

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



DLN: 93493217000461

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)

► The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047

Open to Public Inspection

o A	the 2	2010 ca	lendar year, or tax year begi	nning 01-01-2010 and ending 12-31-20	LO			
3 Che	ck if ap	pplicable	C Name of organization Stowers Institute for Medical Res	search		D Emp	loyer i	dentification number
Addı	ress cha	ange	Doing Business As			20-2	29935	509
Nam	ne chan	nge	Doing business As			E Telep	phone	number
Initi	al retur	m		ıf maıl ıs not delivered to street address)	Room/suit	e (816	5)926	5-4000
Terr	nınated	t	1000 East 50th Street					
– Am∈	ended r	return	City or town, state or country, a	nd ZIP + 4		G Gross	s receip	ts \$ 94,698,271
— _{App}	lication	pending	Kansas City, MO 64110					
			F Name and address of	orincipal officer	H(a) is t	his a group return	n for affili	ates? Yes No
			DAVID M CHAO			riis a group rotair	Troi dilli	accomp too p too
					1 ' '	all affiliates ir		· ·
					_			(see instructions)
T ax	-exem	pt status	▽ 501(c)(3) ┌ 501(c)()	◀ (insert no)	H(c) G	roup exemp	tion in	illiber F
J W e	ebsit e	: ⊧ n/a			1			
K Form	of ora	ıanızatıon	Corporation Trust Associ	ation Other be	I Year of	f formation 20	005	M State of legal domicile DE
Par			mary	dion; one; p	E rear o	r formation 2	003	Tablate of legal doffficie. DE
				sion or most significant activities				
	S	STOWER	RS INSTITUTE FOR MEDICA	L RESEARCH ("SIMR")EXEMPT PURPO				
ا به		PUBLIC	INTEREST WITH THE GOAL	. OF EXPANDING OUR UNDERSTANDI	NG OF FUNI	DAMENTAL	. PRO	CESSES OF LIVING
Governance	_							
≝	_							
5	3 0	Shook th	us hav Mar if the arganization	discontinued its operations or disposed	of more that	n 2 E 0/2 of 1+c		a s a t a
			,	erning body (Part VI, line 1a)		11 25 70 01 113	3	7
Activities &			-	rs of the governing body (Part VI, line 1b			4	7
				in calendar year 2010 (Part V, line 2a)		•	5	371
[[mber of volunteers (estimate	. , , , , , , , , , , , , , , , , , , ,			6	0
•				n Part VIII, column (C), line 12			7a	0
				e from Form 990-T, line 34			7b	0
					Р	rior Year	<u>' T</u>	Current Year
	8	Contri	butions and grants (Part VIII	, line 1h)		6,592,	,984	8,065,484
를	9	Progra	m service revenue (Part VII)	, line 2g)		224,	,514	73,404
Revenue	10	Invest	ment income (Part VIII, colu	mn (A), lines 3, 4, and 7d)	•	3,834,	,033	2,874,441
#	11	Other	revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		165,	,218	3,391,202
	12		_	11 (must equal Part VIII, column (A), lır	ne	10,816,	749	14,404,531
	13			art IX, column (A), lines 1–3)		1,326,	+	1,372,750
	14			rt IX, column (A), line 4)		1,020,	0	0
	15		·	oyee benefits (Part IX, column (A), lines	5-			
Expenses		10)	, , , , , , , , , , , , , , , , , , ,	(, ,		26,222,	,758	26,301,376
क्	16a	Profes	sional fundraising fees (Part :	(X, column (A), line 11e)			0	0
ਡੌ ।	b	Total fu	ndraising expenses (Part IX, column	(D), line 25) ▶ <u>0</u>				
	17), lines 11a-11d, 11f-24f)		44,810,	,589	45,019,071
	18			must equal Part IX, column (A), line 25)		72,360,		72,693,197
	19	Reven	ue less expenses Subtract II	ne 18 from line 12		-61,543,	-	-58,288,666
පි <u>මි</u> කුසු					Beginn	ning of Curre Year	ent	End of Year
Net Assets or Fund Balances	20	Totala	assets (Part X, line 16)			565,779,	,280	496,643,745
# B	21					227,504,		217,464,815
žŽ	22			ct line 21 from line 20		338,274,	,653	279,178,930
	22							
Par		Sign	ature Block					
Jnder cnowle	t III penalt edge a	ties of pe	erjury, I declare that I have exa	mined this return, including accompanying s ste. Declaration of preparer (other than offic				
Jnder Gowle	t III penalt edge a edge.	ties of pe	erjury, I declare that I have exal f, it is true, correct, and comple **			on all inform 2011-08-04		
Under knowle knowle	t III penalt edge a edge.	ties of pe	erjury, I declare that I have exal f, it is true, correct, and comple			on all inform		
Jnder mowle mowle	t III penalt edge a edge.	ties of peand belief	erjury, I declare that I have example f, it is true, correct, and comple ** ture of officer m chao director/president			on all inform 2011-08-04		
Under knowle knowle	penali penali edge a edge.	ties of pe and belief **** Signa david Type	** In the content of	ete. Declaration of preparer (other than offic	er) is based o	2011-08-04 Date	ation o	of which preparer has any
Under knowle Knowle Sign Here	penali penali edge a edge.	ties of peand belief	** In the content of	ete. Declaration of preparer (other than offic		on all inform 2011-08-04	ation o	
Under knowld Knowld Sign Here	penalti edge a edge.	**** Signa david Type Print/Typ preparer's	** In the content of	ete. Declaration of preparer (other than offic	er) is based o	2011-08-04 Date Check if se	ation o	of which preparer has any
Under knowle knowle Sign Here	penaltedge a edge.	**** Signa david Type Print/Typ preparer's	** m chao director/president or print name and title e s name	ete. Declaration of preparer (other than office	er) is based o	2011-08-04 Date Check if se	ation o	of which preparer has any

May the IRS discuss this return with the preparer shown above? (see instructions)

Par		ent of Program Service A	Accomplishments to any question in this Part III		
1 SEE	Briefly describe SCHEDULE O	the organization's mission			
2	the prior Form 99	90 or 990-EZ?	rogram services during the year v		┌ Yes ┌ No
3	Did the organizat	e these new services on Schedi tion cease conducting, or make ••••••••••••••••••••••••••••••••••••	significant changes in how it con	ducts, any program	┌ Yes ┌ No
4	Describe the exe Section 501(c)(3	3) and 501(c)(4) organizations	each of the organization's three la and section 4947(a)(1) trusts ar venue, if any, for each program s	e required to report the amo	
4a	(Code SIMR'S ACCOMPLIS) (Expenses \$ 6 SHMENTS ARE DESCRIBED AT THE END	5,491,638 including grants of \$ OF SCHEDULE O	1,372,750) (Revenue \$)
4b	(Code) (Expenses \$	ıncludıng grants of \$) (Revenue \$)
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4d		services (Describe in Schedule	·		
4e	(Expenses \$		grants of \$ 5,491,638) (Revenue \$)

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 (see instruction)? 🕏	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		Νο
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		Νo
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? 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 quasiendowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
С	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.	11c		Νο
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	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
b	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? <i>If</i> " <i>Yes,"</i> complete Schedule F, Parts I and IV	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, Parts II and IV	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, Parts III and IV.	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 (see instructions)	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? <i>If</i> "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
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20ь		

Par	t 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? If "Yes," complete Schedule I, Parts I and II	21		No
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? If "Yes," complete Schedule I, Parts I and III	22	Yes	
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? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b-24d and complete Schedule K. If "No," go to line 25	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? If "Yes," complete Schedule L, Part 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? If "Yes," complete Schedule L, Part I	25b		Νο
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? If "Yes," complete Schedule L, Part II	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? If "Yes," complete Schedule L, Part III	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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	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? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	Yes	
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 \Box Yes \Box No			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	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? If "Yes," complete Schedule R, Part VI	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

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 25			
ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
	1b 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements filed for the calendar year ending with or within the year covered by this return			
ь	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 (see instructions)	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year?	3a		N
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	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		N
Ь	If "Yes," enter the name of the foreign country 🕨			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			N
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5b		
_	The rest to line 54 of 55, and the organization meronin 5555 in the rest in th	5с		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		N
ь	organization solicit any contributions that were not tax deductible?			
_	were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	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		N
Ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
5	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		N
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
f	contract?	7e 7f		N
	If the organization, during the year, pay premiums, unectly of multiectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			IN
9	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did	7		
	the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		
_	Sponsoring organizations maintaining donor advised funds.	9a		
	Did the organization make any taxable distributions under section 4966?	9a 9b		
	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club]		
	facilities 5			
_	Section 501(c)(12) organizations. Enter Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			
а	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year 12b	·		
a	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?			
a	Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand	1		
	13c	ļ [']		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N ·
-	If "Vac " had it filed a Form 720 to report these nayments? If "No " provide an explanation in Schodule O	1/16		

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.

Chack if Schadula O	contains a response to an	y question in this Part VI									J
Check if Schedule O	contains a response to an	y question in this Fait vi	-	-	•	•	-	•	•		. *

_Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent			
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	Yes	
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		Νο
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Does the organization have members or stockholders?	6		Νo
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the			
	year by the following			
а	The governing body?	8a	Yes	
Ь	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		Νο
	ection B. Policies (This Section B requests information about policies not required by the Internal			
<u>Re</u>	evenue 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		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this 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	
С	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?			
а	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 15a or 15b, describe the process in Schedule O (See instructions)			
	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		Νο
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		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed►MA			
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			

Own website Another's website Vpon request

- 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 🕨 J SCOTT PETTET 1000 E 50TH STREET

kansas city, MO 64110 (816) 926-4000

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organiza	tion nor any rela	ated org	janiza	ation	cor	npens	ated	any current office	r, dırector, or trust	ee
(A) Name and Title	(B) Average hours		tion that a			II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
(1) JAMES ESTOWERS JR Director	2 0	х						0	0	0
(2) VIRGINIA G STOWERS DIRECTOR	2 0	х						0	0	0
(3) DAVID AWELTE DIRECTOR/SECRETARY See Sch O	2 0	х		х				0	916,036	50,427
(4) RODERICK L STURGEON DIRECTOR - SEE SCHEDULE O	40 0	х						0	1,101,744	47,410
(5) WILLIAM B NEAVES - SEE SCH O DIRECTOR/PRESIDENT EMERITUS	40 0	х		х				701,921	0	47,158
(6) DAVID M CHAO DIRECTOR/PRESIDENT/CEO - Sch O	40 0	х		х				968,238	0	38,170
(7) RICHARD W BROWN Director/CHAIR - see sch o	2 0	х		х				0	1,645,887	47,410
(8) ROBERT E KRUMLAUF - SEE SCH O SCIENTIFIC DIRECTOR	40 0				Х			438,572	0	50,679
(9) RONALD C CONAWAY INVESTIGATOR	40 0					Х		240,811	0	40,826
(10) JOAN W CONAWAY INVESTIGATOR	40 0					Х		238,961	0	46,574
(11) JERRY L WORKMAN INVESTIGATOR	40 0					Х		235,814	0	41,896
(12) R SCOTT HAWLEY INVESTIGATOR	40 0					Х		241,854	0	49,012
(13) RONG LI INVESTIGATOR	40 0					х		226,035	0	48,695

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

	(A) Name and Title	(B) Average hours per		tion (che				(D) Reportat compensa from th	tıon	(E) Reportable compensation from related	- 1	(F) Estima mount o	ated fother
		week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organizatioi 2/1099-M	n (W-	organizations (W- 2/1099- MISC)	o	from from from from from from from from	the on and ed
												_		
												+		
1b	Sub-Total				•	•	<u></u>	-						
c d	Total from continuation sheets Total (add lines 1b and 1c) .							>	3 29	2,206	3,663,667	7		508,257
2	Total number of individuals (inc \$100,000 in reportable comper	luding but not lin	nited to	thos	e lıs	ted			<u> </u>	•				
													Yes	No
3	Did the organization list any for on line 1a? <i>If</i> "Yes," complete Sc				e, k	еу е •	mploy •	ee, o	or highest cor	mpensa •	ated employee	3		Νο
4	For any individual listed on line organization and related organiz											4	V	
5	Did any person listed on line 1a services rendered to the organi									ation o	r individual for	5	Yes	N o
			•					•			L			NO
	ection B. Independent Cor													
1	Complete this table for your five \$100,000 of compensation from			naep	enae	ent c	ontrac	tors	tnat receive	a more				
	Na	(A) me and business add	dress							Descr	(B) iption of services		(C Comper	
				· · ·								- $+$		
												_		

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 ▶0

		2010)					Pa	age 9
art \	/++	Statement of Revenu	ie		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenu exclude from tax under section
								512, 513, or 514
2 42	1a	Federated campaigns	1a					514
and other similar amounts	b	Membership dues	. 1b					
"€	c	Fundraising events	. 1c					
<u>,</u> ह	d	Related organizations	. 1d	198,091				
Ē	e	Government grants (contributions)	1 e	6,568,930				
9 19	f	All other contributions, gifts, grants,	and 1f	1,298,463		 		
ŧ	-	similar amounts not included above	- -					
ž	g	Noncash contributions included in lir	nes 1a-1f \$	62,027				
ल	h	Total. Add lines 1a-1f	· · · · · · · · · · · · · · · · · · ·		8,065,484			
e E				Business Code				
Program Service Havenue	2a L	COLLABORATION FEE FROM HHMI, 5	01(C)(3)	900099	73,404	73,404		
	b							
<u>دُ</u>	C							
Ş	d							
9	e	All other program carings row						
\$	•	All other program service rev	enue					
ī.	g	Total. Add lines 2a-2f	<u> </u>		73,404			
	3	Investment income (including	- -		4 670 077			4 670 6
	_	and other similar amounts)			1,670,077			1,670,0
	4	Income from investment of tax-exe		-	0			
	5	Royalties	(ı) Real	(II) Personal				
	6a	Gross Rents	3,529,477	(II) I ersonar				
	b	Less rental	241,909					
	c	expenses Rental income	3,287,568					
	٦	or (loss) Net rental income or (loss)	b		3,287,568		0	3,287,5
		Net rental income of (1033)	(ı) Securities	(II) O ther	5,25,,555			,,,,,,
	7a	Gross amount from sales of assets other	81,084,387	171,808				
	b	than inventory Less cost or other basis and sales expenses	79,798,438	253,393				
	c	Gain or (loss)	1,285,949	-81,585				
	d	Net gain or (loss)			1,204,364			1,204,3
	8a	Gross income from fundraisin (not including \$	ng events					
		of contributions reported on l						
		See Part IV, line 18	а					
	ь	Less direct expenses	. Ь					
		Net income or (loss) from fun			0			
	9a	Gross income from gaming ac	ctivities See Part IV , line 19 . a					
		Less direct expenses		b				
		Net income or (loss) from gai			0			
	10a	Gross sales of inventory, less returns and allowances	s a					
		Less cost of goods sold . Net income or (loss) from sal	. b		0			
		Miscellaneous Revenue		Business Code				
	11a	MO QUALITY JOBS REBATE		900099	54,996			54,9
		OTHER REBATES & REVENU		900099	48,638			48,6
	c							
	d	All other revenue	.					
	е	Total. Add lines 11a-11d .			103,634			
			•	[103,034			
	12	Total revenue. See Instruction	ons		14 404 531	72.404	۱ ,	6 265 6

IX Statement of Functional Expenses				
Section $501(c)(3)$ and $501(c)(4)$ organizations must complete solumn (A) but are not required to so			(D)	
ot include amounts reported on lines 6b,	(A)	(B) Program service	(C) Management and	(D) Fundraising
· ·	токат ехрепзез	expenses	general expenses	expenses
Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	0			
Grants and other assistance to individuals in the U.S. See Part IV, line 22	1,372,750	1,372,750		
Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0			
Benefits paid to or for members	0			
Compensation of current officers, directors, trustees, and key employees	2,108,731	1,897,858	210,873	
Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
Other salaries and wages	17,524,787	15,772,308	1,752,479	
Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	2,521,621	2,269,459	252,162	
Other employee benefits	2,895,379	2,605,841	289,538	
Payroll taxes	1,250,858	1,125,772	125,086	
Fees for services (non-employees)	0			
-	67,048		67,048	
Accounting	10,200		10,200	
Lobbying	0			
	0			
	0			
· ·	1.230.591	1.107.532	123.059	
Advertising and promotion			,	
	253,218	227,896	25,322	
·			 	
<u> </u>	· · · · · · · · · · · · · · · · · · ·			
	· · · · · · · · · · · · · · · · · · ·	-	 	
Payments of travel or entertainment expenses for any federal,	0		,,,,,,	
	738,627	664,764	73,863	
	0	,	·	
	0			
	14,255,082	12,829,574	1,425,508	
Insurance	0			
Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
COST-SHARING WITH RELATED ORG	17,808,356	16,027,520	1,780,836	
LAB SUPPLIES	6,401,805	5,761,625	640,180	
NON-CAPITAL EQUIPMENT	674,078	606,670	67,408	
SCIENTIFIC CONSULTING	225,771	203,194	22,577	
COLLABORATION EXPENSE	135,829	122,246	13,583	
All other expenses	217,849	196,064	21,785	
Total functional expenses. Add lines 1 through 24f	72,693,197		7,201,559	0
Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation			,	
	Il other organizations must complete column (A) but are not required to continuous de amounts reported on lines 6b, 20, 9b, and 10b of Part VIII. Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees. Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Other salaries and wages Pension plan contributions (include section 401(k) and section 403(b) employer contributions). Other employee benefits. Payroll taxes. Fees for services (non-employees) Management. Legal. Accounting. Lobbying. Professional fundraising services See Part IV, line 17 Investment management fees. Other. Advertising and promotion. Office expenses. Information technology. Royalties. Occupancy. Travel. Payments to affiliates. Depreciation, depletion, and amortization. Insurance. Other expenses Itemize expenses not covered above (List misscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O) COST-SHARING WITH RELATED ORG LAB SUPPLIES NON-CAPITAL EQUIPMENT SCIENTIFIC CONSULTING COLLABORATION EXPENSE All other expenses. Total functional expenses. Ad d lines 1 through 24f Joint costs. Check here b if following SO P98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a	the functioned amounts reported on lines 6by, 2by, and 10b of Part VIII. Grants and other assistance to governments and organizations in the U S See Part IV, line 21 Grants and other assistance to individuals in the U S See Part IV, line 21 Grants and other assistance to individuals in the U S See Part IV, line 21 Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16 Benefits paid to or for members Gompensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees (as defined under section 4958(f)(1)) and persons (as defined under section 4958(c)(3)(6) Cother salaries and wages Pension plan contributions (include section 401(k) and section 403(b) employer contributions) Cother employee benefits Gompensation of current to ficers, directors, trustees, and key employees Pension plan contributions (include section 401(k) and section 403(b) employer contributions) Cother employee benefits Gompensation of current to ficers, directors, trustees, and the section 403(b) employer contributions (include section 401(k) and section 403(b) employer contributions) Cother employee benefits Gompensation of current to ficers, directors, trustees, and the section 403(b) employer contributions (include section 401(k) and section 403(b) employer contributions) Cother employee benefits Gompensation of current forces, directors, trustees, and the section 403(b) employer contributions (include section 401(k) and section 403(b) employer contributions) Cother employee benefits Gompensation of current forces, directors, trustees, and trustees,	In the roganizations must complete column (A) but are not required to complete column (B), (C), and (B) (S), (C), and (B) (D), (D), and (B) of Part VIII. Grants and other assistance to governments and organizations in the U S See Part IV, line 22 Grants and other assistance to individuals in the U S See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, line 24 Fart IV, line 25 and 16 G G G G G G G G G	Note the organizations must complete column (A) but are not required to complete columns (B), (C), and (D), and (D) and flood Part VIII. Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to governments, organizations and an expense of the part of the

Part X Balance Sheet (A) (B) Beginning of year End of year 3.699.012 2.178.335 1 Cash—non-interest-bearing 2 2 Savings and temporary cash investments 720,639 3 804,237 3 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 Schedule L 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 4ssets 6 7 8 398,012 8 349,600 Prepaid expenses and deferred charges 553,403 631,357 10a Land, buildings, and equipment cost or other basis Complete 309, 180, 895 10a Part VI of Schedule D 10Ь 119.912.525 ь Less accumulated depreciation 202,127,907 10c 189.268.370 136, 133, 751 91.175.334 11 11 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 222,146,556 15 212,236,512 15 16 565,779,280 16 496.643.745 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 7,131,445 17 6.316.670 17 Accounts payable and accrued expenses . 18 18 19 19 20 20 Liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties 25 220.373.182 25 211,148,145 Other liabilities Complete Part X of Schedule D 26 227,504,627 26 217,464,815 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 Unrestricted net assets 338,274,653 27 279,178,930 Temporarily restricted net assets 28 28 Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here 🕨 🥅 and complete lines 30 through 34. 5 30 30 Capital stock or trust principal, or current funds Assets 31 Paid-in or capital surplus, or land, building or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 338,274,653 33 279,178,930 33 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 565,779,280 496,643,745

Pal	Check if Schedule O contains a response to any question in this Part XI			. [
1	Total revenue (must equal Part VIII, column (A), line 12)	1		14,4	104,531
2	Total expenses (must equal Part IX, column (A), line 25)	2			93,197
3	Revenue less expenses Subtract line 2 from line 1	3		- 58,2	288,666
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		338,2	274,653
5	Other changes in net assets or fund balances (explain in Schedule O)	5		- 8	307,057
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		279,1	.78,930
Par	Tt XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII			୮	
1	Accounting method used to prepare the Form 990 Cash Accrual Other			Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of 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		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were in on a separate basis, consolidated basis, or both	ssued			
	☐ Separate basis ☐ 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 th Single Audit Act and OMB Circular A-133?	e	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the raudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b	Yes	

OMB No 1545-0047

Public Charity Status and Public Support

(Form 990 or 990EZ)

Department of the Treasury

Internal Revenue Service

h

SCHEDULE A

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.

Inspection

Name of the organization Stowers Institute for Medical Research **Employer identification number**

20-2993509 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 described in 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). 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 SEE ABOVE SEE ABOVE, MO 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) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% 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 331/3% 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) An organization organized and operated exclusively to test for public safety Seesection 509(a)(4). 10 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 ГТуре I **b** Type II Type III - Other 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) 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 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) Yes No 11g(i) and (III) below, the governing body of the the supported organization? (ii) a family member of a person described in (i) above? 11g(ii) (iii) a 35% controlled entity of a person described in (i) or (ii) above? 11g(iii)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is th organizat col (i) lis your gove docume	e lon in ted in erning	(v) Did you not organizat col (i) of suppor	ion in your	(vi) Is the organizat col (i) org	e Ion In anized	(vii) A mount of support
		instructions))	Yes	No	Yes	No	Yes	No	
Total									

Provide the following information about the supported organization(s)

Part II Support Schedule for Organizations Described in Sections 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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

	dider rate III. If the	organización i	ans to quanty t	maci the tests	iisted below, pic	case complet	c raic III.
S	ection A. Public Support		_				
Cale	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	ınclude any "unusual						
	grants ")						
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						
	Total. Add lines 1 through 3						
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)						
6	Public Support. Subtract line 5 from						
Ü	line 4						
S	ection B. Total Support	1				I	
	endar year (or fiscal year beginning						
Cur	in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	A mounts from line 4						
8	Gross income from interest,						
0	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
-	business activities, whether or						
	not the business is regularly						
	carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support (Add lines 7						
	through 10)						
12	Gross receipts from related activities	es, etc (See inst	ructions)			12	
13	First Five Years If the Form 990 is f	or the organization	on's first, second	, third, fourth, or	fifth tax year as a	501(c)(3) orga	nızatıon,
	check this box and stop here	_	r		•	. , . , -	▶ ┌॔
S	ection C. Computation of Pub	lic Support P	ercentage				
14	Public Support Percentage for 2010	(lıne 6 column (f) divided by line	11 column (f))		14	
15	Public Support Percentage for 2009	Schedule A Par	rt II line 14			15	
							
16a	33 1/3% support test—2010. If the				line 14 is 33 1/3%	or more, chec	
	and stop here. The organization qua	•				2.2.4.204	▶ [
b	33 1/3% support test—2009. If the				oa, and line 15 is :	1/3% or mor	. -
17-	box and stop here. The organization				12 16 1C	handler - 4.4	▶
r/a	10%-facts-and-circumstances test-						ın.
	is 10% or more, and if the organization made			•			
	in Part IV how the organization mee	is the facts and	circumstances"	test ine organiz	acion quanifies as	a publicly supp	orted F
L	organization 10%-facts-and-circumstances test-	_2000 Ifthe era	anization did not	chack a hay an lu	no 13 165 166 5	or 17a and line	F1
ט	15 is 10% or more, and if the organ						
	Explain in Part IV how the organizat			•		<u>-</u>	clv
	supported organization	aon meets the 16	aces and circuitis	tances test life	. organization qual	iiiies as a publi	ETY ▶ ¯
18	Private Foundation If the organizati	on did not check	a box on line 13	. 16a. 16b. 17a o	r 17b. check this	box and see	- 1
	instructions	a.a not eneck		, , 0 0 , 7 0 0	. 2. 2, 511558 61115		▶ □

Schedule A (Form 990 or 990-EZ) 2010 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total ın) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified **b** A mounts 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 c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning **(e)** 2010 (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (f) Total ın) 9 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b c Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage

15	Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15	
16 Public support percentage from 2009 Schedule A, Part III, line 15		16	
S	ection D. Computation of Investment Income Percentage		
17	Investment income percentage for 2010 (line 10c column (f) divided by line 13 column (f))	17	
18	Investment income percentage from 2009 Schedule A , Part III, line 17	18	

19a 33 1/3% support tests—2010. 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

33 1/3% support tests—2009. 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

Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Schedule A (Fo	rm 990 or 990-EZ) 2010	Pa
Part IV	Supplemental Information. Supplemental Information. Complete this part to prequired by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also con	•
	additional information. (See instructions).	p.o.o. ao pa

racts	Ana	Circumstances	rest

Explanation

CHILDREN'S MERCY HOSPITAL IN KANSAS CITY, MISSOURI AND THE MASSACHUSETTS GENERAL HOSPITAL IN BOSTON, MASSACHUSETTS

Schedule A (Form 990 or 990-EZ) 2010

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493217000461

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

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.

Open to Public

Hai Nevellue Selvice F- Attacii i	to Form 990. F See separate instructions.		Inspection
ame of the organization owers Institute for Medical Research		Employer identif	cation number
LOWERS INSURATE FOR PREDICTION RESERVED		20-2993509	
	r Advised Funds or Other Similar	Funds or Accoun	ts. Complete if the
organization answered "Yes" to Forn	1 990, Part IV, line 6. (a) Donor advised funds	(b) Funds and	d other accounts
Total number at end of year	(a) Donor advised funds	(b) I ulius aliu	other accounts
Aggregate contributions to (during year)			
Aggregate grants from (during year)			
Aggregate value at end of year			
Did the organization inform all donors and donor funds are the organization's property, subject to	-	lonor advised	□ Yes □ No
Did the organization inform all grantees, donors, used only for charitable purposes and not for the	and donor advisors in writing that grant fur	•	
conferring impermissible private benefit			☐ Yes ☐ No
<u> </u>	ete if the organization answered "Yes	" to Form 990, Part	IV, line 7.
Purpose(s) of conservation easements held by the Preservation of land for public use (e.g., reconstruction). Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a construction.	reation or pleasure)	an historically importa a certified historic str irm of a conservation	•
easement on the last day of the tax year			
Total number of conservation easements		2a Held at t	he End of the Year
Total acreage restricted by conservation easem	ents	2b	
Number of conservation easements on a certified		2c 2c	
Number of conservation easements included in (• •	2d	
Number of conservation easements included in (Number of conservation easements modified, tra			
the taxable year <u>-</u> Number of states where property subject to cons Does the organization have a written policy rega	rding the periodic monitoring, inspection, h		
enforcement of the conservation easements it ho	olds?		Yes No
Staff and volunteer hours devoted to monitoring,	inspecting and enforcing conservation eas	ements during the yea	r ⊩
A mount of expenses incurred in monitoring, insp	ecting, and enforcing conservation easeme	nts during the year ► :	
Does each conservation easement reported on li $170(h)(4)(B)(I)$ and $170(h)(4)(B)(II)$?	ne 2(d) above satisfy the requirements of s	section	┌ Yes ┌ No
In Part XIV, describe how the organization repor balance sheet, and include, if applicable, the tex the organization's accounting for conservation ea	t of the footnote to the organization's financ		
	ctions of Art, Historical Treasure ed "Yes" to Form 990, Part IV, line 8.		r Assets.
If the organization elected, as permitted under S art, historical treasures, or other similar assets provide, in Part XIV, the text of the footnote to it	held for public exhibition, education or rese	arch in furtherance of	
If the organization elected, as permitted under S historical treasures, or other similar assets held provide the following amounts relating to these it	for public exhibition, education, or researc		· ·
(i) Revenues included in Form 990, Part VIII, li	ne 1	► \$	
(ii) Assets included in Form 990, Part X		► \$_	
If the organization received or held works of art, following amounts required to be reported under			
Revenues included in Form 990, Part VIII, line 3	L	► \$	
, , , , , , , , ,			

b Assets included in Form 990, Part X

3	Using the organization's accession and other										ontinuea)
_	items (check all that apply)		.,		-		-				
а	Public exhibition		d	Γ	Loan	orex	change progi	rams			
b	Scholarly research		e	\vdash	Othe	r					
c	Preservation for future generations										
4	Provide a description of the organization's co Part XIV	ollections and expla	ain ho	w the	y furthe	er the	organizatior	ı's ex	empt purpose i	n	
5	During the year, did the organization solicit o	or receive donation	sofar	rt, hıs	torical	treas	ures or othe	rsım		_	_
	assets to be sold to raise funds rather than t									Yes	No
Par	Part IV, line 9, or reported an an						on answere	d "Y	es" to Form 9	90,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					utions	or other ass	ets		Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follov	ving t	able		Г		An	nount	
c	Beginning balance						_	1c			-
d	Additions during the year						F	1d			
e	Distributions during the year						F	1e			
f	Ending balance							1f			
2a	Did the organization include an amount on Fo	orm 990. Part X. lır	ne 21?	,			L			Yes	
	If "Yes," explain the arrangement in Part XIV										,
	rt V Endowment Funds. Complete		n ans	swer	ed "Ye	s" to	Form 990.	Par	t IV. line 10.		
		(a)Current Year) Prior			wo Years Back		Three Years Back	(e)Four \	'ears Back
1a	Beginning of year balance										
b	Contributions										
c	Investment earnings or losses										
d	Grants or scholarships										
е	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the yea	r end balance held	as								
а	Board designated or quasi-endowment 🕨										
ь	Permanent endowment 🕨										
c	Term endowment ▶										
3a	Are there endowment funds not in the posses organization by	ssion of the organiz	ation	that	are hel	d and	administere	d for	the	Yes	No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	<u> </u>
	If "Yes" to 3a(II), are the related organization					•		•	3I	<u> </u>	
4	Describe in Part XIV the intended uses of th						2-12/1	10			
Par	t VI Investments—Land, Buildings	s, and Equipme	ent. S							I	
	Description of investment				Cost or s (invest		(b)Cost or ot basis (othe		(c) Accumulated depreciation	(d) Bo	ook value
1a	Land						3,400	,000			3,400,000
b	Buildings		•				223,610	,985	58,984,180	10	54,626,805
c	Leasehold improvements		•								
d	Equipment		•				82,167	,263	60,928,345	5 2	21,238,918
	Other						2	,647			2,647
Tota	l. Add lines 1a-1e <i>(Column (d) should equal Fo</i>	orm 990, Part X, colu	mn (B), line	10(c).)) .			▶	18	89,268,370
		·							Schedule D	Form 9	990) 201

(including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value
(1)Financial derivatives		·
(2)Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	<u> </u>	
Part VIII Investments—Program Related. S		(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	F	
Part IX Other Assets. See Form 990, Part X,		
(a) Desc		(b) Book value
(1) ANNUITY RECEIVABLE		212,147,967
		88,545
(2) OTHER RECEIVABLES		· · · · · · · · · · · · · · · · · · ·
(2) OTHER RECEIVABLES		
Total. (Column (b) should equal Form 990, Part X, col.(B) lir		
Total. (Column (b) should equal Form 990, Part X, col.(B) Irr Part X Other Liabilities. See Form 990, Par	t X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) lir Part X Other Liabilities. See Form 990, Par 1 (a) Description of Liability		
Total. (Column (b) should equal Form 990, Part X, col.(B) lir Part X Other Liabilities. See Form 990, Par 1 (a) Description of Liability Federal Income Taxes	t X, line 25. (b) A mount 0	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of Liability Federal Income Taxes ADVANCES FROM AFFILIATES	t X, line 25. (b) A mount 0 4,803,017	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of Liability Federal Income Taxes ADVANCES FROM AFFILIATES	t X, line 25. (b) A mount 0	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of Liability Federal Income Taxes ADVANCES FROM AFFILIATES	t X, line 25. (b) A mount 0 4,803,017	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of Liability Federal Income Taxes ADVANCES FROM AFFILIATES	t X, line 25. (b) A mount 0 4,803,017	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of Liability Federal Income Taxes ADVANCES FROM AFFILIATES	t X, line 25. (b) A mount 0 4,803,017	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of Liability Federal Income Taxes ADVANCES FROM AFFILIATES	t X, line 25. (b) A mount 0 4,803,017	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of Liability Federal Income Taxes ADVANCES FROM AFFILIATES	t X, line 25. (b) A mount 0 4,803,017	
Total. (Column (b) should equal Form 990, Part X, col.(B) lin Part X Other Liabilities. See Form 990, Par	t X, line 25. (b) A mount 0 4,803,017	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of Liability Federal Income Taxes ADVANCES FROM AFFILIATES	t X, line 25. (b) A mount 0 4,803,017	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of Liability Federal Income Taxes ADVANCES FROM AFFILIATES	t X, line 25. (b) A mount 0 4,803,017	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of Liability Federal Income Taxes ADVANCES FROM AFFILIATES	t X, line 25. (b) A mount 0 4,803,017	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of Liability Federal Income Taxes ADVANCES FROM AFFILIATES	t X, line 25. (b) A mount 0 4,803,017	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of Liability Federal Income Taxes ADVANCES FROM AFFILIATES	t X, line 25. (b) Amount 0 4,803,017 206,345,128	

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	
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Re	turn
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		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
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	Reconciliation of Expenses per Audited Financial Statements With Expenses	per F	leturn
1	Total expenses and losses per audited financial statements	₁	
2	A mounts included on line 1 but not on Form 990, Part IX, line 25	- -	
a	Donated services and use of facilities		
b	Prior year adjustments	1	
c	Other losses	1	
d	Other (Describe in Part XIV) 2d	1	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV) 4b	1	
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	
Pai	rt XIV Supplemental Information		
Cor	polate this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1, and 4, Pr	art IV li	nes 1 h and 2 h

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

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

Ident if ier	Return Reference	Explanation
SCHEDULE D		PART X, LINE 2 - SUMMARY OF FIN 48 CONSOLIDATED
		FOOTNOTE AS IT APPLIES TO STOWERS INSTITUTE FOR
		MEDICAL RESEARCH - AN INTERPRETATION OF FASB
		STATEMENT NO 109 THIS INTERPRETATION CLARIFIES
		THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES
		RECOGNIZED IN AN ENTERPRISE'S FINANCIAL
		STATEMENTS IN ACCORDANCE WITH FASB STATEMENT
		NO 109, ACCOUNTING FOR INCOME TAXES THIS
		INTERPRETATION ALSO PRESCRIBES A RECOGNITION
		THRESHOLD AND MEASUREMENT ATTRIBUTE FOR THE
		FINANCIAL STATEMENT RECOGNITION AND
		MEASUREMENT OF A TAX POSITION TAKEN OR EXPECTED
		TO BE TAKEN IN A TAX RETURN STOWERS INSTITUTE FOR
		MEDICAL RESEARCH IS A TAX-EXEMPT ENTITY AS
		DESCRIBED IN SECTION 501 (c)(3) OF THE CODE
		THEREFORE, IT IS STOWERS INSTITUTE FOR MEDICAL
		RESEARCH'S TAX POSITION THAT THEY ARE EXEMPT
		FROM FEDERAL INCOME TAXES STOWERS INSTITUTE FOR
		MEDICAL RESEARCH ADOPTED FIN 48 EFFECTIVE
		JANUARY 1, 2007 WITH NO IMPACT TO ITS FINANCIAL
		STATEMENTS

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Schedule I

(Form 990)

Department of the Treasury

Internal Revenue Service

DLN: 93493217000461 OMB No 1545-0047

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. ► Attach to Form 990

Inspect ion

Name of the organization						Employer identificati	on number
Stowers Institute for Medical Researc	:h					20-2993509	
Part I General Information	n on Grants and	d Assistance					
 Does the organization maintain the selection criteria used to av Describe in Part IV the organization Part II Grants and Other A Form 990, Part IV, linduplicated if additional 	vard the grants or as ation's procedures fo ssistance to Go e 21 for any recip	sistance?or monitoring the use o vernments and O vient that received in	f grant funds in the Unite rganizations in the nore than \$5,000. Che		nplete if the orgai	nızatıon answered "Yed more than \$5,000	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
2 Enter total number of section 5						· · · · · <u></u>	
3 Enter total number of other orga	imzations		<u> </u>			<u> </u>	

	•	•
Part III	G	ants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 2
	Us	e Schedule I-1 (Form 990) ıf addıtıonal space ıs needed.

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) STIPENDS/FELLO WSHIPS	72	1,372,750		N/A	N/A

Part IV	Supplemental Information	 Complete this part to 	provide the information rec	<u>quired in Part I, line 2</u>	e, and any	other additional information.
•						

Ident if ier	Return Reference	Explanation
SCHEDULE I	PART I, LINE 2	SIMR PROVIDES TRAINING STIPEND/FELLOWSHIPS TO UNDERGRADUATES, GRADUATES, AND POST-DOCTORAL
		CANDIDATES THESE STIPENDS/FELLOWSHIPS ARE PROVIDED FOR THE INDIVIDUAL'S TRAINING AND NOT AS
		COMPENSATION FOR ANY SERVICES PROVIDED BY THEM TO SIMR STIPENDS/FELLOWSHIPS ARE OFFERED ON A
		NON-DISCRIMINATORY BASIS TO INDIVIDUALS STUDYING A BASIC BIOMEDICAL FIELD WITH THE OBJECTIVE OF
		CONTINUING IN THIS FIELD UPON THE COMPLETION OF THEIR EDUCATION AND TRAINING

DLN: 93493217000461

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Stowers Institute for Medical Research

Compensation Information

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.

Open to Public Inspection

			20-2993509			
Pa	rt I Questions Regarding Compensation					
					Yes	Νo
1a	Check the appropriate box(es) if the organization provi 990, Part VII, Section A, line 1a Complete Part III to					
	First-class or charter travel	\sqcap	Housing allowance or residence for personal use			
	Travel for companions		Payments for business use of personal residence			
	▼ Tax idemnification and gross-up payments	굣	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organishment or provision of all the expenses described.			1b	Yes	
2	Did the organization require substantiation prior to rei officers, directors, trustees, and the CEO/Executive D			2	Yes	
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all that Compensation committee Independent compensation consultant Form 990 of other organizations	t appl				
4	·	art VII	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control pa	aymer	nt from the organization or a related organization?	4a		No
ь	Participate in, or receive payment from, a supplementa		•	4b		Νο
c	Participate in, or receive payment from, an equity-bas			4c		No
	If "Yes" to any of lines 4a-c, list the persons and prov					100
5	Only 501(c)(3) and 501(c)(4) organizations only must For persons listed in form 990, Part VII, Section A, lin compensation contingent on the revenues of	_				
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, line compensation contingent on the net earnings of	ne 1a,	, did the organization pay or accrue any			
а	The organization?			6a		No
ь	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, li payments not described in lines 5 and 6? If "Yes," des			7		No
8	Were any amounts reported in Form 990, Part VII, pai subject to the initial contract exception described in R in Part III	ıd or a	accured pursuant to a contract that was			
				8		Νo
9	If "Yes" to line 8, did the organization also follow the r section 53 4958-6(c)?	ebutt	able presumption procedure described in Regulations	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is 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-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	incentive reportable		benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(1) DAVID AWELTE	(I) (II)	0 896,605	0	0 19,431		0 13,677	966,463	
(2) RODERICK L STURGEON	(I) (II)	0 1,059,859	0 0	0 41,885	0 36,750	0 10,660	0 1,149,154	
(3) WILLIAM B NEAVES - SEE SCH O	(I) (II)	676,394 0	0	25,527 0	36,750 0	10,408	749,079 0	
(4) DAVID M CHAO	(ı) (ıı)	965,898 0	0	2,340 0	36,750 0	1,420 0	1,006,408	
(5) ROBERT E KRUMLAUF - SEE SCH O	(ı) (ıı)	435,008 0	0	3,564 0	36,750 0	13,929 0	489,251 0	
(6) RONALD C CONAWAY	(I) (II)	239,625 0	0 0	1,186 0	I	4,882 0	281,637 0	
(7) JOAN W CONAWAY	(I) (II)	237,775 0	0 0	1,186 0	35,944 0	10,630 0	285,535 0	
(8) JERRY L WORKMAN	(ı) (ıı)	234,653 0	0 0	1,161 0	35,273 0	6,623 0	277,710 0	
(9) R SCOTT HAWLEY	(ı) (ıı)	239,694 0	0 0	2,160 0	35,129 0	13,883 0	290,866	
(10) RONG LI	(I) (II)	225,573 0	0	462 0	34,859 0	13,836 0	274,730 0	
(11) RICHARD W BROWN	(I) (II)	0 1,621,863	0 0	0 24,024	0 36,750	0 10,660	0 1,693,297	
(12)								
(13)								
(14)								
(15)								
(16)								

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

Ident if ier	Ret urn Ref erence	Explanation
Schedule J		PART I, LINE 1A SIMR HAS WRITTEN EMPLOYMENT CONTRACTS WITH WILLIAM B NEAVES, President Emeritus, AND DAVID M CHAO, PRESIDENT, WHICH PROVIDES FOR TAXABLE TERM LIFE BENEFITS AND FOR THE EXECUTIVES TO RECEIVE TAX GROSS-UP PAYMENTS SUFFICIENT TO COVER THE TAXES ON THE BENEFITS PART I, LINE 1B SIMR PROVIDED THE BENEFITS DESCRIBED IN RESPONSE TO LINE 1A PURSUANT TO WRITTEN EMPLOYMENT CONTRACTS THAT WERE APPROVED BY SIMR'S GOVERNING BOARD, SEE RESPONSE TO FORM 990, PART VI, SECTION B,LINE 15, FOR ADDITIONAL PROCESSES RELATED TO DETERMINING EXECUTIVE COMPENSATION

Schedule J (Form 990) 2010

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493217000461

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b. ▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions. OMB No 1545-0047

Open to Public Inspection

Name of the organization Stowers Institute for Medical Research							E	mployer i	dent if ica	tion numbe	г	
Slowers Institute for Medical Research							2	0-29935	09			
Part I Excess Benefit Trai	nsacti	ions (s	ection 501	(c)(3) a	and section 501	(c)(4)						
Complete ıf the organızat										ine 40b		
1 (a) Name of disq	ualıfıed	person			(b) Desc	rintion	oftrans	action		(c) Co	rrected?	
• (-,					(b) Desc	TIPLION	OI CIGIIS	action		Yes	No	
											+	
											+	
2 Enter the amount of tax impos		he orgai		-			-	•	r			
section 4958									• \$ —			
3 Enter the amount of tax, If any	, on line	e 2, abo	ve, reimburs	ed by th	e organization .			•	• \$			
Part II Loans to and/or I	From	Intere	sted Pers	sons								
Complete if the organiz), Part IV, line 26	, or For	m 990-	EZ, Part V	', line 38	a		
		oan to						(f)				
(a) Name of interested person and		om the				(e)		Approved		(g)Writte		
purpose		zation?	principal		(d)Balance due	defa	ult?	by board or committee?		agreemen	ıt?	
	To	From	-			Yes	No	 		Yes	No	
	 	110111				163	+ 140	103	140	163	110	
	 						+					
	\dagger											
	 											
	<u> </u>											
Total		· .		▶ \$	•							
Part IIII Grants or Assistar	ice Be	enefitt	ing Inter	ested I	Persons.	•		I		I		
Complete If the orga						/, line	27.					
(a) Name of interested pers	on	(b) Relationsh	nıp betwe	een interested per	rson	(c) A r	nount of a	rant or tu	/pe of assist	tance	
(a) Nume of interested pers			an	nd the or	ganızatıon		(0)///	illounit or g	Tant or ty	, pe oi assis		

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
	organization			Yes	No
(1) AMERICAN CENTURY COMPANIES INC	SEE PART V		SEE PART V		Νο
(2) JULIA ZEITLINGER PhD	SEE PART V	104,768	EMPLOYEE OF SIMR		Νο
(3) LEANNE WIEDEMANN PhD	SEE PART V	177,720	EMPLOYEE OF SIMR		Νο
-					

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Ident if ier	Return Reference	Explanation
SCHEDULE L, PART IV	Line 1, 2 & 3	PART IV, LINE (1) CURRENT DIRECTORS AND OFFICERS OF SIMR, RICHARD W BROWN AND DAVID A WELTE AND ALSO CURRENT DIRECTORS RODERICK L STURGEON AND JAMES E STOWERS JR ARE DIRECTORS OF AMERICAN CENTURY COMPANIES, INC ("ACCI") JAMES E STOWERS JR IS THE FOUNDER OF ACCI AND ALONG WITH OTHER FAMILY MEMBERS RETAINS A CONTROLLING VOTING INTEREST IN ACCI SIMR RECEIVES INVESTMENT MANAGEMENT SERVICES FROM AMERICAN CENTURY INVESTMENTS ("ACI") SIMR PAYS THE SAME ADMINISTRATIVE FEES FOR THESE SERVICES AS ANY ARMS-LENGTH MUTUAL FUND INVESTOR THE VALUE OF THESE SERVICES, ESTIMATED BY MULTIPLYING SIMR'S AVERAGE AMOUNT OF MUTAL FUND HOLDINGS THROUGHOUT THE YEAR BY THE PUBLISHED ADMINISTRATIVE FEE PERCENTAGE FOR THE APPLICABLE FUNDS, WAS APPROXIMATELY \$650,000 IN SELECTING ACI TO MANAGE ITS LIQUID INVESTMENTS, SIMR SELECTED A HIGH QUALITY MUTUAL FUND COMPANY WITH AN OUTSTANDING TRACK RECORD SCHEDULE L, PART IV, LINE (2) JULIA ZEITLINGER, Ph D, IS THE SPOUSE OF DAVID M CHAO, PRESIDENT OF SIMR MS ZEITLINGER'S PREVIOUS EMPLOYMENT BEFORE SIMR MS ZEITLINGER'S PREVIOUS EMPLOYMENT SERVENT SERVENT SE
		Schedule L (Form 990 or 990-EZ) 2010

DLN: 93493217000461

OMB No 1545-0047

NonCash Contributions

Department of the Treasury Internal Revenue Service

SCHEDULE M

(Form 990)

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

Inspection

Name of the organization Stowers Institute for Medical Research

Employer identification number

					20-2993509			
Pa	rt I Types of Property	_						
		(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	(d Method of determining of amounts		ontribut	ion
1	Art—Works of art							
2	Art—Historical treasures							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household							
good	is							
6	Cars and other vehicles .							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded	Х	2	62,027	FAIR MARKET VAL	.UE		
10	Securities—Closely held stock							
11	Securities—Partnership, LLC, or trust interests .							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts .							
25	O ther ► ()							
26	O ther ►()							
27	O ther ►()							
28	O ther ► ()							
29	Number of Forms 8283 received befor which the organization complete				29		1 1	
30a	During the year, did the organizati						Yes	No
	must hold for at least three years			•	d to be used			
	for exempt purposes for the entire	holding p	eriod?			30a		No
	If "Yes," describe the arrangemen							
31	Does the organization have a gift	acceptano	e policy that requires the r	review of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or use	third parti	es or related organizations	to solicit, process, or sell	non-cash			

b If "Yes," describe in Part II

describe in Part II

33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked,

32a

Νo

Page 2

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier Return Reference Explanation

Schedule M (Form 990) 2010

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493217000461

OMB No 1545-0047

2010

Open to Public Inspection

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization Stowers Institute for Medical Research Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990 or 990-EZ.

Supplemental Information to Form 990 or 990-EZ

Employer identification number

20-2993509

ldentifier	Return Reference	Explanation
SUPPLEMENTAL INFORMATION		FORM 990, PART III, LINE 1 THE STOWERS INSTITUTE FOR MEDICAL RESEARCH PERFORMS MEDICAL RESEARCH IN THE PUBLIC INTEREST IN CONJUNCTION WITH CHILDRENS MERCY HOSPITAL. IN KANSAS CITY, MISSOURI AND MASSACHUSETTS CENERAL HOSPITAL IN BOSTON, MASSACHUSETTS - BOTH SECTION 501 (C)(3) AND 170(B)(1)(A)(III) HOSPITALS, WITH THE GOAL OF EXPANDING OUR UNDERSTANDING OF FUNDAMENTAL PROCESSES IS IL LYING CELLS AND IMPROVING LIFES QUALITY THROUGH INNOVATIVE APPROACHES TO THE CAUSES, TREATMENT, AND PREVENTION OF DISEASE FORM 990, PART III, LINE 4 SMR'S ACCOMPILISHMENTS ARE DESCRIBED AT THE END OF SCHEDULE OF FORM 990, PART III, LINE 4 SMR'S ACCOMPILISHMENTS ARE DESCRIBED AT THE END OF SCHEDULE OF FORM 990, PART III, LINE 4 SMR'S ACCOMPILISHMENTS ARE DESCRIBED AT THE END OF SCHEDULE OF FORM 990, PART III, LINE 4 SMR'S ACCOMPILISHMENTS ARE DESCRIBED AT THE END OF SCHEDULE OF FORM 990, PART III, LINE 4 SMR'S ACCOMPILISHMENTS ARE DESCRIBED AT THE END OF SCHEDULE OF FORM 990, PART III, LINE 4 DRECTORS OF SMR, HAVE A BUSINESS RELATIONSHIP, THEY ALL SERVE ON THE BOARD OF AMERICAN CENTURY COMPANIES, INC. AS DESCRIBED IN RESPONSES TO SCHEDULE, PART IV, JAMES E STOWERS JR, RICHARD W. BROWN, WILLIAM B. NEAVES, DAVID M. CHAO, AND RODERCK I. STURGEON, DIRECTORS OF SMR, HAVE A BUSINESS RELATIONSHIP, THEY ALL SERVE ON THE BOARD OF BIOMED VALLEY DISCOVERIES, INC., A RELATED PARTY AS DISCUSSED ON SCHEDULE R. FORM 990, WAS COMPILED BY SIMPS ACCOUNTING DEPARTMENT AND THEN REVIEWED BY QUIT TAX ATTORNEY AT BRYAN CAVE. LIC KPMG, OUR EXTERNAL TAX PREPARERS, USE THIS INFORMATION TO REPARE THE FORM 990 THE COMPLETED DATA AND INFORMATION NECESSARY TO PREPARE SIMPS FORM 990 WAS COMPILED BY SIMPS ACCOUNTING DEPARTMENT AND THEN REVIEWED BY QUIT TAX ATTORNEY AT THE PREPARATION. THE REVIEW AND COMMENTS BEFORE THE FORM 990 WAS COMPILED BY SIMPS ACCOUNTING DEPARTMENT AND THEN REVIEWED BY QUIT TAX ATTORNEY AT CAVE LIC KPMG, OUR STEPPANDENCE TO ACCOUNT AND THE PREPARATION. TO ALL SEVEN OFFICERS OF SMR FOR THEIR REVIEW AND COMMENTS BEFORE THE FORM 990 THE FORM 990,

ldentifier	Return Reference	Explanation
Other changes in net assets or fund balances		Actuarial Loss on Annuity \$(634,439) Unrealized Loss on Investments (172,617) Rounding (1) Other changes in net assets or fund balances (807,057) ========

ldentifier	Return Reference	Explanation
FORM 990, PART III, LINE 4		2010 Program Service Accomplishments The Stow ers Institute for Medical Research ("SIMR") is a private, nonprofit medical research organization. SIMR was founded in 1994 by Jim and Virginia Stow ers, two cancer survivors who have dedicated their fortune to supporting basic research in cell and molecular biology that will provide long-term solutions to gene-based diseases. SIMR conducts basic biomedical research in the public interest that will ultimately provide a greater understanding of the genes and proteins that control how cells in our bodies multiply, formitissues, and die. Like a growing number of scientists today, institute scientists are convinced that by studying the basic biology of cells they will discover how genes cause many diseases, including cancer, diabetes, and dementia. Basic research conducted at SIMR should point the way to the development of new preventions, treatments, and cures for genetic diseases. 2010 Notable Research Results in 2010, SIMR research teams made discoveries meriting publication in leading peer review ed scientific journals - 54 papers in all SIMR research teams also published 44 reviews, commentaries, chapters, and two books. Highlights among 2010's published papers include. The Si Lab published results that suggest that ApCPEB acts as a self-sustaining prion-like protein in the nervous system, enabling it to play a role in memory formation (February 5 issue of Cell). The Shilatifard Lab, in collaboration with the Conaway Lab and the Proteomos Center, identified a protein called AFF4 that associates with mutant proteins commonly found in mixed lineage leukema and that may be a key regulator of leukema development (February 12 issue of Molecular Cell). The Mak Lab reported novel defects that result in expansion of lipid droplets in the roundworm Caenorhabditis elegans, contributing to the elucidation of cellular pathways that regulate fat storage (March 9 issue of the Proceedings of the National Academy of Sciences and published online on February 21). The Kulesa Lab and

ldentifier	Return Reference	Explanation
FORM 990, PART III, LINE 4		The Jaspersen Lab, in collaboration with scientists outside the institute, revealed an unexpected relationship between the yeast protein Mps3, components of the nuclear price complex, and lipids of nuclear membrane (November issue of Genetics and published online on August 16). The Rong Li Lab, in collaboration with the Proteomes Center, Molecular Biology, and Bioinformatics Research, demonstrated how aneuploidy in budding yeast can cause changes in gene expression and confer a growth advantage in certain environmental conditions (November 11 issue of Nature and published online on October 20). The Xie Lab published work showing how the protein Lissencephaly-Irray regulate the self-renew al state of adults term cells. (November 16 issue of the Perceedings of the National Academy of Sciences and published online on November 17. The Gerton Lab, in collaboration with the Workman Lab and the Proteomes Center, uncovered the roles of two proteins, Psh1 and Scm3, in helping to ensure the presence of only one centromers per chromosome. (November 12 issue of Molecular Cell) Comprehensive List of 2010 Crignal Research Papers, Reviews, Commentaries or Chapters, and Books Original Research Papers Ahn Y, Sanderson BW, Klein OD, Krumtauf R Inhibition of Witt signaling by Wise (Sostdet) and negative feedback from Shh controls tooth number and patterning. Development 2010, 137 3221–3231. Blin G, Nury D, Stefanovic S, Neri T, Guillevic O, Brinon B, Bellamy V, Rucker-Martin C, Barbry P, Bel A, Bruneval P, Cowan C, Poully J, Mitaglov S, Gouadon E, Binder P, Hagege A, Desnos M, Renaud JF, Menasche P, Puceat M A purified population of multipotent cardiovascular progenitors derived from primate pluripotent stem cells engrafts in postmy cardial infarcted nonhuman primates J Clin Invest 2010,120 1125-1139. Bost WJ, Li R. The role of nose and positive feedback in the onset of autosomal domanat diseases BMC Syst Biol 2010,4 93 Cai Y, Jin J, Sw anson SK, Cole MD, Chon SH, Florens L, Washburn MP, Conaw ay JW, conaw ay RC Subunti compositi

ldentifier	Return Reference	Explanation
FORM 990, PART III, LINE 4		Krstensen dM, Kannan L, Coleman MK, Wolf YI, Sorokin A, Koonin EV, Mushegian A. A Low-Polynomal Algorithm For Assembling Clusters of Orthologous Croups From Intergenomic Symmetric Best Matches. Bioinformatics. 2010 Kristensen DM, Mushegian AR, Colja VV, Koonin EV. New dimensions of the virus world discovered through metagenomics. Trends Microbiol. 2010;18:11-19. Kulesa PM, Teddy JM, Smith M, Alexander R, Cooper CH, Lansford R, McLennan R. Multispectral fingerprinting for improved in vivo cell dynamics analysis. BMC Dev. Biol. 2010;10:10-10. Kwon SH, Florens L, Swanson SK, Washburn MP, Abmayr SM, Workman JL. Heterochromatin protein 1 (HP1) connects the FACT histone chaperone complex to the phosphorylated CTD of RNIA polymerase. Biol. 2010;10:10-10. Cinnects the FACT histone chaperone complex to the phosphorylated CTD of RNIA polymerase. Biol. 2010;10:10-10. Cinnects the FACT histone chaperone complex to the phosphorylated CTD of RNIA polymerase. Biol. 2010;24:2133-2145. Lang C, Grava S, Finlayson M, Trimble R, Philippsen P, Jaspersen SL. Structural mutants of the spindle pole body cause distinct alteration of cytoplasme microtrubules and nuclear dynamics in multinucleated hyphae of Ashbya gossypii Mol Biol. Cell. 2010;21:18-28. Lin C, Smith ER, Takahashi H, Lai KC, Martin-Brown n S, Florens L, Washburn MP, Conawa y JW. Conawa y RC. Shilatifard A. AFF4, a component of the ELLPh-TEFb elongation complex and a shared subunit of MLL chimeras, can link transcription elongation to leukema. Mol Cell. 2010;37:429-437. Lu S, Coering M, Gard S, Xiong B, MoNairn AJ, Jaspersen SL. Gertin JL. Ecol is important for DNA damegenar in S cerevisiae. Cell Cycle. 2010;9:1-13. Lutes AA, Neaves WB, Baumann DP, Wiegraebe W, Baumann P. Sister chromosome pairing maintains heterozygosky in parthenogenetic lizards. Nature. 2010;484:283-286. Mastushtata-Saka T, White-Grindley E, Samuelson J, Seidel C, Si K. Drosophila Orb2 targets genes involved in neuronal grow th, synapse formation, and protein turnover. Proc Natl Acad Sci USA. 2010;107:1

ldentifier	Return Reference	Explanation
FORM 990, PART III, LINE 4		Takeo S, Haw ley RS, Algaki T Calcineurin and its regulation by Sra/RCAN is required for completion of meiosis in Drosophila Dev Biol. 2010;344:957-967 Warren L, Manos PD, Ahfeldt T, Loh YH, Li H, Lau F, Ebina W, Mandal PK, Smth ZD, Meissner A, Daley GQ, Brack AS, Collins JJ, Cowan C, Schlaeger TM, Rossi DJ. Highly efficient reprogramming to pluripotency and directed differentiation of human cells with synthetic modified mRNA. Cell Stem Cell 2010;7:618-630 Witkin KL, Friederichs JM, Cohen-Fix O, Jaspersen SL. Changes in the Nuclear Envelope Environment Affect Spindle Pole Body Duplication in Saccharomyces cerevisiae. Genetics: 2010;186:867-883. Xia S, Li X, Johnson T, Seidel C, Wallace DP, Li R. Polycystin-dependent fluid flow sensing targets histone deacetylase 5 to prevent the development of renal cysts. Development: 2010;137:1075-1084. Xiong B, Lu S, Gerton JL. Hos1 is a lysine deacetylase for the smc3 subunit of cohesin. Curr Biol. 2010;20:1660-1665. Zeng Y, Li H, Schwieppe NM, Haw ley RS, Gilliland WD. Statistical analysis of nondisjunction assays in Drosophila. Genetics: 2010;186:505-513. Zhang D, O'Neil M F, Cunningham MT, Fan F, Olyaee M, Li L. Abnormal Whit signaling and stem cell activation in reactive lymphoid tissue and low-grade marginal zone lymphoma. Leuk Lymphoma. 2010;51:906-910. Zhang SO, Mathur S, Hattem G, Tassy o, Pourquie o Sex-dimorphic gene expression and ineffective dosage compensation of Z-linked genes in gastrulating chicken embryos. BMC Genomics. 2010;11:13. Zhang SO, Timble R, Guo F, Mak HY. Lipid droplets as ubiquitous fat storage organelles in C. elegans. BMC Cell Biol. 2010;11:96. Zhang Y, Wen Z, Washburn MP, Florens L. Refinements to label free proteome quantitation how to deal with peptides shared by multiple proteins. Anal Chem. 2010;82:2272-2281. Reviews. Commentaries or Chapters Aulehla A, Pourquie o Signaling gradients during paraxial mesoderm development. Cold Spring Harb Perspect Biol. 2010;2 a000869. Baumann P, Price C. Potl and teloimere maintenance. FEBS Lett. 2010;584

ldentifier	Return Reference	Explanation
FORM 990, PART III, LINE 4		Kim JH, Workman JL. Histone acetylation in heterochromatin assembly. Genes Dev. 2010;24:738-740. Kiskinis E, Eggan K. Progress tow and the clinical application of patient-specific pluripotent stem cells. J Clin Invest 2010;120:51-59. Krumlauff, E. Levine M. Gene expression and development. Special introduction. Dev. Biol. 2010;339:224. Kulesa PM, Bailey CM, Cooper C, Fraser SE. In ovo live imaging of avian embryos. Cold Spring Harb Protoc. 2010;2010 pdb prot5446. Kulesa PM, Bailey CM, Kasemeier-Kulesa JC, McLennan R. Cranial neural crest migration. New rules for an old road. Dev. Biol. 2010;344:543-554. Lee JS, Smith. E, Shilatifard A. The language of histone crosstalk. Cell. 2010;142:682-685. Li L., Clevers H. Coexistence of quiescent and active adult stem cells in mammals. Science. 2010;327:542-545. Li R. Myosin-il Puts the Squeeze on Asymmetric Cell Division. Dev. Cell. 2010;19:639-640. Li R, Bow erman. B. Symmetry breaking in bloology. Cold Spring Harb Perspect Biol. 2010;2. 2003475. Mohan M, Lin C, Guest E, Shilatifard A. Licensed to elongate a molecular mechanism for MLL-based leukaemogenesis. Nat Rev. Cancer. 2010;10:721-728. Pavelka N, Rancati G, Lir R. Dr. Jekyll and Mr. Hyder role of aneuploidy in cellular adaptation and cancer. Curr Oph. Cell. Biol. 2010;23:693-15. Purp. M, Li L. Functional assays for hematopoietts stem cell self-renewal Methods. Mol Biol. 2010;636:45-54. Sarthy JF, Baumann P. Apollo-Taking the Lead in Telomere Protection. Mol Cell. 2010;39:493-491. Shen R. Xie T. NANCS. a germine stem cells Scuardian Angel J. Mol Cell. Biol. 2010;27:67. Slaughter BD, Li R. Tow and Quantitative "in vivo biochemistry" with Fluorescence Fluctuation Spectroscopy. Mol Biol. Cell. 2010;39:493-491. Shen Rs. Symmetry Breaking in Biology. Cold Spring Harbor, N.Y. Cold Spring Harbor. Laboratory Press, 2010;99-116. Smith. E, Shilatifard A. The Chromatin Signaling Path way Diverse Mechanisms of Recruitment of Histone-Modifying Enzymes and Varied Biological Outcomes. Mol Cell. 2010;40:689-701. Steen J, Morrison

ldentifier	Return Reference	Explanation
FORM 990, PART III, LINE 4		Zhang SO, Box AC, Xu N, Le Men J, Yu J, Guo F, Trimble R, Mak HY Genetic and dietary regulation of lipid droplet expansion in Caenorhabditis elegans. Proc Natl Acad Sci USA. 2010,107. 4640-4645. Books. Baumann P. G-Quadruplex DNA. Vol 608. Springer Verlag, Humana Press, 2010. Li R, Bow erman B. Symmetry Breaking in Biology, 1st ed. Cold Spring Harbor, N.Y., Cold Spring Harbor Laboratory. Press. 2010. Competitive Research Grant Funding & Research Awards. & Distinctions. The ability of Stowers Institute scientists to receive increasing numbers of competitively awarded research grants attests to the high level of research productivity present at the Institute During 2010, Stowers scientists worked with the support of 21 grants and fellow ships from the National Institutes of Health, two grants and one fellow ships from the American Cancer Society, one award from Alex's Lemonade Stand Foundation, two fellow ships from The Leukema and Lymphoma Society, one award from the Klingenstein Fund, one award from the McKnight Foundation, one grant from the Greater Kansas City. Community Foundation, one Hudson Prize from the MR and Evelyn Hudson Foundation, one award from the Kansas City Area Life Sciences Institute, one March of Dimes award, one award from the Midwest Cancer Alliance, one Pew Scholar Award, one award from the Burroughs Wellcome Fund, one investigator award from the How and Hughes. Medical Institute, and one fellow ship from The Jane Coffin Childs Memorial Fund With new and recurring grant support, the Institute is receiving more than \$5 million a year in research funding to supplement the income from its endow ments. Testifying to the high level of achievement taking place at the Institute are the awards and honors Institute scientists received in 2010. R. Societ Haw ley, Ph.D., Investigator, received an American Cancer Society grant, effective in January. Ali Shilatifard, Ph.D., Investigator, received two National Institutes of Health grants, effective in July Paul Trainor, Ph.D., Associate Investigator, re

ldentifier	Return Reference	Explanation
FORM 990, PART III, LINE 4		The Stow ers institute continued collaborations in 2010 with hospitals in Kansas City (Children's Mercy and St Luke's) and in Boston (Massachusetts General Hospital and Children's Hospital Boston). The Institute also collaborates with University of Missouri at Kansas City, University of Kansas, How ard Hughes Medical Institute, Harvard University, Harvard Stem Cell Institute, Harvard Medical School, Broad Institute, and Columbia University, most of which are associated with teaching and research hospitals. Additional collaborations occurred in 2010 with University of California at San Francisco, INSERM U633, Avenir Program, Embryonic Stem Cells and Cardiogenesis, Evry, France, University Montpellier II, France, University Paris Descartes, France, CNRS-UMR 8162, Universite Paris-Sud, Hopital Marie Lannelongue, Le Plessis Robinson, France, CNRS-University of Nice Sophia Antipolis, Institut de Pharmacologie Moleculaire et Cellulaire, Nice, France, Assistance Publique-Hopitaux de Paris (AP-HP), Hopital Europeen Georges-Pompidou, Oregon National Primate Research Center, Institut de Medecine Aerospatiale du Service de Sante des Armees (IMASSA), Bretigny sur Orge, France, Dartmouth Medical School, University of Massachusetts Medical School, New York University School of Medicine, National Institute of Child Health and Human Development, Cakland University, viole Texas Southwestern Medical Center, M. D. Anderson Cancer Center, University of California at Berkeley, Wistar Institute, The Open University, University of Minnesota, California Institute of Technology, Biozentrum University of Basel, University of California, Davis, Johns Hopkins Bloomberg School of Public Health, University of Southern California, Karolinska Institutet, Sodertorn University, Institut de Genetique et de Biologie Moleculaire et Cellulaire, Institut National de la Recherche Scientifique, University of Southern California, Karolinska Institute, Sodertorn University, Institut de Genetique et de Biologie Moleculaire et Cellulaire, Institut Nationa

ldentifier	Return Reference	Explanation
FORM 990, PART III, LINE 4		Peter Baumann, Ph D, Associate Investigator and How and Hughes Medical Institute Early Career Scientist, joined the Stow ers institute in 2002 after completing a How and Hughes Medical Institute postdoctoral fellow ship in the laboratory of Dr Thomas R Cech at the University of Colorado-Boulder Dr Baumann received a Ph D in biochemstry from the Imperial Cancer Research Fund and University College, London Research Focus Functional analysis of telomeres and their roles in cellular immortality and cancer. Marco Blanchette, Ph D, Assistant Investigator, joined the Stow ers Institute in 2006 from a postdoctoral position with Dr Donald C Rio at the University of California-Berkeley where he was recipient of a Human Frontier Long-Term Fellow ship. Dr Blanchette received a Ph D degree in microbiology from the Universite de Sherbrooke, Canada Research Focus Functional genomic analysis of the mechanisms controlling alternative pre-mRNA splicing. Joan Conaway, Ph D, investigator, joined the Stowers Institute in 2001 from the Oklahoma Medical Research Foundation where she was an Associate Investigator of the How and Hughes Medical Institute and interim head of the program in Molecular and Cell Biology. Dr Conaw ay received her doctorate in cell biology from Stanford University School of Medicine Research Focus Analysis of the molecular mechanism and regulation of gene transcription. Ronald Conaway, Ph D, Investigator, joined the Stowers Institute in 2001 from the Oklahoma Medical Research Foundation where he was holder of the Chapman Chair in Medical Research Focus Analysis of the molecular mechanism and regulation of gene transcription. Jennifer Gerton, Ph D, Associate Investigator, joined the Stowers Institute in 2002 from a postdoctoral fellow ship in the laboratory of Dr. Joseph DeRisi in the Department of Biochemistry and Biophysics at the University of California-San Francisco Dr. Gerton received a Ph D in microbiology and immunology from Stanford University of California-San Francisco Dr. Gerton received a Ph D in t

ldentifier	Return Reference	Explanation
FORM 990, PART III, LINE 4		Linheng Li, Ph D, investigator, joined the Stowers Institute in 2000 from the University of Washington Medical Center where he held a faculty appointment after completing postdoctoral training in the laboratory directed by Dr. Leroy Hood Dr. Li earned his Ph. D. in molecular and cellular biology from New York University Medical School under the mentoring of Dr. Edward Ziff. Research Focus. Investigation of molecular and genetic pathways controlling adult stem cell development in the hematopoietic and intestinal systems using transgenic and gene targeting animal model approaches. Rong Li, Ph. D., Investigator, joined the Stowers Institute in 2005 from the Department of Cell Biology at Harvard Medical School where she served as an Associate Professor. She earned a Ph. D. in cell biology at the University of California-San Francisco with Dr. Andrew Murray and held a Damon Runyon-Walter Winchell Cancer. Research Fellowship as a postdoctoral associate with Dr. David Drubin at the University of California-Berkeley. Research Focus. Mechanismof cell polarization and cell motility, genome dynamics and cellular evolvability, and epithelial tissue morphogenesis. Ho. Yi Mak, Ph. D., Assistant Investigator, joined the Stowers Institute in 2006 from a Human Frontier Science Program postdoctoral fellowship in the laboratory of Dr. Gary Ruvkun at Harvard Medical. School. Dr. Mak received a Ph. D. in molecular pathology from the Imperial Cancer Research Fund and University. College, London. Research Focus. Analysis of molecular pathways that regulate cellular fat storage in response to nutrient availability and lipid metabolism. Ali Shilatifard, Ph. D., Investigator, joined the Stowers Institute in 2007 from the Saint Louis University School of Medicine where he was a Professor of Biochemstry and Associate Director for Basic Sciences at the Saint Louis University Cancer Center. Dr. Shilatifard earned a Ph. D. in biochemstry from the University of Georgia and the University of Oklahoma School of Medicine and completed postdoctor

ldentifier I	Return Reference	Explanation
FORM 990, PART III, LINE 4		Kausik Si, Ph D., Assistant Investigator, joined the Stowers Institute in 2005 from the laboratory of Dr. Eric Kandel at Columbia University Center for Neurobiology and Behavior where he was a Jane Coffin Childs Fellow and a Francis Goelet Fellow in Neuroscience. Dr. Si earned a Ph.D. in molecular biology from the Albert Einstein College of Medicine Research Focus. Role of synaptic protein synthesis in information acquisition and memory storage. Paul Trainor, Ph.D., Associate Investigator, joined the Stowers Institute in 2001 from a research position at the National Institute for Medical Research at Mill Hill, London, where he completed postdoctoral training. Dr. Trainor has a Ph.D. in developmental biology from Children's Medical Research Institute at the University of Sydney, Australia Research Focus Investigation of the interactions between distinct tissues in the body and their regulation during normal development to reveal pathways that regulate normal cranial and facial development. Jerry Workman, Ph.D., Investigator, joined the Stowers Institute in 2003 from the Pennsylvania State University where he held the Paul Berg Professorship of Biochemistry and was an Associate Investigator of the Howard Hughes Medical Institute Dr. Workman earned a Ph.D. in cell and molecular biology from the University of Michigan and completed postdoctoral training at the Rockefeller University with Dr. Bob Roeder Research Focus Study of the protein complexes that modify chromatin Ting Xie, Ph.D., Investigator, joined the Stowers Institute in 2000 after completing a Howard Hughes Medical Institute postdoctoral fellow ship in the laboratory of Dr. Allan C. Spradling at the Carnegie Institution of Washington. Dr. Xie received his Ph.D. from the Joint Graduate Program in Molecular Biology and Biochemistry of Rutgers University and the University of Medicine and Dentistry of New Jersey. Research Focus Genetic and molecular analysis of stemcells and germicell development in Drosophila and mouse. C. Ron Yu, Ph.D., Assistant Investig

ldentifier R	Return Reference	Explanation
FORM 990, PART III, LINE 4		Technology Centers Paul Kulesa, Ph D, Director of Imaging, joined the Stowers Institute in 2002 after completing a Burroughs Wellcome Fund postdoctoral fellowship in the laboratory of Dr. Scott E. Fraser at the California Institute of Technology. Dr. Kulesa received a Ph D. in applied mathematics under Dr. J. D. Murray at the University of Washington Research Focus. Cell migration in development and cancer. Arcady Mushegian, Ph. D., Director of Bioinformatics Research, joined the Stowers Institute in 2001 from Akkadix. Corporation in San Diego where he led the bioinformatics program. Dr. Mushegian earned a doctorate in molecular biology at Moscow. State University and received training at the University of Kentucky, University of Washington, and with Dr. Eugene Koonin at the National Center for Biotechnology. Information at the U.S. National Institutes of Health. Research Focus. Computational analysis of genes and proteins. Michael Washburn, Ph. D., Director of Proteomics, joined the Stowers Institute in 2003 from the Torrey. Mesa Research Institute in San Diego where he was a Senior Staff Scientist in Proteomics. He earned a Ph. D. in biochemistry and environmental toxicology from Michigan State University before completing a postdoctoral fellow ship with Professor John Yates, Ill in the Department of Molecular Biotechnology at the University of Washington. Research Focus. Quantitative proteomics and protein complex dynamics.

DLN: 93493217000461

SCHEDULE R (Form 990)

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.

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization
Stowers Institute for Medical Research
20-2993509

				20-2993509			
Part I Identification of Disregarded Entities (Co	omplete if the organizat	on answered "Yes	" on Form 990, Pa	rt IV, line 33.)			
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (stat or foreign country)		(e) End-of-year assets	(f) Direct controlling entity		
Part II Identification of Related Tax-Exempt Orgon more related tax-exempt organizations during the second		e if the organization	n answered "Yes"	on Form 990, Part	: IV, line 34 becau	se it had	one
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public chanty status (if section 501(c)(3))	(f) Direct controlling entity	Section 5 cont	g) 12(b)(1 rolled nization
						Yes	No
(1) STOWERS SCIENTIFIC EDUCATION INSTITUTE							
1000 E 50TH STREET	SUPPORT ORG	DE	501(c)(3)	11A	NA		
KANSAS CITY, MO 64110 20-5916445							
(2) STOWERS RESOURCE MANAGEMENTINC							
1000 E 50TH STREET	SUPPORT ORG	DE	501(c)(3)	11a	NA		
KANSAS CITY, MO 64110 41-2186719							
(3) BIOMED VALLEY CORPORATION							
1000 E 50TH STREET	SUPPORT ORG	DE	501(c)(3)	11a	NA		
KANSAS CITY, MO 64110 74-3238244							
(4) STOWERS REAL ESTATE HOLDING CORPORATION							
1000 E 50TH STREET	HOLD TITLE	DE	501(c)(2)	N/A	NA		
KANSAS CITY, MO 64110 26-1472230							
						+	

art III			_	anizations Taxal ted organizations t			_	answered "	Yes" on Form 990,	Part IV, lıı	ne 34
	because	te naa one or mor	C I CIG	tea organizations t	reated as a partite	ising daring the te	ax yearij				
			(c)					(h)	(i)	(j)	

(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) Dispropritionate allocations?		Disproprtionate		Disproprtionat	Disproprtionate		Disproprtion	Dispropri	Disproprtionate	Disproprtionate		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gener mana partr	al or ging	(k) Percentage ownership
							Yes	No		Yes	No											
Dart TV Identifi	ication of Polate	od Ora	anizations Tayal	ble as a Corpora	tion or Trust (C	omplote if the ora		ion an	sewared "Vec" on I	Form	000	Dart IV										

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
(1) BIOMED VALLEY DISCOVERIESINC 4520 MAIN ST SUITE 1650 KANSAS CITY, MO64111 06-1646533	SCI DISC DVLP	DE	NA	С			
					_		
		·					

(4) SEE PART VII FOR ADDITIONAL INFORMATION ON

(5) TRANSACTION DESCRIPTIONS

(6)

Part V	Transactions With Related Organizations (Complete if the organization answered "Y	es" on Form 990, Pa	rt IV, line 34, 35, 35	5A, or 36.)					
Not e.	Complete line 1 if any entity is listed in Parts II, III or IV				Ye	s N	lo		
1 During th	he tax year, dıd the orgranızatıon engage ın any of the following transactıons with one or more related org	anızatıons lısted ın Part	s II-IV?						
a Recei	pt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity			1:	a Ye	5			
b Gift, g	grant, or capital contribution to other organization(s)			1	b	N	lo		
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)									
6 C-1-				1:	F Yes	_			
	of assets to other organization(s)				+		lo		
_	nase of assets from other organization(s)			1		_	lo lo		
	ange of assets			1		_	10 lo		
ı Lease	of facilities, equipment, or other assets to other organization(s)			-	<u>' </u>	N	.		
j Lease	of facilities, equipment, or other assets from other organization(s)			1	j Ye:	5	_		
k Perfo	rmance of services or membership or fundraising solicitations for other organization(s)			1	k	N	lo		
I Perfor	mance of services or membership or fundraising solicitations by other organization(s)			1		N	lo		
m Sharır	ng of facilities, equipment, mailing lists, or other assets			1	m Ye	5	_		
n Sharii	ng of paid employees			1	n Ye	5			
o Reimb	bursement paid to other organization for expenses			1.	_	_			
p Reimb	bursement paid by other organization for expenses			1	Ye	5			
a Other	r transfer of cash or property to other organization(s)			10	<u> </u>	l N	lo		
	transfer of cash or property from other organization(s)			1	_	N	lo		
					•				
2 If the	answer to any of the above is "Yes," see the instructions for information on who must complete this line,		ionships and transacti						
	(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of detem Involv	nining a	moun	t		
1) BIOMED V	ALLEY DISCOVERIESINC	А	3,529,477						
2) BIOMED V	ALLEY DISCOVERIESINC	А	2,754						
3) STOWERS	REAL ESTATE HOLDING CORP	1	2 230 551						

C,F,M

Р

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproprtionate allocations?		(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	(h) eral or naging rtner?	
			Yes	No		Yes	No		Yes	N	
										+	
										-	
										t	
										+	
										\dagger	
										╀	
										+	
										L	
										+	
										t	
										ı	

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Ident if ier	Return Reference	Explanation				
PART V, LINE 2 (1)		IN 2009 SIMR ENTERED INTO A LEASE FOR A CERTAIN BUILDING AND PROPERTY AS DESCRIBED BELOW IN (3) ALSO IN 2009, SIMR SUBLEASED ABOUT 6% OF THIS TOTAL PROPERTY TO BIOMED VALLEY DISCOVERIES, INC ("BVD") UNTIL JULY 2010 WHEN BVD BOUGHT OUT THE REMAINDER OF THE LEASE TO MOVE TO A DIFFERENT LOCATION AS REFLECTED ON FORM 990, PART VIII, BVD MARKET VALUE LEASE PAYMENTS TO SIMR IN 2010 TOTALED \$3,529,477 INCLUDING THE LEASE BUYOUT AND SIMR HAD OFFSETTING AMOUNT OF EXPENSES FOR A PORTION OF THAT AMOUNT AS RENT PAID TO SREHC BVD IS A CONTROLLED PARTY OF BIOMED VALLEY CORPORATION ("BVC"), BVC AND BVD ARE RELATED PARTIES OF SIMR AS REPORTED ON SCHEDULE R THE RENT PAYMENTS FROM BVD DID NOT REDUCE BVD'S "NET UNRELATED INCOME" WITHIN THE MEANING OF CODE SECTION 512(b)(13)(A) THEREFORE, NO PORTION OF THE RENT PAYMENTS FROM BVD CONSTITUTES UNRELATED BUSINESS INCOME TO SIMR UNDER CODE SECTION 512(b)(13)				
PART V, LINE 2 (2)		DURING 2010, BIOMED VALLEY DISCOVERIES, INC ("BVD") TEMPORARILY USED OFFICE SPACE ON SIMR CAMPUS TOTALING LESS THAN 500 SQUARE FEET OF THE MORE THAN 600,000 SQUARE FEET CAMPUS BVD PAYMENTS TO SIMR IN 2010 FOR THIS PURPOSE TOTALED \$2,754 BVD IS NOW LOCATED ON A SEPARATE CAMPUS AS REPORTED IN (1) ABOVE				
PART V, LINE 2 (3)		IN MARCH 2009, SIMR ENTERED INTO A LEASE FOR A 280,000 SQUARE FEET BUILDING WITH STOWERS REAL ESTATE HOLDING CORPORATION ("SREHC"), A 501(C)(2) TAX EXEMPT ORGANIZATION THAT IS A RELATED PARTY OF SIMR SIMR LEASE PAYMENTS TO SREHC IN 2010 TOTALED \$2,230,551				
PART V, LINE 2 (4)		ALL OTHER TRANSACTIONS FOR 1(c), (f), (m), (n),(o) and (p) WERE BETWEEN RELATED 501(C)(3) PUBLIC CHARITIES OR BELOW REPORTING THRESHHOLDS				

Schedule R (Form 990) 2010