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Form 990

Department of the Treasury

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

Open to Public ▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection calendar year, or tax year beginning 01-01-2010 A For the 2010 and ending 12-31-2010 D Employer identification number B Check if applicable AMERICAN SOCIETY FOR BIOCHEMISTRY AND 52-6050165 Address change MOLECULAR BIOLOGY INC Doing Business As Name change E Telephone number Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite (240) 283-6600 11200 ROCKVILLE PÌKE NO 302 Terminated G Gross receipts \$ 35,471,828 Amended return City or town, state or country, and ZIP + 4 BETHESDA, MD 20852 Application pending Name and address of principal officer **H(a)** Is this a group return for affiliates? BARBARA GORDON 11200 ROCKVILLE PIKE NO 302 H(b) Are all affiliates included? BETHESDA, MD 20852 If "No," attach a list (see instructions) Group exemption number 🕨 Tax-exempt status ☐ 4947(a)(1) or ☐ 527 Website: ► WWW ASBMB ORG K Form of organization Corporation Trust Association Other L Year of formation 1919 M State of legal domicile NY Part I Summary 1 Briefly describe the organization's mission or most significant activities SEE SCHEDULE OASBMB IS A PROFESSIONAL SOCIETY OF MORE THAN 11,000 MEMBERS INCORPORATED TO FURTHER THE EXTENSION AND DISSEMINATION OF KNOWLEDGE OF BIOCHEMISTRY AND MOLECULAR BIOLOGY, AND TO FACILITATE INTERACTION AMONG INVESTIGATORS IN BIOCHEMISTRY AND MOLECULAR BIOLOGY MOST MEMBERS TEACH AND CONDUCT RESEARCH AT COLLEGES AND UNIVERSITIES OTHERS CONDUCT RESEARCH IN VARIOUS Activities & Governance GOVERNMENT LABORATORIES OR NONPROFIT RESEARCH INSTITUTIONS A SMALL BUT GROWING FRACTION OF THE MEMBERSHIP WORKS FOR INDUSTRY 2 Check this box 📂 if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . . 13 4 Number of independent voting members of the governing body (Part VI, line 1b) . 13 5 Total number of individuals employed in calendar year 2010 (Part V, line 2a) . 5 29 0 6 Total number of volunteers (estimate if necessary) . 6 7a Total unrelated business revenue from Part VIII, column (C), line 12 . . . 7a 390,031 **b** Net unrelated business taxable income from Form 990-T, line 34 . 96.159 **7**b **Prior Year Current Year** 110,550 Contributions and grants (Part VIII, line 1h) . 123,960 Program service revenue (Part VIII, line 2g) . 18,185,838 18,740,478 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . -174,675 1,614,155 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 356,056 245,995 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 18,477,769 20,724,588 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . 86,974 253,473 14 Benefits paid to or for members (Part IX, column (A), line 4) . . 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-15 Expenses 3,856,997 4,144,228 Professional fundraising fees (Part IX, column (A), line 11e) . 16a 0 b Total fundraising expenses (Part IX, column (D), line 25) $\blacktriangleright 0$ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . . . 12,650,557 13,082,834 17,480,535 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 16,594,528 19 Revenue less expenses Subtract line 18 from line 12 . . 1,883,241 3,244,053 (Assets or | d Balances | **Beginning of Current End of Year** Year 20 Total assets (Part X, line 16) . 58,191,734 64,830,145 Total liabilities (Part X, line 26) 21 13,049,889 13,213,273 22 Net assets or fund balances Subtract line 21 from line 20 . . . 45,141,845 51,616,872 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. 2011-10-13 Signature of officer Date Sign Here BARBARA GORDON EXECUTIVE DIRECTOR Type or print name and title Check if self-Print/Type Preparer's signature Date PTIN employed 🕨 preparer's name Paid Firm's name 🕨 JOHNSON LAMBERT & CO LLP

Firm's address F 700 SPRING FOREST ROAD STE 115

RALEIGH, NC 27609

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

Preparer

Use Only

(919) 719-

Firm's EIN

Phone no 🕨

6400

Par		atement of Program Service eck if Schedule O contains a respons	<u> </u>		F
1	Briefly d	escribe the organization's mission			
THR MOL ADV	OUGH TH ECULAR 8 OCACY F	E OTHE SOCIETY'S PURPOSE IS TO E PUBLICATION OF SCIENTIFIC AN CELLULAR PROTEOMICS, AND THI OR FUNDING OF BASIC RESEARCH . THE DIVERSITY OF INDIVIDUALS E	D EDUCATIONAL JOURNALS THE E JOURNAL OF LIPID RESEARCH, (AND EDUCATION, SUPPORT OF S	E JOURNAL OF BIOLOGICAL ORGANIZATION OF SCIENT CIENCE EDUCATION AT AL	. CHEMISTRY, TIFIC MEETINGS,
2	the prior	rganızatıon undertake any sıgnıfıcant p Form 990 or 990-EZ?			es 🔽 No
	If "Yes,"	describe these new services on Sched	ule O		
3	services	ganization cease conducting, or make		cts, any program 	es ア N o
	If "Yes,"	describe these changes on Schedule C)		
4	Section !	the exempt purpose achievements for 01(c)(3) and 501(c)(4) organizations is to others, the total expenses, and re	and section 4947(a)(1) trusts are re	equired to report the amount o	
4a	(Code) (Expenses \$	15,491,019 including grants of \$	253,473) (Revenue \$	18,740,478)
	PUBLICAT ADDITION AFFAIRS ANNUAL I ISSUES II SCIENTIF FIELD, IN ACTIVITII AND REG SOCIETY' FOCUSES REPRESE OPPORTU CONSIDE IN BIOCH INSTITUT EDUCATI FIELDS IN (MIST), A MIST SEF	VER 48,000 PAGES PER YEAR OF ORIGINAL RE ION GO THROUGH AN EXTENSIVE PEER-REVIEN, ASBMB PUBLISHES A MONTHLY MEMBER MAG IND MATTERS OF BROAD INTEREST TO THE MEJETING, AT WHICH ITS MEMBERS AND OTHER THE FIELD OF BIOCHEMISTRY AND MOLECULA C PAPERS WERE PRESENTED AT THE MEETING CLUDING AWARDS BY MERCK, SCHERING-PLOI SOME OF INTEREST TO THE PUBLICATION ISSUES OF INTEREST TO THE SOCIET OF VIEWS ON ISSUES OF INTEREST TO THE BIOCON EDUCATION AND PROFESSIONAL DEVELOPITED MINORITIES IN THE BIOCHEMICAL FIELD WITTES IN BIOCHEMISTRY AND MOLECULAR BIOCOMISTY OF UNDERGRADUATES, AND HAS SUMISTRY FOR UNDERGRADUATES, AND HAS SUMISTED OF INTEREST TO THE BIOCOMISTRY OF MATTERS AS THEY PERTAIN TO AFRICAN, HADDITION TO THE ABOVE COMMITTEE ACTIVITY WASHINGTON-BASED COALITION OF SCIENCE WES AS AN INFORMATION EXCHANGE AND COOMN, AND SPONSORS AN ANNUAL CAREER FAIR	W PROCESS INVOLVING SOME OF THE MORE AZINE, ASBMB TODAY THIS MAGAZINE FOCUMBERSHIP, SUCH AS COMMITTEE ACTIVITIES. DISTINGUISHED SCIENTISTS PRESENT SCHOOL AS TO BE ASBMB HAS A NUMBER OF GRANTS AND UGH AND AVANTI ASBMB HAS A NUMBER OF SILIC AFFAIRS ADVISORY COMMITTEE IS RESPOYSHED THE COMMITTEE IS RESPOYSHED FOR THE COMMITTEE IS ALSO RESPONSIBLE FOR THE COMMITTEE HAS PUBLISHED A CAREFE OLOGY THIS BROCHURE IS AIMED AT HIGH SOME MOLECULAR BIOLOGY ADDITIONALLY, THIS REPLOYED GRADUATE SCHOOLS AND THE BIOTA REMPLOYEES TO HAVE TAKEN THE MINORITY ISPANIC, AND NATIVE AMERICAN STUDENTS (TIES, ASBMB IS ONE OF THE FOUNDING ORGANIZATIONS INTERESTED IN INCREASION ORGANIZATIONS ORGANIZATIO	THAN 850 MEMBERS OF THE JOURN JSES ON INTERNAL SOCIETY NEWS, AS AND EDUCATIONAL INITIATIVES AS OLARLY PAPERS AND DISCUSS CURR FENDANCE OF APPROXIMATELY 4,000 AWARDS TO PROMISING SCIENTISTS. SUBCOMMITTEES THROUGH WHICH ONSIBLE FOR MONITORING AND CONDR WORKING WITH THE NEWS MEDICATION AND PROFESSIONAL DEVELOR PARTICULAR PROBLEMS FACED BY WES BROCHURE ENTITLED UNLOCKING SCHOOL STUDENTS AND UNDERGRALD COMMITTEE HAS PREPARED A RECECTION OF THE COMMITTEE TAKES A STRUCKING FOR MINORITIES IN SCIENTIFICATIONS OF MINORI	AL'S EDITORIAL BOARD IN AS WELL AS PUBLIC BOARD AN AS WELL AS PUBLIC BOARD AN AS WELL AS PUBLIC AND AS AN AS
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4d	Other p (Expens	ogram services (Describe in Schedul es \$ includin	· ·) (Revenue \$)
4e	Total p	ogram service expenses►\$	15,491,019		

Part IV	Checklist of	Required	Schedules
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			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		No
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? If "Yes," complete Schedule C, Part II	4	Yes	
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 2	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	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
c	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		No
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? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
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		No
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
Ь	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	Yes	
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	Yes	
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? <i>If</i> "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		Νo
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form	20b		

Par	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	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? 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
Ь	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		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? 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			
	<i>IV</i>	28a		Νo
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	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		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
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		Νο
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? <i>If</i> "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		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		Νo
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 Yes V 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		Νο
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?	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
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable			
	1a 86			
b	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	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax</i> Statements filed for the calendar year ending with or within the year covered by this			
	return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year?	3a	Yes	
ъ 4а	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
4a	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Νο
ь	,			
	If "Yes," enter the name of the foreign country			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N o
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	-		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	5c 6a		
	organization solicit any contributions that were not tax deductible?	0a		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		Νo
	services provided to the payor?			
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
_	Did the comment of th			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νo
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νο
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	7g		
h	required?	79		
	Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	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			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	42-		
	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			
_	13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N o
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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.

Check if Schedule C							. 🗸

Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
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		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its 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		Νο
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
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		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal			
Re	venue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		Νo
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		No
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		Νo
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14		Νo
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)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
h	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its			110
_	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	ction C. Disclosure			I
17	List the States with which a copy of this Form 990 is required to be filed▶NY			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)			
10	(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website. Another's website. Upon request.			

- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization BARBARA A GORDON
 11200 ROCKVILLE PIKE SUITE 302
 BETHESDA, MD 20852
 (240) 283-6600

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

Check if Schedule O contains a response to any question in this Part VII

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 organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation from the	(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	organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
(1) SUZANNE R PFEFFER PRESIDENT	5 00	х		х				0	0	0
(2) GREGORY A PETSKO PAST PRESIDENT	5 00	х		х				0	0	0
(3) MARK A LEMMON SECRETARY	5 00	х		Х				0	0	0
(4) MEREL S OLSON TREASURER	5 00	х		х				0	0	0
(5) RUMA BANERJEE COUNCILOR	1 00	х						0	0	0
(6) DAFNA BAR-SAGI COUNCILOR	1 00	х						0	0	0
(7) THOMAS E SMITH COUNCILOR	1 00	х						0	0	0
(8) JOAN A STEITZ COUNCILOR	1 00	х						0	0	0
(9) JOHN D SCOTT COUNCILOR	1 00	х						0	0	0
(10) ANN STOCK COUNCILOR	1 00	х						0	0	0
(11) BENJAMIN F CRAVATT COUNCILOR	1 00	х						0	0	0
(12) JAMES A WELLS COUNCILOR	1 00	х						0	0	0
(13) ADRIAN WHITTY COUNCILOR	1 00	х						0	0	0
(14) BARBARA A GORDON EXECUTIVE DIRECTOR	40 00			х				250,143	0	28,707
(15) NANCY RODNAN DIR PUBLICATIONS	40 00					х		173,061	0	17,306
(16) STEPHEN MILLER DIR FINANCE	40 00					х		156,193	0	15,619

450 FAME AVE HANOVER, PA 17331

\$100,000 in compensation from the organization \blacktriangleright 3

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

(A) Name and Title	(B) Average hours per		(C tion (hat a	(che	′)			(D) Reportable compensation from the	(E) Reportable compensation from related		(F) Estima amount o	ated of other
	week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)		from organizat relat organiza	the ion and ed
(17) PETER FARNHAM PUBLIC AFFAIRS	40 00					х		134,335		0		13,434
(18) HECTOR MARTINEZ SOFTWARE DEV	40 00					Х		130,009		0		13,001
1b Sub-Total				•			Þ					
c Total from continuation sheets	-					•	-	843,741		0		88,067
d Total (add lines 1b and 1c) . 2 Total number of individuals (incl \$100,000 in reportable compens		nıted to	thos	e lıs			-	,		<u> </u>		66,007
3 Did the organization list any form on line 1a? If "Yes," complete Sch					еу е •	mploy	ee, o	r highest compens	ated employee	3	Yes	No No
4 For any individual listed on line 1 organization and related organization individual										4	Yes	NO
5 Did any person listed on line 1a services rendered to the organiz									r individual for •	5		No
Section B. Independent Con	tractors											
1 Complete this table for your five \$100,000 of compensation from			ndep	ende	ent c	ontra	ctors	that received more	e than			
	(A) ne and business ad							Descr	(B) Iption of services		(C Comper	s)
CADMUS 8621 ROBERT FULTON DR STE 100 COLUMBIA, MD 21046	ne and business du							JOURNAL PR				7,191,938
STANFORD UNIVERSITYHIGHWIRE PRESS 1454 PAGE MILL RD PALO ALTO, CA 94304 SHERIDAN PRESS								ONLINE JOUI	RNAL SERVICES			707,386

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

430,160

JOURNAL PRODUCTION

Form 9						Pa	ge 9
Part \		Statement of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or
Contributions, gifts, grants and other similar amounts	b d e f	Federated campaigns 1a Membership dues 1b Fundraising events 1c Related organizations 1d Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in lines 1a-1f \$ Total. Add lines 1a-1f	123,960	123,960			514
Program Service Revenue	c d e f	PUBLICATION SALES MEMBERSHIP DUES ADVERTISING ANNUAL MEETING JOURNAL SUBMISSION FEE All other program service revenue Total. Add lines 2a-2f	511120 900099 541800 900099 900099	16,982,834 1,059,294 390,031 304,814 3,505	304,814 3,505	390,031	
	4 5 6a b	Investment income (including dividends, interest and other similar amounts)	(II) Personal	1,192,832 190,002			1,192,83
e	7a b c d	Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (loss) Gross income from fundraising events	(II) Other	421,323			421,32
Other Revenue	b c 9a b c 10a b c c d d	(not including \$	Business Code 900099	55,993			55,99
	12	Total revenue. See Instructions	•	20,724,588	18,350,447	390,031 rm 990 (20	1,860,15

Part IX Statement of Functional Expenses

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

А	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).									
Do no	ot include amounts reported on lines 6b, p, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses					
1	Grants and other assistance to governments and organizations									
	in the U.S. See Part IV, line 21	24,632	24,632							
2	Grants and other assistance to individuals in the									
	U S See Part IV, line 22	193,008	193,008							
3	Grants and other assistance to governments,									
	organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	35,833	35,833							
4	Benefits paid to or for members	33,033	33,033							
5	Compensation of current officers, directors, trustees, and									
•	key employees	278,850	278,850							
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$									
7	Other salaries and wages	3,111,295	2,472,374	638,921						
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	201,583	159,268	42,315						
9	Other employee benefits	374,019	305,859	68,160						
10	Payroll taxes	178,481	131,973	46,508						
а	Fees for services (non-employees) Management									
b	Legal	5,521	3,816	1,705	_					
c	Accounting	38,862	26,637	12,225						
d	Lobbying									
e	Professional fundraising services See Part IV, line 17									
f	Investment management fees	405,780	122,944	282,836						
g	Other	199,574	29,197	170,377						
12	Advertising and promotion	160,822	152,982	7,840						
13	Office expenses	8,254,506	8,000,547	253,959						
14	Information technology									
15	Royalties									
16	Occupancy	232,062	149,233	82,829						
17	Travel	751,038	490,714	260,324						
18	Payments of travel or entertainment expenses for any federal, state, or local public officials									
19	Conferences, conventions, and meetings	508,271	508,271							
20	Interest									
21	Payments to affiliates									
22	Depreciation, depletion, and amortization	158,878	68,931	89,947						
23	Insurance									
24	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)									
а	TAXES	24,600	24,600		_					
b	EDITORIAL ALLO WANCES	1,017,310	1,017,310							
c	JOURNAL ONLINE	969,235	969,235							
d	MISCELLANEOUS	189,958	180,183	9,775						
e	FASEB ASSESSMENTS	133,632	133,632							
f	All other expenses	32,785	10,990	21,795						
25	Total functional expenses. Add lines 1 through 24f	17,480,535	15,491,019	1,989,516	0					
26	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									

Part X Balance Sheet (A) (B) Beginning of year End of year 1 1 11,398,228 2 9.332.771 2 3 3 1,581,078 4 2,152,078 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) Assets 6 8 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis Complete 1.781.213 10a Part VI of Schedule D ь Less accumulated depreciation 10b 1.622.041 273,809 **10c** 159,172 38.590.622 47.075.984 11 11 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 6,347,997 15 6,110,140 15 16 58,191,734 16 64,830,145 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 1,408,182 17 1,527,777 17 Accounts payable and accrued expenses . 18 18 19 5.420.385 19 5.668.980 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 6,221,322 25 6,016,516 Other liabilities Complete Part X of Schedule D 13,049,889 26 26 13,213,273 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 42.644.812 27 48,780,336 Unrestricted net assets Temporarily restricted net assets 1,522,901 1,862,404 28 Fund 974,132 974,132 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 ¥ 45,141,845 33 51,616,872 33 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 58.191.734 64,830,145

Pa	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		20.5	724,58
2	Total expenses (must equal Part IX, column (A), line 25)	2			180,53
3	Revenue less expenses Subtract line 2 from line 1	3			244,05
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			L41,84!
5	Other changes in net assets or fund balances (explain in Schedule O)	5		3,2	230,97
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		51,6	516,87
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII			୮	
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
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 taudit, 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	n			
	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 is on a separate basis, consolidated basis, or both	ssued			
	▼ Separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	e	3a		No
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		

Employer identification number

SCHEDULE A (Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

Inspection

AMERICAN SOCIETY FOR BIOCHEMISTRY AND MOLECULAR BIOLOGY INC 52-6050165 Reason for Public Charity Status (All organizations must complete this part.) See instructions Part I The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 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 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 Type I ┌ Type II c Type III - Functionally integrated 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 and (III) below, the governing body of the the supported organization? 11g(i) (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) h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organizati col (i) list your gove docume	ion in ted in rning	(v) Did you not organizati col (i) of suppor	on in your	(vi) Is the organizati col (i) orga	on in anized	(vii) A mount of support
		instructions))	Yes	No	Yes	No	Yes	No	
Total									

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 die tests	iisted below, pie	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 کد	. -
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 ender		, , 0 0 , 7 0 0	. 2. 2, 511558 61115		▶ □

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.)

	Ction A. Public Support		1					
Cale	ndar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2	010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do							
	not include any "unusual	1,307,488	1,267,328	1,328,634	1,169,376	1	,183,254	6,256,080
2	grants ") Gross receipts from admissions,							
	merchandise sold or services							
	performed, or facilities furnished	16,218,195	16,574,378	16,812,121	16,864,790	17	,291,153	83,760,637
	in any activity that is related to	, ,	, ,	, ,	, ,		, , l	, ,
	the organization's tax-exempt							
_	purpose							
3	Gross receipts from activities that							
	are not an unrelated trade or business under section 513							
4	Tax revenues levied for the							
4	organization's benefit and either							
	paid to or expended on its							
	behalf							
5	The value of services or facilities							
	furnished by a governmental unit							
	to the organization without							
	charge							
6	Total. Add lines 1 through 5	17,525,683	17,841,706	18,140,755	18,034,166	18	,474,407	90,016,717
7a	A mounts included on lines 1, 2,							
	and 3 received from disqualified							0
	persons							
Ь	A mounts included on lines 2 and							
	3 received from other than							0
	disqualified persons that exceed							U
	the greater of \$5,000 or 1% of the amount on line 13 for the year							
_	Add lines 7a and 7b							0
	Public Support (Subtract line 7c						\longrightarrow	
8	from line 6)							90,016,717
Se	ction B. Total Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 20	10	(f) ⊤otal
9	A mounts from line 6	17,525,683	17,841,706	18,140,755	18,034,166	18	,474,407	90,016,717
	Gross income from interest,	17,525,005	17,011,700	10,110,733	10,031,100	10,	171,107	30,010,717
10a	dividends, payments received							
	on securities loans, rents,	1,665,674	1,543,359	1,389,861	1,442,534	1	,382,834	7,424,262
	royalties and income from	, ,	, ,	, ,		•	·	
	similar sources							
ь	Unrelated business taxable							
	income (less section 511							
	taxes) from businesses							
	acquired after June 30, 1975						\longrightarrow	
С	Add lines 10a and 10b	1,665,674	1,543,359	1,389,861	1,442,534	1,	,382,834	7,424,262
11	Net income from unrelated							
	business activities not included	166,466	90,933	78,181	70,172		185,618	591,370
	in line 10b, whether or not the							
	business is regularly carried on						\longrightarrow	
12	Other income Do not include gain or loss from the sale of							
	capital assets (Explain in Part	13,009	26,671	17,838	139,048		55,993	252,559
	IV)							
13	Total support (Add lines 9, 10c,	10 270 022	10 503 660	10.636.635	10 605 030	20	000 053	00 204 000
	11 and 12)	19,370,832	19,502,669	19,626,635	19,685,920	20,	,098,852	98,284,908
14	First Five Years If the Form 990 is	for the organization	on's first, second	, thırd, fourth, or f	ifth tax year as a	section5	01(c)(3) organization,
	check this box and stop here	-	•	,	·			▶ □
	stion C. Commutation of Bub	lia Gunnart D						-
	ction C. Computation of Pub			10 1 (0)				
15	Public Support Percentage for 2010) (line 8 column (f) divided by line	13 column (f))		15		91 590 %
16	Public support percentage from 200	09 Schedule A, P	art III, line 15			16		91 830 %
Se	ction D. Computation of Inv	estment Inco	me Percenta	 је				
17	Investment income percentage for				(f))	17		7 550 %
18	Investment income percentage from	•			. , ,	18		7 960 %
	so timo incomo percentage noi	schedule	,	•		10	i	7 900 %

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	orm 990 or 990-EZ) 2010	Pag
Part IV	Supplemental Information. Supplemental Information. Complete this required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. additional information. (See instructions).	•

Facts And	Circumstances	Test

Schedule A (Form 990 or 990-EZ) 2010

DLN: 93493286001351

OMB No 1545-0047

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

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

Open to Public

IIILEIIIA	I Neverlide Service				Inspe	ction	
	e organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46	(Politica	ıl Can	n pai	gn Activit	ies),	
the							
	ction 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C ction 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not com	nloto Dori	+ I D				
	ction 501(c) (other than section 501(c)(3)) organizations. Complete Parts FA and C below. Bo not com-	piete Fair	ιFD				
	e organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47	(Lobby	ina A	ctivi	ties) the	n	
	ction 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II		_		•	•	
	ction 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete			•		: II-A	
If th	e organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Pa	rt V, line	: 35a	(Pro	xy Tax), tl	nen	
. S∈	ction 501(c)(4), (5), or (6) organizations Complete Part III						
Na	me of the organization ERICAN SOCIETY FOR BIOCHEMISTRY AND	mployer	ıdent	ificat	ion numb	er	
	LECULAR RIGIOCY INC	2-6050	165				
Par	t I-A Complete if the organization is exempt under section 501(c) or is a se			ora	anizatio	n.	-
				<u> </u>			_
1	Provide a description of the organization's direct and indirect political campaign activities in Part	IV					
2	Political expenditures	>		\$			_
3	Volunteer hours			_			_
Par	t I-B Complete if the organization is exempt under section 501(c)(3).						
1	Enter the amount of any excise tax incurred by the organization under section 4955		>	\$			_
2	Enter the amount of any excise tax incurred by organization managers under section 4955		•	\$			_
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?				☐ Yes	□ N)
4a	Was a correction made?				☐ Yes	┌ N)
b	If "Yes," describe in Part IV						
Par	t I-C Complete if the organization is exempt under section 501(c) except s	ection	501	(c)(3).		
1	Enter the amount directly expended by the filing organization for section 527 exempt function act	ivities	 - -	\$			
2	Enter the amount of the filing organization's funds contributed to other organizations for section 5	27					
	exempt funtion activities	l	•	\$			_
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 1	7 b	-	\$			
4	Did the filing organization file Form 1120-POL for this year?				┌ Yes	ΓN	

Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Sc	hedule C (Form 990 or 990-EZ) 2010						Page 2
P	art II-A Complete if the organization under section 501(h)).	is ex	cempt under	section 501(c)(3) and fi	led Form 5768	
A B	Check If the filing organization belongs to a Check If the filing organization checked bo			" provisions apply	/		
	Limits on Lobbying E (The term "expenditures" means a)		(a) Filing Organization's Totals	(b) Affiliated Group Totals
<u>1</u> a	Total lobbying expenditures to influence public o	pinion	(grass roots lob	oyıng)			
b	Total lobbying expenditures to influence a legisl	atıve b	ody (direct lobby	ıng)			
c	Total lobbying expenditures (add lines 1a and 1	b)					
d	Other exempt purpose expenditures						
е	Total exempt purpose expenditures (add lines 1	c and :	Ld)				
f	Lobbying nontaxable amount Enter the amount columns	from th	e following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The	lobbying nontaxa	ble amount is:			
	Not over \$500,000	20%	of the amount on lin	e 1e			
	Over \$500,000 but not over \$1,000,000	\$100	,000 plus 15% of the	excess over \$500,00	0		
	Over \$1,000,000 but not over \$1,500,000	\$175	,000 plus 10% of the	excess over \$1,000,0	000		
	Over \$1,500,000 but not over \$17,000,000	\$225	,000 plus 5% of the	excess over \$1,500,00	00		
	Over \$17,000,000	\$1,00	00,000				
	Grassroots nontaxable amount (enter 25% of lir	ne 1 f)					
_	Subtract line 1g from line 1a If zero or less, ent	-					
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -					
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h d	or line 11, did the	organization file F	orm 4720 rep	orting	┌ Yes ┌ No
	4-Year Av (Some organizations that made a columns below. See t	secti	on 501(h) ele		havè to co		ne five
	Lobbying Exp	endit	ures During 4	l-Year Averag	jing Period		
	Calendar year (or fiscal year						

	Lobbying Expenditures During 4-Year Averaging Period									
	Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total				
2a	Lobbying non-taxable amount									
b	Lobbying ceiling amount (150% of line 2a, column(e))									
С	Total lobbying expenditures									
d	Grassroots non-taxable amount									
e	Grassroots ceiling amount (150% of line 2d, column (e))									
f	Grassroots lobbying expenditures									

•	•	·	5
Part II-B	Complete if the	organization is exempt under section 501(c)(3) and has NOT filed Form 576	8
	(election under	section 501(h)).	

		(a	1)	(b)
		Yes	No	A mount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
а	Volunteers?		Νo	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
c	Media advertisements?		Νo	
d	Mailings to members, legislators, or the public?		Νo	
e	Publications, or published or broadcast statements?		Νo	
f	Grants to other organizations for lobbying purposes?		Νo	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		Νo	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo	
i	Other activities? If "Yes," describe in Part IV		Νo	
j	Total lines 1c through 1i			0
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
ь	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		Ī	
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political		
	expenses for which the section 527(f) tax was paid).		!
а	Current year	2a	

- c Total
 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues
- 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?
- Taxable amount of lobbying and political expenditures (see instructions)

Part IV Supplemental Information

b Carryover from last year

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Ident if ier	Return Reference	Explanation
EXPLANATION OF OTHER LOBBYING ACTIVITIES		THE MISSION OF THE PUBLIC AFFAIRS COMMITTEE IS TO MANAGE THE RELATIONSHIP OF THE SOCIETY TO THE GENERAL PUBLIC AND WILL SERVE AND ADVISE THE SOCIETY LEADERSHIP ON ISSUES IN WHICH THE MEMBERSHIP HAS AN INTEREST THE COMMITTEE MEETS SEVERAL TIMES A YEAR AND HOLDS HILL VISITS TO ADVOCATE FOR SPECIFIC REQUESTS WITH AN IMPORTANT MEMBER WITH INFLUENCE IN THE AFFECTED AREA EXPENDITURES TOTAL \$425,000

2b

2c 3

4

5

DLN: 93493286001351

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

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.

Name of the organization

Employer identification number

	SOCIETY FOR BIOCHEMISTRY AND R BIOLOGY INC			
art I	Organizations Maintaining Donor Ac	dvicad Funds or Other Similar		6050165 or Accounts Complete if th
HILL	organizations Maintaining Donor At		ruiius	of Accounts. Complete if the
		(a) Donor advised funds	((b) Funds and other accounts
Total	number at end of year			
Aggre	egate contributions to (during year)			
Aggre	egate grants from (durıng year)			
Aggre	egate value at end of year			
	he organization inform all donors and donor advi			sed Yes No
	he organization inform all grantees, donors, and only for charitable purposes and not for the ben			
confe	erring impermissible private benefit			│ Yes │ No
rt II	Conservation Easements. Complete	ıf the organızatıon answered "Yes	s" to Forn	n 990, Part IV, line 7.
F P	ose(s) of conservation easements held by the oi Preservation of land for public use (e g , recreati Protection of natural habitat Preservation of open space plete lines 2a-2d if the organization held a quali	on or pleasure) Preservation of Preservation of	f a certifie	ically importantly land area d historic structure
	ment on the last day of the tax year	med conservation contribution in the ic		Held at the End of the Year
Total	I number of conservation easements		2a	
Total	l acreage restricted by conservation easements		2b	
	ber of conservation easements on a certified his		2c	
	ber of conservation easements included in (c) a	• •	2d	
	ber of conservation easements modified, transfe axable year 🛌	rred, released, extinguished, or termin	nated by th	ne organization during
Numb	ber of states where property subject to conserva	ation easement is located 🟲		
	the organization have a written policy regarding cement of the conservation easements it holds?		handling of	violations, and Yes No
	and volunteer hours devoted to monitoring, insp			
A mot	unt of expenses incurred in monitoring, inspecti	ng, and enforcing conservation easeme	ents during	g the year 🕨 \$
	s each conservation easement reported on line 2 h)(4)(B)(i) and 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of	section	┌ Yes
balan	art XIV, describe how the organization reports conce sheet, and include, if applicable, the text of t organization's accounting for conservation easen	he footnote to the organization's finan		
t III	Organizations Maintaining Collection Complete if the organization answered '			her Similar Assets.
	e organization elected, as permitted under SFAS historical treasures, or other similar assets held de un Part XIV, the text of the footnote to its fin	,	earch in fu	
	ac, in rail xiv, the text of the foothold to its in	ancıal statements that describes thes		
provi If the histor	e organization elected, as permitted under SFAS rical treasures, or other similar assets held for j de the following amounts relating to these items	116, to report in its revenue stateme public exhibition, education, or researd	nt and bala	·
If the histor	e organization elected, as permitted under SFAS rical treasures, or other similar assets held for j	116, to report in its revenue stateme public exhibition, education, or researd	nt and bala	erance of public service,
If the history provide (i) Re	e organization elected, as permitted under SFAS rical treasures, or other similar assets held for j de the following amounts relating to these items	116, to report in its revenue stateme public exhibition, education, or researd	nt and bala	·

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Part	Organizations Maintaining Co	llections of Art	t, His	tori	cal Tre	easu	res, or O	the	<u>r Simila</u>	r Asse	ts (co	ontinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	ne foll	owing th	nat are	e a significa	nt us	se of its c	ollection	ו	
а	Public exhibition		d	Γ	Loan o	rexch	nange progr	ams				
ь	Scholarly research		e	Γ	Other							
c	Preservation for future generations											
4	Provide a description of the organization's co	ollections and expla	un hov	w thev	further	the o	rganization	's ex	empt puri	oose in		
•	Part XIV	one controlled and complete		,	14111141		ngazation	o on	opc pa.,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
5	During the year, did the organization solicit								ılar	_		_
Do	assets to be sold to raise funds rather than t								asii ta Fa		Yes	∏ No
FGI	Escrow and Custodial Arrang Part IV, line 9, or reported an ar						i aliswele	u it	es to ro	יוווו אַכּכ	',	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?		-				or other ass	ets n	not	Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	/ and complete the	follow	/ıng ta	ble							
										A mou	nt	
c	Beginning balance							1c				
d	Additions during the year							1d				
e	Distributions during the year							1e				
f	Ending balance						Γ	1 f				
2a	Did the organization include an amount on Fo	orm 990, Part X, lin	e 21?								Yes	┌ No
b	If "Yes," explain the arrangement in Part XI\	,										
Pa	rt V Endowment Funds. Complete	f the organization	n ans	were	d "Yes	" to F	orm 990,					
		(a)Current Year	(b)	Prior Y		(c) Tw	o Years Back		Three Years	Back (e)Four Y	ears Back
1a	Beginning of year balance	936,372			855,989		974,13	2				
b	Contributions							_				
С	Investment earnings or losses	81,121			112,239		-78,97	4				
d	Grants or scholarships							_				
e	Other expenditures for facilities and programs	22,548			26,367		33,33	6				
f	Administrative expenses	1,994			5,489		5,83	3				
q	End of year balance	992,951			936,372		855,98	9				
2	Provide the estimated percentage of the yea	r and halance held:										
		r end balance held t	us									
а	Board designated or quasi-endowment											
b	remanent endowment F											
C n-	Term endowment -		_ 4		1 1 . 1		4		Ll			
3a	Are there endowment funds not in the posse organization by	ssion of the organiz	ation	tnat a	re neia	and a	aministere	TOF	tne		Yes	No
	(i) unrelated organizations									3a(i)		No
	(ii) related organizations									3a(ii)		Νο
b	If "Yes" to $3a(II)$, are the related organization	ns listed as require	d on S	ched	ule R?					3b		
4	Describe in Part XIV the intended uses of th	<u>-</u>										
Par	t VI Investments—Land, Buildings	s, and Equipme	nt. S	ee F	orm 99	0, Pa	art X, line	10.	T			
	Description of investment				Cost or o		(b)Cost or o basis (oth		(c) Accui depred		(d) Bo	ook value
1a	Land											
b	Buildings											
c	Leasehold improvements											
d	Equipment						1,78	1,213	1	,622,041		159,172
	Other											
Tota	I. Add lines 1a-1e <i>(Column (d) should equal Fo</i>	orm 990, Part X, colui	mn (B,), line	10(c).)				▶			159,172
									Sched	dule D (I	orm 9	90) 2010

Part VII Investments—Other Securities. See	Form 990, Part X, line 12		
(a) Description of security or category (including name of security)	(b)Book value		d of valuation f-year market value
(1)Financial derivatives		Cost of ella-o	- year market value
(2)Closely-held equity interests Other			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	•		
Part VIII Investments—Program Related. See	e Form 990, Part X, line :	13.	
(a) Description of investment type	(b) Book value	(c) Metho	d of valuation
(a) bescription of investment type	(B) Book variation	Cost or end-o	f-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, III			(h) Paali valua
(a) Descrip	otion		(b) Book value
(1) INTERFUND RECEIVABLES			5,714,790
(2) ADVANCES AND DEPOSITS			338,284
(3) ACCRUED INVESTMENT INCOME			57,066
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	5.)		6,110,140
Part X Other Liabilities. See Form 990, Part X			
1 (a) Description of Liability	(b) A mount		
Federal Income Taxes			
INTERFUND PAYABLES	5,714,790		
DUE TO THE FEDERATION	3,714,790		
DOE TO THE FEDERATION	301,720		
	1		
	l		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	6,016,516		

Par	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Staten	nents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	20,724,588
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	17,480,535
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	3,244,053
4	Net unrealized gains (losses) on investments	4	3,230,974
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	3,230,974
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	6,475,027
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenu		· · · · ·
1	Total revenue, gains, and other support per audited financial statements	1	24,550,341
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		, ,
а	Net unrealized gains on investments	74	
ь	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d 594,7	79	
e	Add lines 2a through 2d	. 2e	3,825,753
3	Subtract line 2e from line 1	. 3	20,724,588
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) 4b		
c	Add lines 4a and 4b	. 4c	С
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	. 5	20,724,588
Part	XIIII Reconciliation of Expenses per Audited Financial Statements With Expense	ses per Re	turn
1	Total expenses and losses per audited financial statements	1 1	18,075,314
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities		
b	Prior year adjustments	- 	
c	Other losses		
d	Other (Describe in Part XIV) 2d 594,7	79	
e	Add lines 2a through 2d	. 2e	594,779
3	Subtract line 2e from line 1	. 3	17,480,535
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		
ь	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	. 4c	C
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	. 5	17,480,535
	rt XIV Supplemental Information		

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

Ident if ier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48		THE SOCIETY HAS CONCLUDED THERE ARE NO UNCERTAIN TAX POSITIONS AS OF DECEMBER 31, 2010
PART XII, LINE 2D - OTHER ADJUSTMENTS		REIMBURSED EXPENSE 594,779
PART XIII, LINE 2D - OTHER ADJUSTMENTS		REIMBURSED EXPENSE 594,779

DLN: 93493286001351

OMB No 1545-0047

Open to Public **Inspection**

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

Statement of Activities Outside the United States

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization AMERICAN SOCIETY FOR BIOCHEMISTRY AND MOLECULAR BIOLOGY INC

Employer identification number

52-6050165

Pa	ITTI General Information on Activities Outside the United States. Complete if the organization answered
	"Yes" to Form 990, Part IV, line 14b.
1	For grantmakers. Does the organization maintain records to substantiate the amount of the grants or

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

For grant makers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States

	United States					
3	Activites per Region (Use Part ((b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e.g.,	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
	SOUTH AMERICA	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		15,000
	EAST ASIA AND THE PACIFIC	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		17,500
	EUROPE	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		3,333
2-	Sub-total		0			35,833
ь	Total from continuation sheets to Part I		0			0
	Totals (add lines 3a and 3b) ivacy Act and Paperwork Reduction	Act Notice, see t	0 the Instructions f	1	 No 50082W Sched u	35,833 Ile F (Form 990) 2010

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other
		EAST ASIA AND THE PACIFIC	EDUCATIONAL GRANT	7,500				
		EAST ASIA AND THE PACIFIC	EDUCATIONAL GRANT	10,000				
		SOUTH AMERICA	EDUCATIONAL GRANT	15,000				
				 recognized as charitie ovided a section 501(

Part III	Grants and Ot	her Assistance to	Individuals	Outside the Unit	ed States. Complete	ıf the organızatıon a	nswered "Yes" to Form 9	990, Part IV, line 16.
	Use Part V if ad	ditional space is ne-	eded.					

(a) Type of grant or assistance	ype of grant or ssistance (b) Region (ssistance)		(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash	(g) Description of non-cash	(h) Method of valuation
		recipients			assistance	assistance	(book, FMV, appraisal, other)
			<u> </u>			1	
			<u>. </u>		!		
			<u>. </u>			1	
			<u> </u>		!		
			<u> </u>		!		
			<u> </u>		!		
			<u> </u>		!		
					!		
			1		,		

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)	Γ	Yes	⊽	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	굣	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	Γ	Yes	r	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	V	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	Г	Yes	্	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	⊽	Νo

Schedule F (Form 990) 2010

Part V Supplemental Information

Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

	,	
Identifier	ReturnReference	Explanation
PROCEDURE FOR MONITORING		SCHEDULE F, PART I, LINE 2 GRANT RECIPIENTS ARE
GRANTS OUTSIDE THE U S		REQUIRED TO SUBMIT PERIODIC DOCUMENTATION TO
GRANTS OUTSIDE THE U.S.		REQUIRED TO SUBMIT PERIODIC DOCUMENTATION TO
		SUBSTANTIATE THE USE OF GRANT FUNDS
		I .

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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

DLN: 93493286001351 OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

Schedule I

(Form 990)

Name of the organization

Employer identification number

AMERICAN SOCIETY FOR BIOCHEMISTRY AND MOLECULAR BIOLOGY INC Part I General Information on Grants and Assistance							52-6050165		
 Part I General Inform Does the organization mathe selection criteria used Describe in Part IV the organization 	ıntaın records to subs d to award the grants (tantiate the amount of t					▽Yes 「N		
Form 990, Part I	V, line 21 for any r	Governments and ecipient that receive ded	d more than \$5,000	. Check this box if r	no one recipient rece	ived more than \$5,0			
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 grant or assistance		
(1) MARINE BIOLOGICAL LABORATORY7 MBL STREET WOODS HOLE, MA 02543	04-2104690		10,000				EDUCATIONAL GRANT		
(2) RESEARCH AMERICA 1101 KING ST ALEXANDRIA,VA 22314	52-1609875		7,500				EDUCATIONAL GRANT		
(3) BRANDEIS UNIVERSITY415 SOUTH ST WALTHAM, MA 02454	04-2103552		5,000				EDUCATIONAL GRANT		

Enter total number of section 501(c)(3) and government organizations

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

(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
See Additional Data Table					

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

Ident if ier	Return Reference	Explanation
PROCEDURE FOR	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 GRANT RECIPIENTS ARE REQUIRED TO SUBMIT PERIODIC DOCUMENTATION TO
MONITORING GRANTS		SUBSTANTIATE THE USE OF GRANT FUNDS
INTHELLS		

Software ID: Software Version:

EIN: 52-6050165

Name: AMERICAN SOCIETY FOR BIOCHEMISTRY AND

MOLECULAR BIOLOGY INC

Form 990, Schedule I, Part III, Grants and Other Assistance to Individuals in the United States

(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
LIPMANN AWARD	1	3,567			
RO SE A WARD	1	3,760			
AVANTI AWARD	1	5,964			
MERCK AWARD	1	6,981			
TEAGLE AWARD	2	3,901			
EXEMPLARY CONTRIBUTION TO EDUCATION	1	3,712			
YOUNG INVESTIGATOR AWARD	1	5,596			
EPD COMMITTEE	35	35,450			
CLASSROOM FOR THE FUTURE SEMINAR	18	17,352			
ASSESSEMENT OF CHALLENCES FACING MINORITY FACULTY IN BIOCHEMISTRY AND MOLECULAR BIOLOGY MEETING	50	74,272			
PROMOTING CONCEPT DRIVEN TEACHING STRATEGIES IN BIOCHEMISTRY AND MOLECULAR BIOLOGY THROUGH CONCEPT ASSESSMENT STUDY	29	32,453			

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DLN: 93493286001351

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

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.

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Name of the organization AMERICAN SOCIETY FOR BIOCHEMISTRY AND MOLECULAR BIOLOGY INC

Employer identification number

52-6050165

Pa	Questions Regarding Compensation	n				
					Yes	Νo
1a	Check the appropiate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part II					
	First-class or charter travel	Γ	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Г	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 oreimbursement orprovision of all the expenses desc			1b		
2	Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executiv			2		
3	Indicate which, if any, of the following the organizat organization's CEO/Executive Director Check all t					
	Compensation committee	Γ	Written employment contract			1
	Independent compensation consultant	Γ	Compensation survey or study			1
	Form 990 of other organizations	▽	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	Part VII	I, Section A, line $f 1a$ with respect to the filing organization			
а	Receive a severance payment or change-of-contro	l paymer	nt from the organization or a related organization?	4a		Νo
b	Participate in, or receive payment from, a suppleme	ental non	qualified retirement plan?	4b		Νo
С	Participate in, or receive payment from, an equity-b	pased co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and p	rovide th	ne applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only m	ust comp	plete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A compensation contingent on the revenues of	, line 1a,	, did the organization pay or accrue any			
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 compensation contingent on the net earnings of	, line 1a,	, did the organization pay or accrue any			
а	The organization?			6a		No
b	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 payments not described in lines 5 and 6? If "Yes,"			7		No
8	Were any amounts reported in Form 990, Part VII,					
	subject to the initial contract exception described i	ın Regs	section 53 4958-4(a)(3)? If "Yes," describe			1
	ın Part III			8	igsquare	Νo
9	If "Yes" to line 8, did the organization also follow the section 53 4958-6(c)?	ne rebutt	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)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name (B) Breakdown of W-2 and/or 1099-MISC compensation (C) Retirer				(8) 5		(=) = 1 ()	(E) 0	
(A) Name		(B) Breakdown of (i) Base compensation	W-2 and/or 1099-MI: (ii) Bonus & incentive compensation	SC compensation (iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
(1) BARBARA A GORDON	(1) (11)	250,143 0	0	0	24,500 0	4,207 0	278,850 0	0
(2) NANCY RODNAN	(I) (II)	173,061 0	0	0	17,306 0	0	190,367 0	0
	(I) (II)	156,193 0	0	0	15,619 0	0	171,812 0	0
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

Schedule J (Form 990) 2010 Page **3**

Part III Supplemental Information

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

Identifier Return Reference Explanation

Schedule J (Form 990) 2010

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2010

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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.

Name of the organization AMERICAN SOCIETY FOR BIOCHEMISTRY AND MOLECULAR BIOLOGY INC Employer identification number

52-6050165

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6		THE SOCIETY HAS FIVE MEMBERSHIP CATEGORIES REGULAR MEMBERS, ASSOCIATE MEMBERS, AFFILIATE MEMBERS, GRADUATE MEMBERS, AND UNDERGRADUATE MEMBERS OF THESE, REGULAR, ASSOCIATE, AND AFFILIATE MEMBERS MAY VOTE ONLY REGULAR MEMBERS MAY HOLD OFFICE

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A		THE PRESIDENT, SECRETARY, TREASURER, AND SIX COUNCILORS ARE ELECTED BY THE SOCIETY MEMBERSHIP TO TERMS OF THREE YEARS EACH, EXCEPT THAT THE PRESIDENT'S TERM IS TWO YEARS WITH AN ADDITIONAL YEAR AS PAST PRESIDENT THREE ADDITIONAL COUNCILORS ARE APPOINTED BY THE PRESIDENT TO THREE YEAR TERMS

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		FORM 990 IS NOT PROVIDED TO THE GOVERNING BODY BEFORE FILING, BUT IS REVIEWED BY BOTH THE EXECUTIVE DIRECTOR AND DIRECTOR OF FINANCE

Identifier	Return Reference	Explanation	
		THE BOARD OF THE SOCIETY PERFORMS AN ANNUAL REVIEW PROCESS TO DETERMINE ANY COMPENSATION INCREASE FOR TOP MANAGEMENT THE EXECUTIVE DIRECTOR PERFORMS AN ANNUAL REVIEW PROCESS TO DETERMINE ANY COMPENSATION INCREASE FOR OFFICERS AND KEY EMPLOYEES	

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST

ldentifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 3,230,974