERATING OFFICER. THESE EXPENSES WERE NOT CONSIDERED AS TAXABLE COMPENSATION TO THE RECIPIENT.
SCHEDULE J, PART I, LINE 7		SOME OF THE PERSONS LISTED IN FORM 990, PART VII WERE PAID BONUSES WHICH WERE BASED ON ACCOMPLISHMENTS OF SPECIFIC MILESTONES AND/OR PERFORMANCE BASES.

SCHEDULE O
(Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990.

Name of the organization
THE TRANSLATIONAL GENOMICS RESEARCH INST FDN

Employer identification number
33-1092191

Identifier	Return Reference	Explanation
FORM 990, PART III, LINE 4	PROGRAM SERVICE ACCOMPLISHMENTS	<p>THE TRANSLATIONAL GENOMICS RESEARCH INSTITUTE FOUNDATION RAISES FUNDS FOR THE TRANSLATIONA L GENOMICS RESEARCH INSTITUTE (TGEN) THE PROGRAM SERVICE ACCOMPLISHMENTS OF TGEN ARE LIST ED BELOW INTRODUCTION TGEN RESEARCH MOVED FORWARD IN FY 10 AT A PACE FAR GREATER THAN ANY PREVIOUS YEAR THIS NARRATIVE PROVIDES AN OVERVIEW OF THESE SUCCESSES AND REINFORCES OUR MISSION OF DETERMINING THE ROOT GENETIC CAUSES OF NUMEROUS DISEASES AND DISORDERS AND THEN CONVERTING THAT KNOWLEDGE AS QUICKLY AS POSSIBLE INTO DIAGNOSTIC TESTS AND THERAPEUTICS FO R IMPROVED PATIENT CARE OUR RESEARCH COLLABORATIONS WERE MANY AND VARIED IN TERMS OF BREA DTH AND SCOPE AND LOCATION - MANY LOCALLY, OTHERS NATIONALLY AND GLOBALLY LOCALLY, OUR CO LLABORATIONS WITH BANNER HEALTH, MAYO CLINIC, SCOTTSDALE HEALTHCARE, BANNER RESEARCH INSIT UTE AND OTHER HOSPITALS AND HEALTH CARE PROVIDERS FOCUSED ON NUMEROUS TYPES OF CANCER, NEU ROLOGIC IMPAIRMENTS, AND METABOLIC DISORDERS TGEN'S RESEARCH HAD A PRESENCE ACROSS THE ST ATE THIS INCLUDED OUR ONGOING EFFORTS TO ASSIST THE ARIZONA DEPARTMENT OF HEALTH SERVICES (ADHS) WITH STATE-OF-THE-ART TESTING FOR THE H1N1 SWINE FLU, LOOKING FOR WAYS TO HELP TRA CK DRUG-RESISTANT MUTATIONS, FIND NEW TREATMENTS AND AVOID A PANDEMIC TGEN FACULTY PRESEN TED DETAILS ABOUT TGEN'S TEST IN EARLY NOVEMBER 2009 AT THE 47TH ANNUAL MEETING OF THE INF ECTIOUS DISEASES SOCIETY OF AMERICA (IDSA) IN PHILA DELPHIA THE H1N1 WORK OCCURRED IN OUR FLAGSTAFF FACILITY , TGEN NORTH, WHILE TO THE SOUTH, TGEN AND THE UNIVERSITY OF ARIZONA EST ABISHED THE SOUTHWEST COMPREHENSIVE CENTER FOR DRUG DISCOVERY AND DEVELOPMENT THROUGH A \$ 7 5 MILLION NIH GRANT THE NEW CENTER WILL ALLEVIATE BOTTLENECKS THAT EXIST BETWEEN THE LA BORATORY-BASED DISCOVERY OF PROMISING THERAPEUTIC TARGETS AND THE ULTIMATE GOAL OF DELIVER ING NEW, SAFE AND EFFECTIVE DRUGS TO ADDRESS UNMET MEDICAL NEEDS OF THE PATIENT LOCALLY, TGEN'S WORK WITH A SU INCLUDED THE PARTNERSHIP FOR PERSONALIZED MEDICINE, WHICH CONTINUED T O DEVELOP A ROBUST PROTEOMICS APPROACH TO MEDICINE AND HEALTH CARE, AND BUILDING OUT A SUP ERCOMPUTER INFRASTRUCTURE THAT RANKS AMONG THE FASTEST IN THE BIOMEDICAL SCIENCES IN EARL Y FEBRUARY 2010, TGEN ANNOUNCED THE COMPLETION OF A STRATEGIC ALLIANCE AND AFFILIATION AGR EEMENT WITH THE VAN ANDEL RESEARCH INSTITUTE (VARI) THAT WILL MAXIMIZE THE RESEARCH CAPABI LITIES OF BOTH NON-PROFIT INSTITUTES TGEN EXPECTS THE AGREEMENT TO CREATE A ROBUST BASIC- SCIENCE-TO-TRANSLATIONAL DELIVERY PLATFORM AIMED AT DEVELOPING NEW TESTS AND TREATMENTS FO R PATIENT BENEFIT TGEN'S FINAL CONTRACT REVISION, SIGNED JANUARY 15, ENABLED THE ARIZONA BIOMEDICAL RESEARCH COMMISSION (ABRC) TO CONTINUE FUNDING TGEN THROUGH STATE TOBACCO-TAX R EVENUES THE NEW STATE CONTRACT, FACILITATED THROUGH ABRC LEADERSHIP AND THE ARIZONA ATTOR NEY GENERAL'S OFFICE, ENSURES CONTINUED STATE FUNDING THROUGH FISCAL YEAR 2012 TGEN, THRO UGH ITS AFFILIATION WITH SCOTTSDALE HEALTHCARE, INITIATED A NUMBER OF CLINICAL TRIALS FOCU SED ON NUMEROUS TYPES OF CANCER CLINICAL TRIALS DETERMINE THE ACTIONS OF DRUGS IN HUMANS BY IDENTIFYING THE SIDE EFFECTS ASSOCIATED WITH INCREASING DOSES AND PROVIDING EVIDENCE OF EFFECTIVENESS IN SEPTEMBER 2009, TGEN PUBLISHED ITS SECOND INDEPENDENT, THIRD PARTY ECON OMIC IMPACT REPORT, WHICH PROVIDED ENCOURAGING RESULTS IN TERMS OF TGEN AS A POSITIVE RETU RN ON THE STATE INVESTMENT WE FOLLOWED THAT REPORT IN JANUARY 2010 WITH THE PUBLICATION O F OUR FIRST INDEPENDENT ANALY SIS OF THE ECONOMIC IMPACT OF TGEN DRUG DEVELOPMENT (TD2) ON EMPLOYMENT, REVENUES AND BUSINESS DEVELOPMENT IN SCOTTSDALE ADDITIONALLY, A DESCRIPTION O F PEER REVIEWED PUBLICATION, GRANT, CONTRACT, PHILANTHROPIC, EDUCATIONAL AND MEDIA ACTIVIT Y FOLLOWS PEER-REVIEWED LABORATORY RESEARCH PUBLICATIONS AND PRESENTATIONS SINCE ITS INCE PTION, THE RESEARCH AND CLINICAL ASPECTS OF TGEN HAVE FOCUSED SOLELY ON THE PATIENT AS AN END POINT AT TGEN, OUR FACULTY WORK TO DISCOVER THE UNDERLYING CAUSE OF DISEASE PROGRESSI ON AND RESISTANCE TO THERAPY AND WHY SOME INDIVIDUALS ENCOUNTER DEBILITATING DISEASES AND OTHERS LIVE HEALTHY LIVES OUR CLINICAL TRIALS -IN COLLABORATION WITH SCOTTSDALE HEALTHCAR E- NOT ONLY OFFER HOPE TO PATIENTS SUFFERING FROM MANY TYPES OF CANCER, THE RESULTS SERVE TO INFORM OUR RESEARCH STUDIES SUPPORTED BY A NEW WAVE OF TECHNOLOGY , TGEN'S RESEARCH AND CLINICAL EFFORTS REMAIN EQUAL TO THE STRENGTHS AND CAPABILITIES OF ANY OF TODAY'S LEADING RESEARCH AND CLINICAL INSTITUTES NOWHERE IS THIS MORE EVIDENT THAN WITH TGEN'S SEQUENCIN G CAPABILITIES TGEN HAS "CENTER OF EXCELLENCE' STATUS WITH THREE OF THE WORLD'S LARGEST G ENOMICS TECHNOLOGY PROVIDERS - AFFYMETRIX, AGILENT AND LIFE TECHNOLOGIES TGEN'S NEXT-GENE RATION OR "NEXT-GEN" SEQUENCING, SYST EMS ALLOW US TO DIG DEEPER INTO THE GENOME THAN EVER BEFORE BY PROVIDING MORE INFORMATION AND INCREASING OUR PROBABILITY OF IDENTIFYING SOMETHI NG SIGNIFICANT THE LONG-TERM HOPE IS THAT DOCTORS WILL LEVERAGE THIS INFORMATION TO INFOR M DECISIONS ABOUT PATIENT CARE A MAJOR INITIATIVE</p>

Identifier	Return Reference	Explanation
FORM 990, PART III, LINE 4	PROGRAM SERVICE ACCOMPLISHMENTS	<p>CENTERS ON CANINE GENETICS THE PROGRAM FOR CANINE HEALTH AND PERFORMANCE (PCHP) IS A TGE NVARI INTER-INSTITUTIONAL PROGRAM DEVELOPED TO ACCELERATE THE PATH TO DISCOVERY OF CAUSAT IVE GENETIC LESIONS ACROSS SEVERAL DISEASES IN DOGS THAT SIMILARLY AFFLICT HUMANKIND (INCL UTING CANCER, DEAFNESS, MULTIPLE SCLEROSIS, HEART DEFECTS, OBESITY , NEUROLOGIC DISORDERS A ND OTHERS) AN IMPORTANT PART OF THE PCHP IS THE CANINE HEREDITARY CANCER CONSORTIUM (CHCC), WHICH WAS A RECENTLY FUNDED AARA NATIONAL CANCER INSTITUTE AWARD TO TGEN TGEN, THE VAN ANDEL RESEARCH INSTITUTE (VARI) AND THE NATIONAL CANCER INSTITUTE LAUNCHED THE CHCC TO ST UDY NATURALLY OCCURRING CANCERS IN DOGS TO BETTER UNDERSTAND WHY BOTH PETS AND PEOPLE GET SICK TGEN'S RESEARCH RESULTS APPEAR IN A NUMBER OF SCIENTIFIC AND MEDICAL JOURNALS, AND A DD TO THE GROWING KNOWLEDGE BASE OF MOLECULAR RESEARCH AND MEDICINE IN FY 10, TGEN RESEARC HERS PUBLISHED THEIR RESEARCH RESULTS IN NUMEROUS SCHOLARLY PEER-REV IEWED ACADEMIC JOURNAL S AND THROUGH PRESENTATIONS AT LEADING NATIONAL AND INTERNATIONAL CONFERENCES THESE INCLU DE PUBLICATION IN LEADING SCIENTIFIC JOURNALS SUCH AS NEW ENGLAND JOURNAL OF MEDICINE, NAT URE GENETICS, PLOS, BLOOD, CANCER RESEARCH, AND A HOST OF OTHER DISEASE-ASSOCIATED PUBLICA TIONS (E G DIABETES, MOLECULAR CANCER THERAPEUTICS, NEUROLOGY , JOURNAL OF WOMEN'S HEALTH, ETC)</p>

Identifier	Return Reference	Explanation
SELECT HIGHLIGHTS FOR FY 10		<p>1 TGEN AND UC BERKELEY RESEARCHERS REPORTED IN THE JULY 20 NATURE GENETICS IDENTIFICATION OF A GENE VARIANT THAT CARRIES NEARLY TWICE THE RISK OF DEVELOPING AN INCREASINGLY COMMON TYPE OF BLOOD CANCER INVESTIGATORS FOUND THAT MUTATIONS IN A GENE CALLED C6ORF15, OR STG , ARE ASSOCIATED WITH THE RISK OF DEVELOPING FOLLICULAR LYMPHOMA THIS IS A CANCER OF THE BODY'S DISEASE-FIGHTING NETWORK WHOSE RATES HAVE NEARLY DOUBLED IN THE PAST THREE DECADES CITATION GENETIC VARIANTS AT 6P21 33 INFLUENCE FOLLICULAR LYMPHOMA RISK CHRISTINE F SKI BOLA, PAIGE M BRACCI, ERAN HALPERIN, LUCIA CONDE, DAVID W CRAIG, LUZ AGANA, KELLY IYADUR AI, NIKOLAUS BECKER, ANGELA BROOKES-WILSON, JOHN D CURRY, JOHN SPINELLI, ELIZABETH A HOL LY, JACQUES RIBY, LUOPING ZHANG, ALEXANDRA NIETERS, MARTYN T SMITH, KEVIN M BROWN NATUR E GENETICS 41, 873-875 (20 JULY 2009) 2 ANALYSES OF CLINICAL TRIAL RESULTS, PUBLISHED SEP TEMBER 2 IN THE NEW ENGLAND JOURNAL OF MEDICINE, SHOW A POTENTIAL NEW INVESTIGATIONAL THER APY FOR ADVANCED AND METASTATIC BASAL CELL SKIN CANCER THE STUDY, CONDUCTED AT TGEN CLINI CAL RESEARCH SERVICE (TCRS) AT SCOTTSDALE HEALTHCARE AND TWO OTHER SITES APPEARS TO DEMONS TRATE TUMOR SHRINKAGE AND LIMITED SIDE EFFECTS THESE FINDINGS ARE SIGNIFICANT BECAUSE NO PROVEN THERAPY EXISTS FOR ADVANCED BASAL CELL CARCINOMA (BCC) BCC IS THE MOST COMMON CANC ER IN THE UNITED STATES WITH ABOUT ONE MILLION NEW CASES DIAGNOSED EACH YEAR ARIZONA HAS ONE OF THE HIGHEST INCIDENCES OF SKIN CANCER IN THE WORLD CITATION INHIBITION OF THE HED GEHOG PATHWAY IN ADVANCED BASAL-CELL CARCINOMA DANIEL D VON HOFF, M D , PATRICIA M LORUS SO, D O , CHARLES M RUDIN, M D , PH D , JOSINA C REDDY, M D , PH D , ROBERT L YAUCH, PH D , RAOUL TIBES, M D , GLEN J WEISS, M D , MITESH J BORAD, M D , CHRISTINE L HANN, M D , PH D , JULIE R BRAHMER, M D , HOWARD M MACKEY, PH D , BERTRAM L LUM, PHARM D , WALTE R C DARBONNE, M S , JAMES C MARSTERS, JR, PH D , FREDERIC J DE SAUVAGE, PH D , AND JEN NIFER A LOW, M D , PH D PUBLISHED AT WWW NEJM ORG SEPT 2, 2009 3 TGEN CLINICAL RESEARC H SERVICES AT SCOTTSDALE HEALTHCARE ANNOUNCED SEPTEMBER 22 THE START OF A CLINICAL TRIAL F OR A DRUG DESIGNED TO COMBAT ADRENOCORTICAL CARCINOMA (ACC), A RARE BUT DEADLY CANCER THAT ATTACKS THE ADRENAL GLANDS OTHER THAN SURGERY, THE ONLY TREATMENT FOR ACC IS THE EXACTIN G USE OF A COMPOUND CALLED MITOTANE, A CHEMICAL RELATIVE OF DDT, WHICH THE U S BANNED AS AN INSECTICIDE IN 1972 4 DR GLEN WEISS OF TGEN AND SCOTTSDALE HEALTHCARE IN JULY ANNOUN CED TWO SIGNIFICANT ADVANCES IN TREATING LUNG CANCER DR WEISS, AN ASSOCIATE INVESTIGATOR IN TGEN'S CANCER AND CELL BIOLOGY DIVISION AND DIRECTOR OF THORACIC ONCOLOGY AT TGEN CLIN ICAL RESEARCH SERVICES AT SCOTTSDALE HEALTHCARE, MADE BOTH ANNOUNCEMENTS AT THE 13TH WORLD CONFERENCE ON LUNG CANCER IN SAN FRANCISCO, OCTOBER 2009 5 A SCIENTIFIC PAPER ABOUT USI NG MICRORNAS, SMALL MOLECULES THAT REGULATE GENE EXPRESSION IN CELLS, TO HELP UNDERSTAND A ND PREDICT HOW MALIGNANT LUNG CANCER OFTEN SPREADS TO THE BRAIN THIS PAPER WAS SELECTED A S THE BEST OF 233 SCIENTIFIC PAPERS AT THE INSTITUTE OF ELECTRICAL AND ELECTRONICS ENGINEE RS INTERNATIONAL CONFERENCE ON BIOINFORMATICS & BIOMEDICINE, HELD NOV 1-4 IN WASHINGTON, D C CITATION IDENTIFYING MIRNA AND IMAGING FEATURES ASSOCIATED WITH METASTASIS OF LUNG C ANCER TO THE BRAIN - SARA NASSER, AARATI R RANADE, SHRAVAN SRIDHART, LISA HANEY, RONALD L KORN, MICHAEL B GOTWAY, GLEN J WEISS, SEUNGCHAN KIM 6 A STUDY PUBLISHED IN THE DECEM BER EDITION OF DIABETIC MEDICINE, SHOWED IT IS POSSIBLE TO IDENTIFY BIOMARKERS ASSOCIATED WITH END-STAGE RENAL DISEASE (ESRD) FROM THE POOLED DNA OF MORE THAN 1,000 DIABETICS SPEC IFICALLY, TGEN RESEARCHERS IDENTIFIED GENES THAT COULD POTENTIALLY CONTRIBUTE TO ESRD AMON G THOSE WITH TYPE 1 DIABETES CITATION IDENTIFICATION OF SPECIFIC DNA VARIANTS MAY ENHANC E OUR UNDERSTANDING OF GENETIC RISK FACTORS FOR RENAL DISEASE AND MAY PROVIDE DIAGNOSTIC V ALUE IN DETERMINING WHICH PATIENTS ARE AT GREATEST RISK OF DEVELOPING ESRD - DAVID W CRAI G, MEREDITH P MILLIS AND JOHANNA K DISTEFANO 7 AS PART OF AN OVERALL EFFORT BY THE NAT IONAL INSTITUTES OF HEALTH TO IDENTIFY ALL MICROBIOMS ON AND IN THE HUMAN BODY, TGEN CONDU CTED A STUDY IN CONJUNCTION WITH JOHNS HOPKINS UNIVERSITY PUBLISHED JAN 6 BY THE SCIENTIF IC JOURNAL PLOS ONE, WHICH DOCUMENTED FOR THE FIRST TIME THE DRAMATIC CHANGES IN BACTERIAL COMMUNITIES FOLLOWING CIRCUMCISION AND THE POSSIBLE EFFECTS ON HIV INFECTION CITATION T HE EFFECTS OF CIRCUMCISION ON THE PENIS MICROBIOME - LANCE B PRICE, CINDY M LIU, KRISTIN E E JOHNSON, MALIHA AZIZ, MATTHEW K LAU, JOLENE BOWERS, JACQUES RAVEL, PAUL S KEIM, DAV ID SERWADDA, MARIA J WAWER AND RONALD H GRAY 8 A STUDY IN CONJUNCTION WITH SCOTTSDALE HEALTHCARE - AND WITH THE HELP OF SCIENTISTS AT THE VAN ANDEL RESEARCH INSTITUTE - SHOWED HOW TO PREDICT WHICH PA TIENTS WITH SMALL-CELL LUNG CANCER MAY BE RESISTANT TO FIRST-LINE C HEMOTHERAPY THIS STUDY WAS PRESENTED IN JANUARY I</p>

Identifier	Return Reference	Explanation
SELECT HIGHLIGHTS FOR FY 10		<p>N SAN DIEGO AT THE AACR-IASLC'S JOINT CONFERENCE ON MOLECULAR ORIGINS OF LUNG CANCER CITATION TUMOR MICRORNA BIOMARKERS ASSOCIATED WITH DE NOVO CHEMORESISTANCE IN SMALL CELL LUNG CANCER - GLEN J. WEISS, AARATI R. RANADE, DAVID CHERBA, SHRAVAN SRIDHAR, PATRICK RICHARDS ON, ANOOR PARIPATI, BRAD BOWLES AND CRAIG WEBB 9 AS PART OF A MULTI-YEAR STUDY IN CONJUNCTION WITH THE ARIZONA ALZHEIMER'S CONSORTIUM, TGEN SCIENTISTS PUBLISHED A PAPER IN THE JANUARY EDITION OF BMC GENOMICS, SHOWING HOW THREE KINASES, OR PROTEINS, DISMANTLE CONNECTIONS WITHIN BRAIN CELLS, WHICH MAY LEAD TO MEMORY LOSS ASSOCIATED WITH ALZHEIMER'S DISEASE CITATION HIGH-CONTENT SIRNA SCREENING OF THE "KINOME" IDENTIFIES EIF2AK2 AND DYRK1A AS CRITICAL MEDIATORS OF AD-RELATED TAU HYPERPHOSPHORYLATION - AZORSA, ROBESON, FROST, MEECHOOV ET, BRAUTIGAM, DICKEY, BEAUDRY, BASU, HOLZ, HERNANDEZ, BISANZ, GWINN, GROVER, ROGERS, REIMAN, HUTTON, STEPHAN, MOUSSES AND DUNCKLEY 10 TGEN WAS PART OF A NATIONAL CONSORTIUM THAT CONDUCTED THE LARGEST GENOME-WIDE ASSOCIATION STUDY IN ALZHEIMER'S DISEASE TO DATE, IDENTIFYING TWO NEW GENETIC VARIANTS AND CONFIRMING TWO OTHERS THEIR FINDINGS WERE PUBLISHED MAY 12 IN THE JOURNAL OF THE AMERICAN MEDICAL ASSOCIATION CITATION SESHADRI S, ET AL "GENOME-WIDE ANALYSIS OF GENETIC LOCI ASSOCIATED WITH ALZHEIMER DISEASE" JAMA 2010; 303 1832- 40 11 DR DANIEL D. VON HOFF, TGEN'S PHYSICIAN-IN-CHIEF, RECEIVED A TOP AWARD FROM THE AMERICAN SOCIETY OF CLINICAL ONCOLOGY (ASCO) FOR HIS CANCER RESEARCH DR VON HOFF RECEIVED THE 2010 DAVID A. KARNOFSKY MEMORIAL AWARD AND LECTURE AT ASCO'S 46TH ANNUAL MEETING THIS PAST WEEK (JUNE 4-8) AT THE MCCORMICK PLACE IN CHICAGO ASCO PRESENTED THE AWARD TO DR VON HOFF "FOR HIS OUTSTANDING ACHIEVEMENTS IN CANCER RESEARCH AND FOR HIS IMPACT ON THE TREATMENT OF PATIENTS WITH CANCER " CITATION ANALYSIS OF SOMATIC COPY NUMBER ALTERATIONS ASSOCIATED WITH POOR PROGNOSIS AND PROGRESSION OF MULTIPLE MYELOMA IN AFRICAN AMERICANS 12 TGEN SCIENTISTS HAVE IDENTIFIED FIVE GENETIC BIOMARKERS THAT COULD HELP LEAD TO IMPROVED TREATMENTS, WITH FEWER SIDE EFFECTS, FOR PATIENTS WITH DIABETES TGEN SENIOR INVESTIGATOR DR JOHANNA DISTEFANO PRESENTED THE FINDINGS IN NEW ORLEANS ON JUNE 6, 2010, AT THE 69TH SCIENTIFIC SESSIONS OF THE AMERICAN DIABETES ASSOCIATION CITATION IMPROVED INSULIN SENSITIVITY (SI), A PRIMARY RESPONSE TO THIAZOLIDINEDIONE (TZD) THERAPY, VARIES AMONG TREATED INDIVIDUALS AMERICAN DIABETES ASSOCIATION</p>

Identifier	Return Reference	Explanation
CLINICAL RESEARCH		<p>ESTABLISHED IN 2006, TGEN CLINICAL RESEARCH SERVICES (TCRS), A STRATEGIC ALLIANCE WITH SCOTTSDALE HEALTHCARE (SHC), PROVIDES A DIRECT CLINICAL RESEARCH SITE FOR TGEN. TCRS BRINGS NEW CLINICAL RESEARCH INTO THE COMMUNITY, TO THOSE PATIENTS WHO WOULD OTHERWISE HAVE TO TRAVEL SOMEPLACE ELSE FOR ACCESS TO NEW THERAPIES OR PREVENTION AGENTS. THESE CLINICAL TRIALS GIVE OPTIONS THAT DID NOT EXIST BEFORE TO PHOENIX-AREA PATIENTS AS WELL AS PATIENTS FROM ALL OVER THE COUNTRY. TCRS CLINICIAN, UNDER THE DIRECTION TGEN PHYSICIAN-IN-CHIEF DR. DANIEL VON HOFF, FOCUS ON CLINICAL TRIALS WITH TARGETED AGENTS AND GENOMICS-BASED INDIVIDUALIZED THERAPY. TCRS WORKS IN COLLABORATION WITH PHYSICIANS IN THE LOCAL ARIZONA COMMUNITY AND ACROSS THE U.S. TO PROVIDE OPTIONS FOR THE CARE OF THEIR PATIENTS. TCRS SERVES AS AN INTERNATIONAL REFERRAL CENTER FOR PATIENTS FROM ANYWHERE IN THE WORLD. EVERY PATIENT WITH A PHYSICIAN REFERRAL IS WELCOME, PROVIDED THEY MEET THE REQUIREMENTS. IN SOME CASES, THE PATIENT MAY BE EVALUATED THROUGH THE NEW CLINIC, BUT RECEIVE TREATMENT FROM THEIR REFERRING PHYSICIAN. WE WORK FLEXIBLY TO ENSURE THE BEST AND MOST COMPLETE CARE FOR PATIENTS. PATIENT PARTICIPATION IN CLINICAL TRIALS AT TCRS - 125 VISITS PER MONTH - 35-45 NEW PATIENTS PER MONTH - 400-600 PATIENT SAMPLES COLLECTED PER MONTH. GRANT SUPPORT. GRANT FUNDING IS OFTEN THE LIFEBLOOD OF RESEARCH. IN FY09, TGEN INVESTIGATORS SUBMITTED 149 GRANTS TOTALING \$160,926,066. TGEN WAS AWARDED 15 GRANTS, TOTALING \$9,256,581, WITH AN ADDITIONAL 64 GRANTS PENDING AND IN REVIEWS TOTALING \$54,142,798. ADDITIONALLY, TGEN RECEIVED \$29,844,531 FROM PREVIOUS FY PENDING GRANTS, BRINGING THE AWARDED TOTAL FOR FY09 TO \$39,101,112. TGEN'S SUCCESS RATE CURRENTLY RESTS AT 26 PERCENT OF TOTAL GRANTS SUBMITTED, PLACING THE INSTITUTE NEARLY SIX PERCENT HIGHER THAN THE NATIONAL AVERAGE (NIH OVERALL SUCCESS RATE). FY10 HIGHLIGHTS:</p> <ol style="list-style-type: none"> 1. A 5-YEAR NIH GRANT, TOTALING \$4,059,520 TO DR. DAVID DUGGAN FOR A WE CARE GENOME-WIDE ASSOCIATION STUDY OF RADIATION EXPOSURE AND BILATERAL BREAST CANCER. 2. A 2-YEAR NIH GRANT, TOTALING \$1,887,446 TO DR. DUGGAN FOR FOLLOW-UP STUDIES ABOUT GENETICALLY DETERMINED RISK FACTORS FOR HIP FRACTURES. 3. A 5-YEAR NIH GRANT, TOTALING \$1,532,579 TO DR. DUGGAN FOR A STUDY OF INFLAMMATION AND THROMBOSIS GENE PATHWAYS AND CARDIOVASCULAR DISEASE. 4. A 3-YEAR NIH GRANT, TOTALING \$2,065,512 TO JOHN PEARSON FOR AN IN SILICO CENTER OF EXCELLENCE. 5. A 2-YEAR NIH GRANT, TOTALING \$416,780, TO DR. PAUL KEIM FOR GENOMICS-BASED DIAGNOSTICS FOR COCCIDIOIDES, THE CAUSATIVE AGENTS OF VALLEY FEVER. 6. A 2-YEAR GRANT TOTALING \$1,000,000 FROM THE MELANOMA RESEARCH ALLIANCE TO DR. JEFFREY TRENT FOR THE STUDY TO IDENTIFY NOVEL MELANOMA RISK GENES. 7. 3-YEAR GRANT FROM THE AMERICAN ASSOCIATION FOR CANCER RESEARCH (AACR), TOTALING \$8,180,465 (A TOTAL OF NEARLY \$18 MILLION WHEN INCLUDING FUNDS IN PARTNERSHIP WITH THE UNIVERSITY OF PENNSYLVANIA) TO DR. DANIEL VON HOFF TO DEVELOP REVOLUTIONARY TREATMENTS FOR PANCREATIC CANCER. 8. 2-YEAR GRANT FOR THE NATIONAL INSTITUTES OF HEALTH (NIH), TOTALING \$7,551,533, TO DR. NATHALIE MEURICE AND DR. SPYRO MOUSSES TO ESTABLISH, IN CONJUNCTION WITH THE UNIVERSITY OF ARIZONA, THE SOUTHWEST COMPREHENSIVE CENTER FOR DRUG DISCOVERY AND DEVELOPMENT TO HELP TRANSFORM LABORATORY DISCOVERIES INTO NEW DRUG COMPOUNDS. 9. 2-YEAR NIH GRANT, TOTALING \$4,259,456, TO DR. JEFFREY TRENT TO START, IN CONJUNCTION WITH THE VAN ANDEL RESEARCH INSTITUTE, THE CANINE HEREDITARY CANCER CONSORTIUM, WHICH WILL USE STUDIES OF DOGS TO HELP DISCOVER NEW TREATMENTS FOR RARE CANCERS IN BOTH HUMANS AND DOGS. 10. 2-YEAR NIH GRANT, TOTALING \$3,576,502, TO DR. DAVID DUGGAN FOR A GENOME-WIDE ASSOCIATION STUDY TO HELP IDENTIFY THE GENETIC ORIGINS OF ARTHRITIS OF THE KNEE. 11. 2-YEAR GRANT FROM THE U.S. DEPARTMENT OF DEFENSE AND THE TELEMEDICINE & ADVANCED TECHNOLOGY RESEARCH CENTER, TOTALING \$1,697,999, TO DR. PAUL KEIM TO CREATE TESTS THAT WOULD RAPIDLY CHARACTERIZE AND IDENTIFY THE NATURAL OR MAN-MADE SOURCES OF DISEASE OUTBREAKS. 12. 2-YEAR NIH GRANT, TOTALING \$1,436,000, TO DR. DAVID CRAIG FOR DATA PROCESSING AND VISUALIZATION IN CONJUNCTION WITH THE INTERNATIONAL 1000 GENOMES PROJECT, WHICH WOULD CATALOGUE COMMON HUMAN GENETIC VARIABILITY. 13. TWO, 2-YEAR NIH GRANTS, TOTALING \$1,093,274 AND \$225,044, TO DR. DAVID DUGGAN FOR ADVANCING THE STUDY OF THE EPIDEMIOLOGY OF PUTATIVE GENUINE GENETIC VARIANTS. <p>ENTERPRISE EFFORTS AND COLLABORATION. TGEN'S OFFICES OF BUSINESS DEVELOPMENT AND TECHNOLOGY TRANSFER WORK TO DEVELOP AN APPROPRIATE ADMINISTRATIVE STRUCTURE TO HANDLE COMMERCIALIZATION OF ITS INTELLECTUAL PROPERTY, AS WELL AS TO DEVELOP EFFECTIVE WAYS TO PARTNER WITH THE COMMERCIAL SECTOR. THE TECHNOLOGY TRANSFER OFFICE (TTO) FACILITATES AND ACCELERATES THE COMMERCIALIZATION OF TGEN'S SCIENTIFIC DISCOVERIES FOR THE BENEFIT OF HUMAN HEALTH BY:</p> <ul style="list-style-type: none"> - IDENTIFYING, PATENTING AND LICENSING NEW TECHNOLOGY, - FACILITATING ACCESS AND EXCHANGE OF RESEARCH MATERIALS, TECHNOLOGIES, AND DATA VIA MATERIALS

Identifier	Return Reference	Explanation
CLINICAL RESEARCH		L TRANSFER AGREEMENTS (MTAS) OR CONFIDENTIAL DISCLOSURE AGREEMENTS (CDAS), - NEGOTIATING COLLABORATIVE RESEARCH AGREEMENTS, AND - ASSISTING IN THE FORMATION OF START-UP COMPANIES WHEN APPROPRIATE INVENTION DISCLOSURES TGEN SCIENTISTS WORK WITH THE OFFICE OF TECHNOLOGY TRANSFER (OTT) TO FILE INVENTION DISCLOSURES AS THE FIRST STEP TOWARD A POSSIBLE PATENT APPLICATION OR OTHER APPROPRIATE FORM OF INTELLECTUAL PROPERTY PROTECTION TGEN FILED 26 INVENTION DISCLOSURES IN FY 10 BASED ON DISCOVERIES STEMMING FROM TGEN-LED RESEARCH AND FILED 21 PROVISIONAL PATENT APPLICATIONS COMMERCIALIZATION / SPIN OFFS IN TERMS OF COMMERCIALIZATION AND COMPANY FORMATION, TGEN SIGNED 3 LICENSE AGREEMENTS IN FY 10

Identifier	Return Reference	Explanation
CONTRACTS AND COLLABORATIONS		<p>TGEN SIGNED A TOTAL OF 386 CONTRACTS IN FY 10, BROKEN DOWN AS FOLLOWS 1 TGEN SIGNED 87 CO NFIDENTIAL DISCLOSURE AGREEMENTS (CDA) IN FY 10 2 TGEN SIGNED 102 MATERIAL TRANSFER AGREE MENTS (MTA) IN FY 10 3 TGEN SIGNED 85 RESEARCH COLLABORATIONS (ANY WITH LOCAL AND STATE A FFILIATIONS) IN FY 10, INCLUDING AGREEMENTS THAT FURTHER RESEARCH INTO A HOST OF DISEASES, INCLUDING BRAIN CANCER, MELANOMA, ALZHEIMER'S AND AUTISM 4 ADDITIONALLY, TGEN SIGNED 18 CONSULTING AGREEMENTS, 69 PROFESSIONAL SERVICES AGREEMENTS, 9 COMMERCIALIZATION LICENSES, AND 16 AGREEMENTS COVERING MISCELLANEOUS ACTIVITIES JOB CREATION 36 NEW FULL-TIME EQUIVAL ENT POSITIONS WERE CREA TED IN FY 10 WITH SALARIES AND BENEFITS TOTALING APPROXIMA TELY \$2,55 0,475 SALARIES FOR TEMPORARY POSITIONS (THOSE POSITIONS CREA TED FOR A FINITE PERIOD OF TI ME) TOTALED \$160,000 AND STUDENT SALARIES WERE JUST OVER \$390,000, BRINGING THE OVERALL TO TAL TO \$3,100 475 TGEN STAFF NOW TOTAL 284, OF WHICH 83 PERCENT HOLD A COLLEGE DEGREE (48 PERCENT HOLD AN ADVANCED DEGREE) FY 10 POSITIONS FILLED INCLUDE ADMINISTRATIVE ASSISTANT ASSOCIATE INVESTIGATOR DEVELOPMENT ASSOCIATE BIOINFORMATICIAN BIOINFORMATICIAN II CLINICA L INFORMATICS PROGRAMMER CLINICAL TRANSLATIONAL RESEARCH DIVISION, DEPUTY DIRECTOR DESKTOP SUPPORT SPECIALIST GRANT PROGRAM MANAGER OPERATIONS MANAGER POST-DOCTORAL FELLOW RESEARCH ASSOCIATE RESEARCH ASSOCIATE II SOFTWARE ENGINEER SOFTWARE QA ENGINEER SENIOR INVESTIGATO R SENIOR STAFF SCIENTIST STAFF SCIENTIST WE HAVE STRESSED IN THE PAST THAT INTERNSHIPS SER VE AS A PIPELINE TO TGEN IN TERMS OF FUTURE RECRUITMENT AND SUPPORT THE STATEWIDE INITIATI VE TOWARDS EDUCATION AND DEVELOPMENT FOR THE STUDENTS IN THE LIFE SCIENCES ADDITIONALLY, TGEN IS A PROVING GROUND WHERE TALENTED UNDERGRADUATES GAIN VALUABLE EXPERIENCE PRIOR TO R ETURNING TO EARN ADVANCED DEGREES AT ONE OF THE STATE'S THREE UNIVERSITIES TGEN HIRED FOU R SUCH CANDIDATES IN FY 10, WHILE 14 EMPLOYEES RETURNED TO UNIVERSITY TO FURTHER THEIR BIOM EDICAL EDUCATION EDUCATION AND PUBLIC OUTREACH INTERNSHIPS 2010 SAW 44 BIOSCIENCE STUDENT S COMPLETING THE 2010 HELIOS SCHOLARS PROGRAM AT TGEN, AND 23 NON-HELIOS STUDENTS CONDUCTI NG INTERNSHIPS - SCIENTIFIC AND ADMINISTRATIVE - IN A NUMBER OF TGEN LABS AND DEPARTMENTS SIXTEEN FEMALES AND 28 MALES COMPRISED THE HELIOS SCHOLARS, BROKEN DOWN AS FOLLOWS 32 PE RCENT HIGH SCHOOL, 57 PERCENT UNDERGRADUA TE, AND 11 PERCENT GRADUATE/MEDICAL SCHOOL SEVEN TEEN FEMALES AND SIX MALES COMPRISED THE 23 NON HELIOS STUDENTS CONDUCTING INTERNSHIPS AT TGEN IN FY 10, BROKEN DOWN AS FOLLOWS 9 PERCENT HIGH SCHOOL, 70 PERCENT UNDERGRADUA TE, AND 21 PERCENT GRADUATE/MEDICAL SCHOOL NEW IN FY 10 (FALL '09), TGEN AND THE PHOENIX BIOSCIEN CE HIGH SCHOOL LAUNCHED A PILOT INTERNSHIP PROGRAM FOR THEIR SENIOR STUDENTS THE STUDENTS RECEIVE CREDIT IN EXCHANGE FOR THE COMPLETION OF A MINIMUM NUMBER OF HOURS (120) IN A RES EARCH LAB ENVIRONMENT TEACHER TRAINING PROGRAM IN FY 10, TGEN COMPLETED ITS SECOND YEAR OF A 5-YEAR TRAINING AWARD IN COLLABORATION WITH NORTHERN ARIZONA UNIVERSITY TO CONDUCT A SU MMER GENOMICS WORKSHOP FOR TEACHERS AND GRADUATE STUDENTS AS PART OF AN NSF GRANT CALLED B IOTECHNOLOGY INTEGRATION OPPORTUNITIES FOR TEACHER EDUCATION AND CONTENT (BIOTEC) THIS GR ANT PARTNERS THE COLLEGE OF ENGINEERING AND NATURAL SCIENCES, THE COLLEGE OF EDUCATION AT NORTHERN ARIZONA UNIVERSITY, AND TGEN IN ORDER TO ENHANCE INQUIRY-BASED SCIENCE TEACHING I N GRADES 5, 7, AND 9 WHILE EXPANDING THE INTERDISCIPLINARY PREPARATION OF GRADUATE STUDENT S IN BIOTECHNOLOGY EDUCATIONAL AND PUBLIC TOURS IN FY 10, TGEN HOSTED 46 PUBLIC TOURS FOR A DIVERSE RANGE OF COMMUNITY MEMBERS AND ORGANIZA TIONS (TOTALING NEARLY 1,000 IN NUMBER), AS WELL AS SENT REPRESENTATIVES INTO THE COMMUNITY TO PRESENT AT FUNCTIONS, CAREER AND EDU CATIONAL FAIRS STIMULATING GROWTH OF ARIZONA'S LIFE SCIENCE INDUSTRIES AN IMPORTANT FACTO R IN CONTINUING TGEN'S SUCCESS IS COMMUNICA TION WITH VARIOUS STAKEHOLDERS AND THE BROADER ARIZONA COMMUNITY TOWARD THAT GOAL, TGEN SR LEADERSHIP PARTICIPATES IN A MYRIAD OF COMMU NITY-RELATED ACTIVITIES THROUGH PRESENTATIONS AT REGIONAL MEETINGS AND AS A MEMBER OR PART ICIPANT OF VARIOUS COMMITTEES AND GROUPS, INCLUDING THE ARIZONA ALZHEIMER'S CONSORTIUM BOA RD, ARIZONA BIOSCIENCE ROADMAP STEERING COMMITTEE AND ARIZONA BIOSCIENCE ROADMAP EDUCATION & WORKFORCE DEVELOPMENT COMMITTEE, ARIZONA SKILL STANDARDS COMMISSION, ARIZONA TECHNOLOGY COUNCIL, GREATER PHOENIX LEADERSHIP, NSF STEP GRANT ADVISORY BOARD- FOR ESTRELLA MOUNTAIN CC AND MORE</p>

Identifier	Return Reference	Explanation
MEDIA		<p>TGEN REMAINS ACTIVE IN PURSUING POSITIVE EARNED MEDIA EXPOSURE FOR THE INSTITUTE'S RESEARCH AND PHILANTHROPIC ACTIVITIES. MEDIA EXPOSURE RAISES AWARENESS AND BRINGS ADDED CREDIBILITY TO THE INSTITUTE AND THE STATE. IN TOTAL, TGEN RECEIVED GREATER THAN 1300 MEDIA MENTIONS IN FY10 IN VARIOUS TRADE AND PUBLIC MEDIA. LOCALLY, NATIONALLY AND INTERNATIONALLY. WHILE CITING TGEN SPECIFICALLY, THESE ARTICLES AND NEWS BRIEFS HELP BUILD A GREATER PRESENCE FOR THE CONTINUOUSLY EXPANDING BIOMEDICAL SCIENCE INITIATIVES OCCURRING IN ARIZONA. MEDIA OUTLETS INCLUDE FOX10 NEWSMAKER SUNDAY BUSINESS WIRE STATES NEWS SERVICE THE ARIZONA REPUBLIC PHOENIX BUSINESS JOURNAL ARIZONA BUSINESS GAZETTE ARIZONA DAILY STAR JEWISH NEWS OF GREATER PHOENIX GRAND RAPIDS PRESS THE STAR-LEDGER (NEWARK, NJ) PLAIN DEALER (CLEVELAND) ASIANS NEWS INTERNATIONAL (ANI) BIOTECH WEEK PR NEWswire MARKETWIRE THE HILL LIFE SCIENCE WEEKLY HEALTH & MEDICINE WEEK GENOMEWEB ON-LINE TGEN'S ON-LINE PRESENCE CONTINUES TO INCREASE ON AN ANNUAL BASIS. WITH TWO ACTIVE SITES (TGEN AND THE TGEN FOUNDATION) MORE THAN 12 MILLION PAGE VIEWS WERE RECORDED IN FY10. THE WEB SERVES AS A PORTAL TO ALLOW ARIZONANS - AND OTHERS WORLDWIDE- TO LEARN ABOUT THE RESEARCH AND DISCOVERIES COMING OUT OF TGEN LABS. ADDITIONALLY, THE TGEN FOUNDATION WEB PAGES ALLOW SUPPORTERS TO CREATE MEMORIALS AND FUNDRAISING PAGES IN SUPPORT OF TGEN'S EFFORTS TO DEVELOP IMPROVED DIAGNOSTIC TOOLS AND NEW THERAPEUTICS THAT TARGET A HOST OF DISEASES. TGEN'S RECENTLY LAUNCHED SOCIAL MEDIA (FACEBOOK, TWITTER) PROVIDES A FURTHER OPPORTUNITY TO COMMUNICATE WITH NUMEROUS CONSTITUENCIES THROUGH EVER-INCREASING MEDIUMS.</p>

Identifier	Return Reference	Explanation
FORM 990, PART VI, LINE 6	DESCRIPTION OF SIGNIFICANT CHANGES TO BYLAWS	FORM 990, PART VI, LINE 6 CLASSES OF MEMBERS AND THE NATURE OF THEIR RIGHTS LINE 6 - THE S OLE CORPORATE MEMBER OF THE TRANSLATIONAL GENOMICS RESEARCH INSTITUTE FOUNDATION (TGEN FOU NDATION) IS THE TRANSLATIONAL GENOMICS RESEARCH INSTITUTE (TGEN)

Identifier	Return Reference	Explanation
FORM 990, PART VI, LINES 7A & 7B	DECISIONS REQUIRING APPROVAL	<p>LINE 7A - TGEN, AS THE SOLE CORPORATE MEMBER OF TGEN FOUNDATION, HAS THE RIGHT TO ELECT THE BOARD OF DIRECTORS OF TGEN FOUNDATION. LINE 7B - THE SOLE CORPORATE MEMBER'S VOTE SHALL BE REQUIRED ON:</p> <p>A) THE ELECTION AND REMOVAL OF ELECTED DIRECTORS AS SET FORTH IN THE BYLAWS, B) THE ADOPTION OF ANY PLAN OF MERGER OR CONSOLIDATION, C) THE SALE OF ALL OR SUBSTANTIALLY ALL THE FOUNDATION'S ASSETS IN A SINGLE TRANSACTION OR SERIES OF RELATED TRANSACTIONS, D) THE AMENDMENT OF THE FOUNDATION'S ARTICLES OF INCORPORATION OR BYLAWS, E) THE INSTITUTION, OR CONSENT TO INSTITUTION, OF PROCEEDINGS TO ADJUDICATE THE FOUNDATION BANKRUPT OR INSOLVENT, OR THE FILING OF A PETITION SEEKING OR CONSENTING TO REORGANIZATION OR RELIEF UNDER ANY LAW RELATING TO BANKRUPTCY, INSOLVENCY, OR OTHER RELIEF FOR DEBTORS, OR THE CONSENT TO THE APPOINTMENT OF A RECEIVER, LIQUIDATOR, ASSIGNEE, TRUSTEE, SEQUESTRATOR (OR SIMILAR OFFICIAL) OF THE FOUNDATION OR OF ALL OR ANY SUBSTANTIAL PART OF ITS PROPERTY, OR THE MAKING OF ANY ASSIGNMENT FOR THE BENEFIT OF CREDITORS, OR THE ADMISSION IN WRITING OF THE FOUNDATION'S INABILITY TO PAY ITS DEBTS GENERALLY AS THEY BECOME DUE, OR ANY STEPS IN FURTHERANCE OF SUCH ACTION, AND F) THOSE MATTERS UPON WHICH THE MEMBER IS GRANTED VOTING RIGHTS IN THE ARTICLES OF INCORPORATION, BYLAWS, OR THE ARIZONA NONPROFIT CORPORATION ACT. THE SOLE CORPORATE MEMBER HAS THE FOLLOWING RESERVE POWERS:</p> <p>A) APPOINT AND REMOVE THE PRESIDENT, B) APPROVE THE ESTABLISHMENT OF NEW CORPORATE PARTNERSHIP ENTITIES CREATED OR JOINED BY THE FOUNDATION, C) APPROVE THE FOUNDATION'S EXECUTION OF MATERIAL CONTRACTS, AND D) APPROVE THE FOUNDATION'S INCURRENCE OF MATERIAL DEBTS.</p>

Identifier	Return Reference	Explanation
FORM 990, PART VI, LINE 11	PROCESS USED BY MANAGEMENT AND/OR GOVERNING BODY TO REVIEW FORM 990	THE FORM 990 IS PREPARED BY AN OUTSIDE ACCOUNTING FIRM BASED ON INFORMATION PROVIDED BY TH E FINANCE DEPARTMENT THE 990 IS THEN REV IEWED BY MANA GEMENT IN THE FINANCE DEPARTMENT AND POSTED ON THE BOARD WEBSITE

Identifier	Return Reference	Explanation
FORM 990, PART VI, LINE 12C	PROCESS USED TO MONITOR TRANSACTIONS FOR CONFLICTS OF INTEREST	TGEN Foundation issues a conflict of interest questionnaire on an annual basis to all Foun dation Director level positions and above in addition to any key employees designated by t he Foundation President and/or Chief Operating Officer The questionnaires are review ed by the Chief Financial Officer and those employees w ith conflicts are sent for further revie w to the Foundation President and/or Chief Operating Officer to ensure a plan is set forth Updates to the list are handled on an as needed basis based on contract review s and empl oyee information

Identifier	Return Reference	Explanation
FORM 990, PART VI, LINES 15A AND 15B	PROCESS USED TO DETERMINE COMPENSATION	<p>TGen Foundation does not have any direct employees. Compensation is determined by The Translational Genomics Research Institute (TGen) using the following process: TGen's Governance and Executive Compensation Committee will act in an "advice and consent" capacity reviewing the recommendations for the President and Scientific Director regarding the compensation of disqualified persons and forwarding final recommendations to the full Board for approval. Disqualified persons (except for the President and Scientific Director) will not be present for, or participate in, Committee deliberations concerning their compensation (other than to answer questions). The President and Scientific Director will participate in the deliberations concerning the compensation of direct reports. During the decision-making process, the Committee will adhere to the Executive Compensation philosophy. The Committee is authorized (and provided with sufficient funding) to annually engage outside independent compensation and legal advisors when deemed necessary and advisable. The Committee will comply with the "Rebuttable Presumption of Reasonableness" under Section 4958 of the Internal Revenue Code whenever possible. The Committee will review and understand the Internal Revenue Code provisions dealing with "excess benefit transactions concerning Disqualified Persons' compensation." When developing a compensation philosophy, TGen kept in mind the following factors: The TGen mission and strategy; The TGen culture; Trends in compensation in the external environment; Trends in recruitment of new employees; Trends in organizational employee turnover; TGen's life cycle stage.</p>

Identifier	Return Reference	Explanation
FORM 990, PART VI, LINE 19	AVAILABILITY OF GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY , AND	FINANCIAL STATEMENTS TO THE GENERAL PUBLIC TGEN FOUNDATION PROVIDES ITS GOVERNING DOCUMENT S, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS TO THE GENERAL PUBLIC UPON REQUEST

Identifier	Return Reference	Explanation
FORM 990, PART VII	HOURS DEVOTED TO RELATED ORGANIZATIONS	THE ORGANIZATION DOES NOT DIRECTLY HAVE ANY EMPLOYEES THE FOLLOWING INDIVIDUALS REPORTED IN PART VII ARE PAID BY THE TRANSLATIONAL GENOMICS RESEARCH INSTITUTE (TGEN), A RELATED TAX-EXEMPT ORGANIZATION, FOR SERVICES PROVIDED TO TGEN FOUNDATION MICHAEL BASSOFF DENISE MC CLINTIC THESE INDIVIDUALS DEVOTE 40 HOURS PER WEEK TO TGEN FOUNDATION AND NO HOURS PER WEEK TO TGEN THE FOLLOWING INDIVIDUALS REPORTED IN PART VII ARE PAID BY THE TRANSLATIONAL GENOMICS RESEARCH INSTITUTE (TGEN), A RELATED TAX-EXEMPT ORGANIZATION, FOR SERVICES PROVIDED TO TGEN JEFFREY TRENT TERESA BURLESON THEY DEVOTE 40 HOURS PER WEEK TO TGEN AND 1 HOUR PER WEEK TO TGEN FOUNDATION

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
THE TRANSLATIONAL GENOMICS RESEARCH INST FDN

Employer identification number
33-1092191

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)					
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)					
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
THE TRANSLATIONAL GENOMICS RESEARCH INST 445 NORTH 5TH STREET PHOENIX, AZ 85004 75-3065445	RESEARCH	AZ	501(C)(3)	7	VARI
VAN ANDEL RESEARCH INSTITUTE 333 BOSTWICK AVE STE 850 GRAND RAPIDS, MI 49503 52-2000823	MEDICAL RSCH	MI	501(C)(3)	4	NA

Part III

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	
							Yes	No		Yes	No

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

Part V

Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III or IV

1

During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a

Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity

b

Gift, grant, or capital contribution to other organization(s)

c

Gift, grant, or capital contribution from other organization(s)

d

Loans or loan guarantees to or for other organization(s)

e

Loans or loan guarantees by other organization(s)

f

Sale of assets to other organization(s)

g

Purchase of assets from other organization(s)

h

Exchange of assets

i

Lease of facilities, equipment, or other assets to other organization(s)

j

Lease of facilities, equipment, or other assets from other organization(s)

k

Performance of services or membership or fundraising solicitations for other organization(s)

l

Performance of services or membership or fundraising solicitations by other organization(s)

m

Sharing of facilities, equipment, mailing lists, or other assets

n

Sharing of paid employees

o

Reimbursement paid to other organization for expenses

p

Reimbursement paid by other organization for expenses

q

Other transfer of cash or property to other organization(s)

r

Other transfer of cash or property from other organization(s)

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

No

No

No

No

No

No

No

No

No

No

Yes

No

No

No

No

Yes

No

No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		

Schedule R (Form 990) 2009

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

Additional Data

Software ID:

Software Version:

EIN: 33-1092191

Name: THE TRANSLATIONAL GENOMICS RESEARCH INST FDN

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MICHAEL BASSOFF DIRECTOR/PRESIDENT	400	X		X				0	437,239	15,791
JOSE CARDENAS DESIGNATED DIRECTOR/TGEN CHAIR	10	X						0	0	0
BENNETT DORRANCE CHAIRMAN/DESIGNATED DIRECTOR	10	X		X				0	0	0
JERRY BISGROVE DIRECTOR	10	X						0	0	0
KARL ELLER DIRECTOR	10	X						0	0	0
DIANE HALLE DIRECTOR	10	X						0	0	0
LEE HANLEY DIRECTOR	10	X						0	0	0
MIKE INGRAM DIRECTOR	10	X						0	0	0
CATHERINE IVY DIRECTOR	10	X						0	0	0
KEN KENDRICK SECRETARY/DIRECTOR	10	X		X				0	0	0
RICHARD LEHMANN TREASURER/DIRECTOR	10	X		X				0	0	0
F FRANCIS NAJAFI DIRECTOR	10	X						0	0	0
THE HONORABLE SKIP RIMSZA DIRECTOR	10	X						0	0	0
RAY THURSTON DIRECTOR	10	X						0	0	0
PHIL FRANCIS DIRECTOR	10	X						0	0	0
JEFFREY M TRENT PHD DESIGNATED DIRECTOR/TGEN PRES	10	X						0	1,046,046	17,553
TERESA BURLESON DESIGNATED DIRECTOR/TGEN COO	10	X						0	375,130	17,553
TROY RICHARDS DIRECTOR	10	X						0	0	0
HOWARD YOUNG DIRECTOR	10	X						0	0	0
DENISE MCCLINTIC ASSOCIATE VP MAJOR GIFTS	400					X		0	166,962	10,071