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Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
on may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

2011

_													
		endar year 2011 or tax year beginning					, and end	ing					<u> </u>
		of foundation THE CARDIOVASCULAR	MEI)IC	AL RESEAR	СН			-	oyer identif		mber	
		EDUCATION FUND, INC.								-05799			
ı	Numb	er and street (or PO box number if mail is not delive	ered to	stree	t address)		Room/si	uite	B Tele	hone numb	•	•	4
							F00			(2.	15) 41	L3-2414	4
		WALNUT STREET					500						
(City o	town, state, and ZIP code						1	• •				
										mption applicing, check her		🟲	•
	PHII	ADELPHIA, PA 19106-3601		, ,									
G	Che	ck all that apply. Initial return		Ш	Initial return	of a former p	oublic cha	rity	D 1. Fo	reign organiza	itions, check	here . 🟲	•
		Final return		Ш	Amended re	turn				reign organiza			_
_		Address change			Name chang					% test, check mputation .			•
Η	Che	ck type of organization. X Section 501	(c <u>)(3</u>) exe	empt private f	foundation		1	F If pro	rate foundation	on status wa	s terminated	
L	S	ection 4947(a)(1) nonexempt charitable trust	<u> </u>		<u>ner taxable pr</u>					r section 507(l		_	\cdot
ı	Fair	market value of all assets at end JAcco	untır	ng m	ethod 🔀 C	ash 💹 Acc	crual		F If the	foundation is	s ın a 60-mo	nth termination	
	of ye				ecify)				unde	r section 507(t	o)(1)(B), che	ck here 🔒 🕨	•
	16)	▶ \$ 18,424,906. (Part I	colu	ımn	(d) must be on	cash basis)			. —.				
E	art l	Analysis of Revenue and Expenses (The	/	a) R	evenue and	(b) Net inve	actment	,,	Adus	ted net		isburseme	
		total of amounts in columns (b), (c), and (d) may not necessanly equal the amounts in	`	expenses per		incon		"	(c) Adjusted net income			for charitable purposes	
		column (a) (see instructions))			books			<u> </u>			(cas	h basis on	<u>ly)</u>
٦	1	Contributions, gifts, grants, etc., received (attach schedule) .				4, 4 1, 2							<u> </u>
ļ	2	Contributions, gifts, grants, etc., received (attach schedule) Check X if the foundation is not required to attach Sch. B	2 1	۲ ,	in the second	Trible to the	- 0 f °_	7/19					
	3	Interest on savings and temporary cash investments										. A Wish way	
	4	Dividends and interest from securities			311,542.	31	1,542.			_	ATO	CH : 138	
	5 a	Gross rents									F. 1. 19		_ \ \
	ь	Net rental income or (loss)	ž ,	-71	الم تا السو	ラウン 7 章	\$ 7.77 B		(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		· F 9		9 .
		Net gain or (loss) from sale of assets not on line 10			22,452.	<u>我</u> さいま長	- 1 - 1 A	-7,≨,	, ~ <u>.</u> <u>₹</u>	1 2	· = Z		
n c	b	Gross sales price for all assets on line 6a	73 .	, ,	A STATE OF THE STA	: 1 (/ (-) -) - -		F-1		- 1 m - 3		- jr . , 33 %.	<u>- 3 '-3</u>
Revenue	7	Capital gain net income (from Part IV, line 2) .		۲٠ ₃₅	그= 그는 사람	2	2,452.	- 1	- 0		* # # # # # # # # # # # # # # # # # # #	July .	in Bo
ď		Net short-term capital gain	1.2.		16学生 (基)	75	ا و المراج				15.7	4	الجاء
	9	Income modifications · · · · · · · · · · · · · · · · · · ·		آبد		\$	F 2 . 4-			-	7, 2,	:1-23	<u></u>
	10 a	Gross sales less returns and allowances · · · ·		\frac{1}{2}.	が ^さ 程1540で	137.75	57. 1 S	V. *4.	, ^ ⁻	The state of	1 334.7		<u> </u>
	ь	Less Cost of goods sold	144				1 1	62.0	r	, , ,		المراجع المراجع	
		Gross profit or (loss) (attach schedule)				京 は、三大学	à Lade-			Mi	原仁	Y.E.D.	
	11	Other income (attach schedule)								ဂ္	4.7.	, , , , ,	JOE:
		Total. Add lines 1 through 11			333,994.	. 33	3,994.		16	MV K	\ o E.	7117/×	指护
		Compensation of officers, directors, trustees, etc			50,000.				[i			25	,,0,00
	14	Other employee salanes and wages							T	<u> </u>	7]:=
368	15	Pension plans, employee benefits								Uti	DEN	. (11	$\perp \Gamma$
ē	۱. ـ	1 16 (0.05.05.41.45)											
X	ь	Accounting fees (attach schedule) ATCH 2			7,500.								
9		Other professional fees (attach schedule) . * .			1,400.								
a;	17	Interest											
ま	18	Taxes (attach schedule) (see instructions)	*		4,064.								,032
Ē	19	Depreciation (attach schedule) and depletion									. 12.2	s 3.5.	. ` `
d-	20	Occupancy											
ک	21	Travel, conferences, and meetings			57,702.								
جة. الم	22	Printing and publications											
C A operating\and Administrative Expenses	23	Other expenses (attach schedule) ATCH 5			21,474.								
ä	24	Total operating and administrative expenses	. [
ě		Add lines 13 through 23	L	_	142,140								,032
ō	25	Contributions, gifts, grants paid		4	,094,812	:-		[-	-		4,094	
3	26	Total expenses and disbursements. Add lines 24 and 25	$\overline{}$	4	,236,952		(Ď			q	4,121	,843
$\vec{\sigma}$	27	Subtract line 26 from line 12.		٠.		r Copp	r, , ,	21/2 -	-				
	1	Excess of revenue over expenses and disbursements	[-3	, 902, 958		= .	<u>.</u>				7 24 2	<u>, ' </u>
	l .	Net investment income (if negative, enter -0-)		٠.	77.7	33	33,994		*		15 12	<u>2</u> 7	<u>, , , , , , , , , , , , , , , , , , , </u>
		Adjusted net income (if negative, enter -0-).	-				:				2 E -	وسيطن بيات	`}

Р	art II	Balance Sheets description column should be for end-of-year	Beginning of year	End o	of year
_		amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
}	- 1	Cash - non-interest-bearing	247,191.	18,430.	18,431
				9,489,125.	9,489,125
	3	Savings and temporary cash investments	The second second		一种 医沙理氏
		Less allowance for doubtful accounts ▶	19,538.	40,507.	40,507
	4	Pledges receivable		10 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -	40,507
	•	Less allowance for doubtful accounts ▶	ration of the second of the se	2017 - 120 - 120 - 120 - 120 - 120 - 120 - 120 - 120 - 120 - 120 - 120 - 120 - 120 - 120 - 120 - 120 - 120 - 1	ಎಲ್ <i>ಟ್ ಕ್ರೌಕ್ ಬಂದಿಗೆ ಪಾರ್ಟ್</i>
	5	Grants receivable			
	_	Receivables due from officers, directors, trustees, and other			 ·
	6	,,,			
		disqualified persons (attach schedule) (see instructions)	i and in the case of the		F-1- 7- 10
	7	Other notes and loans receivable (attach schedule)		Alle Andre Branch	The said sale between the said and the said
		Less: allowance for doubtful accounts ▶			
စ္	8	Inventories for sale or use			
ssets	9	Prepaid expenses and deferred charges			
As	100	investments - 0.5 and state government obligations (attach scriedule).		3,007,213.	3,019,600
	b	Investments - corporate stock (attach schedule)			
	С	Investments - corporate bonds (attach schedule) ATCH 7	4,058,799.	6,058,804.	5,857,243
	11	Investments - land, buildings, and equipment basis Less accumulated depreciation (attach schedule)	1 - 6 - 54.5 1 1 1		tedant in the less
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule)			
	14	Investments - other (attach schedule) Land, buildings, and equipment basis	18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		The second section is a second
		equipment basis Less accumulated depreciation (attach schedule)	م ما المدالية المدينة المدينة المدالية المدالية المدالية المدالية	and where the manifestation is to be a set think and we a second to	I feel to a to the feet of the feet
	4.5	(attach schedule)			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers - see the		18,614,079.	18,424,906
_		instructions Also, see page 1, item l)		10,014,079.	10,424,900
	17	Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	···		
ap	21	Mortgages and other notes payable (attach schedule)			The state of the s
J	22	Other liabilities (describe			
					1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
	23	Total liabilities (add lines 17 through 22)	0	0	
_		Foundations that follow SFAS 117, check here ► X			
		and complete lines 24 through 26 and lines 30 and 31.			
တ္	۱.,	•	22,517,037.	18,614,079.	[[[하는걸 - 결과 명
2	24	Unrestricted	22,021,007.	20,021,0130	
or Fund Balances	25	Temporarily restricted			
<u>~</u>	26	Permanently restricted	_		
Ī		Foundations that do not follow SFAS 117,			[] 我的问题 () 異學學
Ť		check here and complete lines 27 through 31. ▶ □			
		Capital stock, trust principal, or current funds			
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
88	29	Retained earnings, accumulated income, endowment, or other funds	_		· · · · · · · · · · · · · · · · · · ·
t A	30	Total net assets or fund balances (see instructions)	22,517,037.	18,614,079.	
Net	31	Total liabilities and net assets/fund balances (see			
		instructions)	22,517,037.	18,614,079.	
P	art I	Analysis of Changes in Net Assets or Fund	Balances		
		I net assets or fund balances at beginning of year - Part		(must agree with	<u> </u>
•		of-year figure reported on prior year's return)			22,517,037
2	CIIU-	or year rigure reported on prior year steturn)	• • • • • • • • • • • • •	· · · · · · · · · - 	-3,902,958
2	⊏ute	er amount from Part I, line 27a		2	3, 302, 930
		er increases not included in line 2 (itemize)		l l	10 614 070
		lines 1, 2, and 3		1	18,614,079
		reases not included in line 2 (itemize) ▶			
<u>6</u>	Tota	I net assets or fund balances at end of year (line 4 minus	line 5) - Part II, column (b	o), line 30 6	18,614,079

10111 330-71 (2011)				· · · · · · · · · · · · · · · · · · ·	rage J			
Part IV Capital Gains	and Losses for Tax on Inve	estment income	/b\ Haw					
(a) List and	I describe the kind(s) of property sold (e g , real estate,	(b) How acquired	(c) Date acquired	(d) Date sold			
		use; or common stock, 200 shs. MLC Co) P-Purchase D-Donation (mo , day, yr) (mo , day, yr)						
1a SEE PART IV SCHE	DULE							
b								
С								
d								
e								
	(f) Depreciation allowed	(g) Cost or other basis		(h) Gain or (le	eel			
(e) Gross sales price	(or allowable)	plus expense of sale		(h) Gain or (lo (e) plus (f) mini				
				(-) (-)				
_a								
b								
<u>c</u>								
d								
e								
Complete only for assets:	showing gain in column (h) and owne	d by the foundation on 12/31/69	(A)	Gains (Col (h) g	ain wintis			
	(j) Adjusted basis	(k) Excess of col (i)		(k), but not less t				
(i) F M.V. as of 12/31/69	as of 12/31/69	over col (i), if any		Losses (from co				
		3 ,						
<u>a</u>								
_b								
С								
d								
e								
		gain, also enter in Part I, line 7						
2 Capital gain net income or		(loss), enter -0- in Part I, line 7	2 22,452.					
3 Net short-term capital gain	or (loss) as defined in sections 12			•				
	t I, line 8, column (c) (see insti	· · · · · · · · · · · · · · · · · · ·						
					0			
Part I, line 6			3					
Part V Qualification L	inder Section 4940(e) for Rei	duced Tax on Net Investment la	ncome					
If section 4940(d)(2) applies,		outable amount of any year in the ba	asa nario	42 <u> </u>	Yes X No			
	not qualify under section 4940(e).		ase perior	- .] 162 [] NO			
		<u> i </u>						
	ount in each column for each year	, see the instructions before making	any entr					
(a) Base penod years	(b)	(c)		(d) Distribution r	atio			
Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		(col (b) divided by				
2010	3,499,453.	17,110,757.			0.204518			
2009	3,209,187.	15,009,277.			0.213814			
2008	4,623,329.	18,766,129.			0.246366			
2007	4,973,411.	21,719,150.		•	0.228987			
2006	3,786,751.	24,388,441.			0.155268			
			 					
7 Takel of E = 4 1 (D					1.048953			
2 Total of line 1, column (d)	<u>,</u>		2		1.040933			
_	for the 5-year base period - divide	- · · · -						
number of years the found	dation has been in existence if less	s than 5 years	3	3 0.209791				
4 Enter the net value of non	charitable-use assets for 2011 fro	m Part X, line 5	4 20,138,002.					
5 Multiply line 4 by line 3			5	4.	224,772.			
5 Widtiply line 4 by line 5	• • • • • • • • • • • • • • • • • • • •			 				
			1 . 1		2 240			
6 Enter 1% of net investmen	nt income (1% of Part I, line 27b)		6		3,340.			
7 Add lines 5 and 6			7	4,	228,112.			
	ns from Part XII, line 4	in Part VI, line 1b, and complete t	8 hat part		121,843. x rate. See the			

Par	Excise Tax Based on Investment Income (Section 4940(a), '4940(b), 4940(e), or 4948 - see in	<u>ıstruc</u>	tions)				
	Exempt operating foundations described in section 4940(d)(2), check here		· · · · · · · · · · · · · · · · · · ·	- 3				
-	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)	ا المسالة الا	کی ہے۔ ادائے اور	ر الحنظيم م				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		6,6	80.				
	here ▶ and enter 1% of Part I, line 27b							
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of 🥠 🕍 🙄 🚉							
	Part I, line 12, col. (b).							
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2							
3	Add lines 1 and 2		6,6	80.				
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0				
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		6,6	80.				
6	Credits/Payments:	Jan 1966 Kalendari		-				
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a 5, 337.	ş., : } <u>;</u>	1. 9	5				
b	Exempt foreign organizations - tax withheld at source 6b	-, 						
c	Tax paid with application for extension of time to file (Form 8868) 6c 3,013.			, (
đ	Backup withholding erroneously withheld	ัช _ค ู่เรีย	-]:					
7	Total credits and payments. Add lines 6a through 6d		8,3	50.				
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8							
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		1 -					
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		1,6	70.				
	Enter the amount of line 10 to be Credited to 2012 estimated tax > 1,670. Refunded > 11							
	t VII-A Statements Regarding Activities	г						
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate	7	Yes	No X				
	or intervene in any political campaign?	1a						
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the	.		Х				
	Instructions for definition)?	1b	,	<u>Λ</u>				
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	17.74	1.75	73 (# 43)				
		5	17 A	X				
	Did the foundation file Form 1120-POL for this year?	1c		17e-				
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		******	A 15				
	(1) On the foundation \$\)\$ (2) On foundation managers \$\)\$		- *	· 🗐				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			· 通。				
	on foundation managers. > \$ Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	14 7FE	X				
2			3-1-2-	ا منام				
	If "Yes," attach a detailed description of the activities Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			1 5 E.				
3	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	<u></u>	X				
4		4a		Х				
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4b						
	If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х				
5	If "Yes," attach the statement required by General Instruction T.		,	, T.				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	,	7 🗓	in a				
٥	By language in the governing instrument, or		ا ` . ا					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	-	·	15				
	conflict with the state law remain in the governing instrument?	6	X	·				
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	Х					
8а	Enter the states to which the foundation reports or with which it is registered (see instructions)	∴.	;	-0				
- 4	PA,		;	, ī				
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General							
-	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X	_				
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		. · .	a ú				
	4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete							
	Part XIV	9		Х				
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names							
•	and addresses	10		X				

charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?

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4h

Form 990-PF (2011)

Form 990-PF (2011)

3 NONE

Total. Add lines 1 through 3.

All other program-related investments. See instructions

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Pa	Minimum Investment Return (All domestic foundations must complete this part. For see instructions.)	eign founda	tions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc,	1	
	purposes		
а	Average monthly fair market value of securities	1a	20,388,268.
b	Average of monthly cash balances	1b	56,404.
С	Fair market value of all other assets (see instructions)	1c	
d		1d	20,444,672.
е	Reduction claimed for blockage or other factors reported on lines 1a and	73.E	
	1c (attach detailed explanation)	4 - dr, 5-	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	121	20,444,672.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		, , , , , , , , , , , , , , , , , , , ,
	instructions)	4	306,670.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	20,138,002.
6	Minimum investment return. Enter 5% of line 5	. 6	1,006,900.
Pa	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ and do not complete this	s part.)	
1	Minimum investment return from Part X, line 6	. 1	1,006,900.
2 a			
b			
		- 1	6,680.
3	Distributable amount before adjustments. Subtract line 2c from line 1		1,000,220.
4	Recoveries of amounts treated as qualifying distributions		
5	Add lines 3 and 4	I - F	1,000,220.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	. 7	1,000,220.
Pa	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	4,121,843.
b	• • • • • • • • • • • • • • • • • • •	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	7	
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	4,121,843.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		<u> </u>
	Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	4,121,843.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when c qualifies for the section 4940(e) reduction of tax in those years.	alculating w	nether the foundation

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Pa	rt XIII Undistributed Income (see instru	ictions)	· · · · · · · · · · · · · · · · · · ·		
		(a)	(b)	(c)	(d)
1	Distributable amount for 2011 from Part XI,	Corpus	Years prior to 2010	2010	2011
	line 7	and the state of t			1,000,220.
2	Undistributed income, if any, as of the end of 2011				1、副海(学)等
a	Enter amount for 2010 only				
-	Total for pnor years 20 09 20 08 20 07	- 1,252		THE STATE OF THE S	
ם	Excess distributions carryover, if any, to 2011:		13		
3	Excess distributions carryover, if any, to 2011.				
а	From 2006 3,797,199. From 2007 3,910,061.	통상합자 된다.	[레일 : [] 이 : [] []		
b					中國 暴 医动脉
С	From 2008 3, 693, 193.				
d	From 2009 2,459,036.			1. (漢) 2. 《黃山	
е	From 2010 2,647,053.			ن به کار کار کار کیدا	
f	Total of lines 3a through e	16,506,542.	94.1 (1) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	· [1] [1] [1] [1] [1]	The Salary of the
4	Qualifying distributions for 2011 from Part XII,		1 2 2 2	The state of the state of	
	line 4 ▶ \$ 4,121,843.				300
а	Applied to 2010, but not more than line 2a		Section Control		
h	Applied to undistributed income of prior years			The same of the same	F. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
D	(Election required - see instructions)	-2, -4			
_	Treated as distributions out of corpus (Election		Together to be a stage as a great	- 18 & Julier 1 2 4 4	
			ا المالية الما	l	
а	Applied to 2011 distributable amount	J 16 J 1 - 17-18-18-18-18-18-18-18-18-18-18-18-18-18-	7. 7	D. 电影点器 新花	1,000,220.
•	Remaining amount distributed out of corpus	3,121,623.	The state of the s	15379 44 186	· · · · · · · · · · · · · · · · · · ·
5	Excess distributions carryover applied to 2011			1 - 3 WE 1- 5 -	
5	(If an amount appears in column (d), the same		- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	De Letter weeter to the	The second second
	amount must be shown in column (a))	(4성 호텔링및 그러워			
6	Enter the net total of each column as				
	indicated below:	19 628 165			
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	gradita egular en en en en en en	1	- + 1 - 1 de In + - 1	
þ	Prior years' undistributed income Subtract			The state of the s	
_	line 4b from line 2b Enter the amount of prior years' undistributed	And the state of the same		The first of the second	
C	income for which a notice of deficiency has been				지난 하는 화학 기업 :
	issued, or on which the section 4942(a) tax has			[1] [1] [1] [1] [1] [1] [1] [1] [1] [1]	
	been previously assessed	Arthur File Co		Lagar Handle & A Company	The second second second
d	Subtract line 6c from line 6b Taxable			, Liv 1, with the Burns -	
	amount - see instructions	在 1415年 1515年 151			
е	Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount - see	\$\$\$\$\$\$\$\$\$			
	instructions	학생하다 한다.			
•	Undistributed income for 2011. Subtract lines				
•	4d and 5 from line 1. This amount must be				
	distributed in 2012	Flance Control of	and the state of	50 指海域。	
7	Amounts treated as distributions out of corpus				The state of the s
	to satisfy requirements imposed by section		[
	170(b)(1)(F) or 4942(g)(3) (see instructions)		The state of the state of the		
8	Excess distributions carryover from 2006 not	1			
	applied on line 5 or line 7 (see instructions)	3,797,199.	age .	3 F 5 23 T	<u> </u>
9	Excess distributions carryover to 2012.			la talenta	
-	Subtract lines 7 and 8 from line 6a	15,830,966.		1 2 2	
10	Analysis of line 9				* * * * * * * * * * * * * * * * * * * *
a	Excess from 2007 3, 910, 061.			- , - ,	
h	Excess from 2008 3, 693, 193.	1 2		1. 4. 4	
	Excess from 2009	The second second	1. 5 气泵 3	20.50	
ں بہ	Excess from 2010 2, 647, 053.	医多二氏管原			
e	3 101 603				to the second of
	LACESS HUHIZUTI 3/121/023.	1	1	<u>, , , </u>	Form 990-PF (2011)

	1 990-PF (2011)		OVASCULAR MED			5-0579911 Page 10
Pa	rt XIV Private Oper	rating Foundations	see instructions and	d Part VII-A, quest	ion 9)	NOT APPLICABLE
1 a	If the foundation has				perating	
_	foundation, and the rulin				▶∟	
þ	Check box to indicate wh	ether the foundation is a	private operating found	lation described in sect	ion 4942	(j)(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year	·	Prior 3 years		(e) Total
	justed net income from Part I or the minimum investment	(a) 2011	(b) 2010	(c) 2009	(d) 2008	· · · · · · · · · · · · · · · · · · ·
	return from Part X for each					
	year listed			<u> </u>		
b	85% of line 2a			1		
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of					
	exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
а	alternative test relied upon "Assets" alternative test - enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section					
_	4942(j)(3)(B)(i)				-	
D	"Endowment" alternative test- enter 2/3 of minimum invest-					
	ment return shown in Part X,					
_	line 6 for each year listed		<u> </u>		- -	
C	"Support" alternative test - enter (1) Total support other than					
	gross investment income					
	(interest, dividends, rents, payments on securities					
	loans (section 512(a)(5)),					
	or royalties)					
	public and 5 or more exempt organizations as					
	provided in section 4942 (j)(3)(B)(iii)					
	(3) Largest amount of sup-					
	port from an exempt organization					
	(4) Gross investment income	l				
Pa		ary Information (C during the year - se		only if the four	ndation had \$5,000	or more in assets
1	Information Regardin	_				
а					otal contributions rece (See section 507(d)(2)	ived by the foundation)
	N/A					
b	List any managers of ownership of a partner					ly large portion of the
	N/A					
2	Information Regardin	g Contribution, Grant	, Gift, Loan, Scholarsi	nip, etc., Programs:		
	Check here ▶ ☐ If t	the foundation only i	makes contributions	to preselected cha	aritable organizations	and does not accept
		or funds If the found	ation makes gifts, gra			or organizations under
	The name, address, a			m applications should	t be addressed	
a	ATTACHM	·	of the person to who	ii applications should	i be addressed	
b	The form in which app		bmitted and information	on and materials the	ey should include	
	PLEASE SEE	ATTACHED STATE	EMENT			
С	Any submission dead	ines				
		ATTACHED STATI				
d	Any restrictions or li factors	imitations on awards	, such as by geogra	aphical areas, char	itable fields, kinds of	institutions, or other
	PLEASE SEE	ATTACHED STATE	EMENT			
						- 000 DE

Page 11

Part XV Supplementary Information (continued)			
3 Grants and Contributions Paid Duri	ng the Year or Appr		uture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	contribution	
a Paid during the year				
ATTACHMENT 10				
		· ·		
		,		
				•
			1	
Total			3a	4,094,812.
b Approved for future payment	<u> </u>	1		
.,				
	į			
	•			
Total			▶ 3b	
IVER 1	<u></u>		<u> </u>	ı

Form 990-PF (2011)

r gròss a	mounts unless otherwise indicated.	Unrela			section 512, 513, or 514	(e) Related or exempt
	•	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income
rogram s	service revenue	Dusiniass code i	Amount	EXCUSION CODE	Amount	(See instructions)
			·		. <u> </u>	
·				_		
_				-		
	nd contracts from government agencies					
	hip dues and assessments					
nterest on	savings and temporary cash investments			14	311,542.	
)ividenas	s and interest from securities	, , , ,	J + 5 J.			
	l income or (loss) from real estate.		38 - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			<u></u>
	financed property					
	ebt-financed property					
	income or (loss) from personal property			- + +		
	estment income	1		18	22,452.	
	ss) from sales of assets other than inventory			1 10	22, 432.	
	ne or (loss) from special events					
•	ofit or (loss) from sales of inventory			 	· · · · · · · · · · · · · · · · · · ·	
	enue a			 		
_				-		-
i				-		
i		v = -			333 994	
Subtotal Fotal. Add workshort XVI-	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calc	culations) s to the Ac	complishment of	Exempt Purpo	oses	
d Subtotal Fotal. Ade worksho	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calc	culations) s to the Ac	complishment of	Exempt Purpo	oses of Part XVI-A contrib	uted importantly to
Subtotal Fotal. Add worksho rt XVI-	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcast Relationship of Activities Explain below how each activities	culations) s to the Ac	complishment of	Exempt Purpo	oses of Part XVI-A contrib	uted importantly to
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Subtotal Fotal. Add worksho rt XVI-	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcast Relationship of Activities Explain below how each activities	culations) s to the Act ty for whice	complishment of	Exempt Purpo	oses of Part XVI-A contrib	uted importantly to
Subtotal Fotal. Add worksho rt XVI-	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcast Relationship of Activities Explain below how each activities	culations) s to the Act ty for whice	complishment of	Exempt Purpo	oses of Part XVI-A contrib	uted importantly to
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Subtotal Fotal. Add worksho rt XVI-	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcast Relationship of Activities Explain below how each activities	culations) s to the Act ty for whice	complishment of	Exempt Purpo	oses of Part XVI-A contrib	uted importantly to
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Subtotal Fotal. Add worksho rt XVI-	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcast Relationship of Activities Explain below how each activities	culations) s to the Act ty for whice	complishment of	Exempt Purpo	oses of Part XVI-A contrib	uted importantly to
Subtotal Fotal. Add worksho rt XVI-	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcast Relationship of Activities Explain below how each activities	culations) s to the Act ty for whice	complishment of	Exempt Purpo	oses of Part XVI-A contrib	uted importantly to
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Subtotal Fotal. Add worksho rt XVI-	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcast Relationship of Activities Explain below how each activities	culations) s to the Act ty for whice	complishment of	Exempt Purpo	oses of Part XVI-A contrib	uted importantly to
Subtotal Fotal. Add worksho rt XVI-	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcast Relationship of Activities Explain below how each activities	culations) s to the Act ty for whice	complishment of	Exempt Purpo	oses of Part XVI-A contrib	uted importantly to
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Subtotal Fotal. Add worksho rt XVI-	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcast Relationship of Activities Explain below how each activities	culations) s to the Act ty for whice	complishment of	Exempt Purpo	oses of Part XVI-A contrib	uted importantly to
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Subtotal Fotal. Add worksho rt XVI-	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcast Relationship of Activities Explain below how each activities	culations) s to the Act ty for whice	complishment of	Exempt Purpo	oses of Part XVI-A contrib	uted importantly to
Subtotal Fotal. Add worksho rt XVI-	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcast Relationship of Activities Explain below how each activities	culations) s to the Act ty for whice	complishment of	Exempt Purpo	oses of Part XVI-A contrib	uted importantly to
Subtotal Fotal. Add worksho rt XVI-	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calcast Relationship of Activities Explain below how each activities	culations) s to the Act ty for whice	complishment of	Exempt Purpo	oses of Part XVI-A contrib	uted importantly to

orm	990-PF	(2011)	THE CAR	DIOVASCULAR MED	ICAL RESE	ARCH	05-057	 9911	Pa	ge 13
	t XVII					and Relationships V	Vith None	chari		
		Exempt Organ	nizations							
1	Did th	e organization direct	ly or indirectly	engage in any of the t	following with	any other organization	described		Yes	No
	in sec	tion 501(c) of the Co	de (other than	section 501(c)(3) orga	ınizatıons) or ıı	n section 527, relating to	o political	17:5	7.3	آيا مرات
	organ	ızatıons?						ترده مرد	-3, ±*	F-12.
а	Trans	fers from the reportin	g foundation to	a noncharitable exem	pt organization	of		1.35.	·	
	(1) Ca	ash						1a(1)		X
	(2) O	her assets			<i></i>		. .	1a(2)		Х
b	Other	transactions:						- 		
	(1) Sa	ales of assets to a no	ncharitable exe	mpt organization				1b(1)		Х
								1b(2)		Х
	(3) Re	ental of facilities, equi	pment, or other	assets				1b(3)		X
	(4) R	eimbursement arrange	ements					1b(4)		X
	(5) Lo	ans or loan guarantee	es					1b(5)		X
	(6) Pe	erformance of service	s or membersh	nip or fundraising solicit	ations			1b(6)		X
										X
d						e Column (b) should al				
						on If the foundation red				
		in any transaction or	sharing arrang	gement, show in colur		ue of the goods, other a				
(a) L	ine no	(b) Amount involved	(c) Name of r	nonchantable exempt organization		Description of transfers, transac	tions, and shar	ing arra	ngemer	its
		N/A			N/2	<u>A</u>				
										
	-									
			ļ					-		
			-							
						. =				
				· · ·						
										
			1		-					
	lo ébo	foundation dispaths	ar indicantly of	Files and worth and an analysis	d to one or -		otiono.			
2 a						nore tax-exempt organiz tion 527?		\neg \checkmark	es X	l No
.			•	ither than section 50 I(c	c)(3)) or in sec	uon 5277	L		#S	J NO
ט	п те	s," complete the follow (a) Name of organization		(b) Type of organ	nization	(c) Descript	tion of relations	aida		
	-	1-1		(5) 1) po oi oigai		(d) Descript				
-						+				
			-							
				<u> </u>						

				-						
Sign		penalties of penury, I declare to and complete Declaration of pre						o the best of	my knowledge and belief, it is	s tru
Here	PATRICIA A. WOLFE		E	1 5/	16/12	EXECUT	IVE DI	21.11.11.11		etun elov
	Sign	ature of officer or trustee	a Was	Date	·	Title	,	/	see instructions)? X Yes	N
Deid		Print/Type preparer's nar	né	reparer's sign	naturę		Date /	Check	k if PTIN	
Paid		DAVID J. WHITE,	CPA	in h	`~ <i>`</i>		5/15	Z.	employed P0070710:	1
Prepa	rer	Firm's name ► HEFF	LER, RADET	ICH & SA	ITTA, LLI	?		Firm's EIN	▶23-1602569	
Use C	nly	Firm's address ▶ 1515	MARKET ST	REET SUI	TE 1700					
		PHIL	ADELPHIA,	PA		1910	2	Phone no.	215-665-8870	

FORM 990-PF - PART IV

CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME Date Date sold Kind of Property Description acquired Depreciation Excess of Gross sale Cost or FMV Adj. basis Gain allowed/ FMV over price less other as of as of expenses of sale allowable basis 12/31/69 12/31/69 adı basıs (loss) TOTAL CAPITAL GAIN DISTRIBUTIONS 22,467. 3,000,000 SHS OF FHLB BOND 09/16/2010 09/13/2011 PROPERTY TYPE: SECURITIES 3,000,000. 3,000,005. -5. 4,000,000 SHS OF FHLB BOND 09/08/2010 05/04/2011 PROPERTY TYPE: SECURITIES 4,000,000. 4,000,005. -5. 4,000,000 SHS OF FNMA NOTE 09/30/2011 09/08/2010 PROPERTY TYPE: SECURITIES 4,000,000. 4,000,005. -5. TOTAL GAIN(LOSS) 22,452.

ATTACHMENT 1

THE CARDIOVASCULAR MEDICAL RESEARCH

SECURITIES
FROM
INTEREST
AND
DIVIDENDS
і Н
PART
990PF,
FORM

	NET INVESTMENT INCOME	211,913. 101,317. -1,688.	311,542.
I - DIVIDENDO AND INTEREST FROM SECONTILES	REVENUE AND EXPENSES PER BOOKS	211,913. 101,317. -1,688.	311,542.
FROM			
THIENEGI		LPL FINANCIAL - DIVIDENDS LPL FINANCIAL - INTEREST LPL FINANCIAL - ACCRUED INTEREST PURCHAS	TOTAL
UNIT		ST P	
L DEND.		NTERE	
7 7 7		DENDS REST UED I	
-		DIVI INTE ACCR	
FAN		1 1 1 1 1 1 1	
FORE SOUET, FARE	DESCRIPTION	INANCIA INANCIA INANCIA	
FORE	DESCE	LPL F LPL F LPL F	

ATTACHMENT 2

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FORM 990PF, PART I - ACCOUNTING FEES

CHARITABLE		
ADJUSTED NET INCOME		
NET INVESTMENT INCOME		
REVENUE AND EXPENSES PER BOOKS	7,500.	7,500.
		TOTALS
DESCRIPTION	ACCOUNTING FEES	

	۱5			

THE CARDIOVASCULAR MEDICAL RESEARCH

ATTACHMENT 3

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

REVENUE AND

DESCRIPTION EXPENSES
PER BOOKS

WEBSITE 1,400.

TOTALS 1,400.

ATTACHMENT 4

REVENUE AND EXPENSES PER BOOKS 4,064.

CHARITABLE PURPOSES 2,032.

2,032.

TOTALS

PAYROLL TAXES

DESCRIPTION

4,064.

ATTACHMENT 4

ATTACHMENT 5

FORM 990PF, PART I - OTHER EXPENSES

			REVENUE
			AND
			EXPENSES
DESCRIPTION			PER BOOKS
OFFICE SUPPLIES			6,998.
TELEPHONE			2,426.
PAYROLL SERVICE	CHARGES		1,700.
INSURANCE			7,679.
BANK CHARGES			225.
ADVERTISING			2,446.
		TOTALS	21,474.

FORM 990PF, PART II - U.S. AND STATE OBLIGATIONS

ORM 990PF, FART II - U.S. AND STATE OBLIGATIONS

GOVERNMENT & AGENCY BONDS

DESCRIPTION

US OBLIGATIONS TOTAL

ENDING ENDING ENDING EMV

3,007,213.

3,019,600.

3,019,600.

3,007,213.

ATTACHMENT 6

ATTACHMENT 7

05-0579911

FORM 990PF, PART II - CORPORATE BONDS

DESCRIPTION

MUTUAL FUND

BOOK VALUE ENDING

ENDING FMV

5,857,243. 5,857,243.

TOTALS

6,058,804.

6,058,804.

ATTACHMENT 8

- LIST OF OFFICERS, DIRECTORS, AND TRUSTEES FORM 990PF, PART VIII

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION		•
JOSEPH LOSCALZO, M.D. 510 WALNUT STREET 500 PHILADELPHIA, PA 19106-3601	PRESIDENT	0	0	·
MICHAEL D. FISHBEIN, ESQUIRE 510 WALNUT STREET 500 PHILADELPHIA, PA 19106-3601	CFO	0	0	
ELLEN REISMAN 510 WALNUT STREET 500 PHILADELPHIA, PA 19106-3601	SECRETARY	0	0	
PATRICIA A. WOLFE 510 WALNUT STREET 500 PHILADELPHIA, PA 19106-3601	EXECUTIVE DIRECTOR 20.00	50,000.	0	0
	GRAND TOTALS	50,000.		

THE CARDIOVASCULAR MEDICAL RESEARCH

05-0579911

ATTACHMENT 9

FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

PATRICIA A. WOLFE 510 WALNUT STREET; SUITE 500 PHILADELPHIA, PA 19106-3601 215-413-2414 ATTACHMENT 10

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR.

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		•
RECIPIENT NAME AND ADDRESS	AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
BAYLOR COLLEGE OF MEDICINE GEORGE P. NOON, M.D.	NONE	TRANSPLANT CENTER	294,710.
ONE BAYLOR PLAZA HOUSTON, TX 77030			-
DUKE UNIVERSITY OFFICE OF SPONSORED PROGRAMS JERRY P. EU, M.D.	NONE	TRANSFLANT CENTER	64,437.
DUKE UNIVERSITY DURHAM, NC 27708			
PEDIATRIC CARDIOLOGY JHU	NONE	CENTER FOR PROTEOMICS & TISSUE PROCESSING	11,707.
ALLEN EVERETT	PUBLIC		
733 N. BROADWAY			
BALTIMORE, MD 21205-2196			
SERPIL C. ERZURUM, M.D.	NONE	TRANSPLANT CENTER	40,977.
CLEVELAND CLINIC FOUNDATION	PUBLIC		
9500 EUCLID AVENUE CLEVELAND, OH 44195			
STANFORD UNIVERSITY	NONE	TRANSPLANT CENTER	208,710.
MARLENE RABINOVITCH, M.D.	PUBLIC		
128 ENCINA COMMONS			
STANFORD, CA 94305-6032			
PULMONARY HYPERTENSION ASSOCIATION	NONE	RESEARCHED FOR PULMONARY HYPERTENSION	612, 500.
801 ROEDER ROAD; SUITE 1000	PUBLIC		
SILVER SPRING, MD 20910			

ATTACHMENT 10 (CONT'D)

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		-
RECIPIENT NAME AND ADDRESS	AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
THE REGENTS OF THE UNIVERSITY OF MICHIGAN UNIVERSITY OF MICHIGAN ANN ARBOR, MI 48109	NONE PUBLIC	TRANSPLANT CENTER, MEDICAL CENTER RESEARCH CELL STUDIES, DATA BANK AND COORDINATING CENTER	456,176.
TRUSTEES OF UNIVERSITY OF PENNSYLVANIA PETER L. JONES, PH.D 3451 WALNUT STREET PHILADELPHIA, PA 19104	NONE	CENTER FOR CELL STUDIES	395, 952.
UNIVERSITY OF ALABAMA AT BIRMINGHAM UNIVERSITY OF ALABAMA TUSCALOOSA, AL 35487	NONE	BIRMINGHAM CENTER FOR TISSUE PROCESSING, TRANSPLANT CENTER	303, 312.
UNIVERSITY OF COLORADO MARTIN R. ZAMORA, M.D. BOULDER, CO 80309	NONE	TRANSPLANT CENTER	20,942.
UNIVERSITY OF COLORADO AT DENVER HSC MARK W. GERACI, M.D. 13001 E. 17TH PLACE AURORA, CO 90045	NONE PUBLIC	CENTER FOR GEONOMICS & CENTER FOR TISSUE PROCESSING	174,655.
UNIVERSITY OF COLORADO - SCHOOL OF MEDICINE RUBIN M. TUDER, M.D. 13001 E. 17TH PLACE AURORA, CO 80045	NONE	CENTER FOR TISSUE PROCESSING	224, 281.

ATTACHMENT 10 (CONT'D)

FORM 920PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		•
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
UNIVERSITY OF SOUTHERN ALABAMA JACK W. OLSON, PH.D. 307 UNIVERSITY BOULEVARD N	NONE	MOBILE RESEARCH CELL STUDIES	29,284.
MOBILE, AL 36688-0002 CLEVELAND CLINIC MAIN CAMPUS SUZY COMHAIR, PH.D. 3500 EUCLID AVENUE, MAIL CODE NB4 CLEVELAND, OH 44195	NONE	CLINICAL BIOMEDICAL RESEARCH	227, 622.
VANDERBILT UNIVERSITY MEDICAL CENTER BARBARA MEYRICK, PH.D. 21ST AVENUE SOUTH AT GARLAND AVENUE NASHVILLE, TN 37232	NONE PUBLIC	CENTER FOR PROTEOMICS, TRANSPLANT	146, 222.
ALLEGHENY-SINGER RESEARCH INSTITUTE RAYMOND L. BENZA, M.D. PITTSBURGH, PA 15122	NONE	CENTER FOR GENOMIC SCIENCES	180,302,
PULMONARY VASCULAR RESEARCH INSTITUTE P.O. BOX 181 27-32 POULTRY EC2P 2BX LONDON UNITED KINGDOM	NONE PUBLIC	PULMONARY VASCULAR & HEART FAILURE	465,540.
CIRCULITE 250 PEHLE AVENUE PARK 80 WEST, SUITE 403 SADDLE BROOK, NJ 07663	NONE PUBLIC	TREATMENT OF CHRONIC HEART FAILURE	237,483.

TOTAL CONTRIBUTIONS PAID

4,094,812.

ATTACHMENT 10

SCHEDULE D (Form 1041) '

Capital Gains and Losses

05-0579911

OMB No 1545-0092

Department of the Treasury Internal Revenue Service Name of estate or trust

▶ Attach to Form 1041, Form 5227, or Form 990-T. See the Instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable). THE CARDIOVASCULAR MEDICAL RESEARCH Employer identification number

	ND EDUCATION FUND, INC.				05-05799	11	
Note	Form 5227 filers need to complete only P						
Par	Short-Term Capital Gains and Lo	osses - Assets	Held One Ye	ar or Less			
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other i (see instruction		(f) Gain or (loss) for the entire year Subtract (e) from (d)
1 a							
							
							
					1		
b	Enter the short-term gain or (loss), if any,	from Schedule D	-1, line 1b			1 b	-10.
2	Short-term capital gain or (loss) from For	ms 4684, 6252,	6781, and 882	4		2	
3	Net short-term gain or (loss) from partner Short-term capital loss carryover Enter					3	
4	Carryover Worksheet					4	()
5	Net short-term gain or (loss). Combine column (3) on the back			<u> </u>		5	-10.
Par	t II Long-Term Capital Gains and L	osses - Assets	Held More T	han One Year			(0.0.1
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other (see instruction		(f) Gain or (loss) for the entire year Subtract (e) from (d)
6a							
			_				
b	Enter the long-term gain or (loss), if any,	from Schedule D	-1, line 6b			6 b	-5.
7	Long-term capital gain or (loss) from For						
8	Net long-term gain or (loss) from partner						
9	Capital gain distributions					9	22,467.
						10	
10 11	Gain from Form 4797, Part I Long-term capital loss carryover Enter	the amount, i	f any, from lir	ne 14 of the 2010	O Capital Loss		
12	Carryover Worksheet	lines 6a throug	h 11 ın colum	n (f) Enter here an	d on line 14a,	11	22 462
	column (3) on the back		<u></u>	<u> </u>	<u></u>	12	22,462.

Pa	Caution: Read the instructions before completing this	nart	(1) Beneficiaries	or trust's	(3) Total
13		<u> </u>	(See mou)	Of trusts	-10.
14	Net short-term gain or (loss)	13			
		14a			22,462.
a h	Total for year	14b			32,1031
	28% rate gain	14c			
	Total net gain or (loss). Combine lines 13 and 14a	15	 		22,452.
	e: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4	$\overline{}$	m 990-T. Part I. line	4a) If lines 14a and 15	·
gains	s, go to Part V, and do not complete Part IV If line 15, column (3), is a net loss, co	omplet	e Part IV and the Capi	tal Loss Carryover Works	heet, as necessary
Pa	rt IV Capital Loss Limitation				
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, F	Part I, I	ine 4c, if a trust), the	smaller of.	
а	The loss on line 15, column (3) or b \$3,000 :: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, pag			16 ()
Note Cam	e: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, pag vover Worksheet in the instructions to figure your capital loss carryover	e 1, lir	ne 22 (or Form 990-T,	line 34), is a loss, comp	lete the Capital Loss
	Tax Computation Using Maximum Capital Gains Rate	<u> </u>			
	n 1041 filers. Complete this part only if both lines 14a and 15 in colu		2) are gains, or an a	mount is entered in F	Part I or Part II and
ther	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is moi	re tha	n zero		
	tion: Skip this part and complete the Schedule D Tax Worksheet in the	instru	ctions ıf.		
	ither line 14b, col. (2) or line 14c, col. (2) is more than zero, or oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.				
	n 990-T trusts. Complete this part only if both lines 14a and 15 ar		no or qualified disa	danda ara inaludad u	n innomo in Bort I
	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part a				
	ther line 14b, col (2) or line 14c, col. (2) is more than zero	a oo	mpioto the concar		
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	34)	17	2.00	
18	Enter the smaller of line 14a or 15 in column (2)	, .		100	
	but not less than zero 18		13 m	[s. 7.]	
19	Enter the estate's or trust's qualified dividends				
	from Form 1041, line 2b(2) (or enter the qualified		,	1.7	
	dividends included in income in Part I of Form 990-T) 19			1 1	
20	Add lines 18 and 19 20			\$ 15 m	
21	If the estate or trust is filing Form 4952, enter the			ر چې روي المياد د د	
	amount from line 4g; otherwise, enter -0 21			(C)	
22	Subtract line 21 from line 20. If zero or less, enter -0-		22		
23	Subtract line 22 from line 17 If zero or less, enter -0-		23	5, 5	
		• • •			
24	Enter the smaller of the amount on line 17 or \$2,300		24	[
25	Is the amount on line 23 equal to or more than the amount on line 24			24.14.6.2	
	Yes. Skip lines 25 and 26, go to line 27 and check the "No" box	κ.		1-4	
	No. Enter the amount from line 23		25		
26	Subtract line 25 from line 24		26		
27	Are the amounts on lines 22 and 26 the same?			, -·	
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or li	ne 22	27		
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		. 28		
				-	
29	Subtract line 28 from line 27		29		
30	Multiply line 29 by 15% (15)	-		30	
31	Figure the tax on the amount on line 23. Use the 2011 Tax Rat				
	(see the Schedule G instructions in the instructions for Form 1041)			31	
•-	A.I.I. 00 104				
32	Add lines 30 and 31			32	
33	Figure the tax on the amount on line 17. Use the 2011 Tax Rat				
	(see the Schedule G instructions in the instructions for Form 1041).				
34	Tax on all taxable income. Enter the smaller of line 32 or line 33 G line 1a (or Form 990-T line 36)	nere a	and on Form 1041.	, Schedule	

Page 2

Schedule D (Form 1041) 2011

SCHEDULE D-1 (Form 1041) ·

Continuation Sheet for Schedule D
(Form 1041)

▶ See instructions for Schedule D (Form 1041).

▶ Attach to Schedule D to list additional transactions for lines 1a and 6a.

OMB No 1545-0092

Department of the Treasury Internal Revenue Service Name of estate or trust

THE CARDIOVASCULAR MEDICAL RESEARCH

Employer identification number 05-0579911

(a) Description of p 100 sh 7% pref	roperty (Example.		(b) Date acquired	(c) Date sold (mo , day, ут)	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d
100 sn 7% pre	erred of			(mo , day, yr)	(mo , day, yr)	(4) 5 5	(see instructions)	Subtract (e) from (d
3,000,000 SH	S OF	FHLB	BOND	09/16/2010	09/13/2011	3,000,000.	3,000,005.	
1,000,000 SH	s of	FHLB	BOND	09/08/2010	05/04/2011	4,000,000.	4,000,005.	_
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	_					····		
			<u> </u>	<u> </u>	<u> </u>		l	

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side

Employer identification number

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year					
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d)
a 4,000,000 SHS OF FNMA NOTE	09/08/2010	09/30/2011	4,000,000.	4,000,005.	-5.
					•
					_
			-	-	
					
	<u> </u>			<u> </u>	,
b Total. Combine the amounts in column	(f). Enter here and	d on Schedule D. lir	ne 6b		-5.

THE CARDIOVASCULAR MEDICAL RESEARCH AND EDUCATION FUND, INC. (A non-profit organization)

FINANCIAL STATEMENTS

DECEMBER 31, 2011

TABLE OF CONTENTS

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FINANCIAL STATEMENTS	
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Statement of Activities	3
Statement of Cash Flows	4
Notes to Financial Statements	5-6

Independent Accountants' Compilation Report

To the Board of Trustees The Cardiovascular Medical Research and Education Fund, Inc. Philadelphia, Pennsylvania

We have compiled the accompanying statement of financial position of the Cardiovascular Medical Research and Education Fund, Inc. (a non-profit organization) as of December 31, 2011, and the related statements of activities and cash flows for the year then ended. We have not audited or reviewed the accompanying financial statements and, accordingly, do not express an opinion or provide any assurance about whether the financial statements are in accordance with accounting principles generally accepted in the United States of America.

Management is responsible for the presentation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America and for designing, implementing, and maintaining internal control relevant to the preparation and far presentation of the financial statements.

Our responsibility is to conduct the compilation in accordance with Statements on Standards for Accounting and Review Services issued by the American Institute of Certified Public Accountants. The objective of a compilation is to assist management in presenting financial information in the form of financial statements without undertaking to obtain or provide any assurance that there are no material modifications that should be made to the financial statements.

Hoffler Badetab + Saite XXP

Philadelphia, Pennsylvania May 8, 2012

THE CARDIOVASCULAR MEDICAL RESEARCH AND EDUCATION FUND, INC. STATEMENT OF FINANCIAL POSITION DECEMBER 31, 2011

ASSETS		
Cash and Cash Equivalents	\$	9,507,556
Dividend Income Receivable		40,507
Investments		8,876,843
TOTAL ASSETS	\$	18,424,906
LIABILITIES		
Accrued Excise Tax	\$	1,343
NET ASSETS		
Unrestricted Net Assets	_\$_	18,423,563
TOTAL LIABILITIES AND NET ASSETS		18,424,906

THE CARDIOVASCULAR MEDICAL RESEARCH AND EDUCATION FUND, INC. STATEMENT OF ACTIVITIES FOR THE YEAR ENDED DECEMBER 31, 2011

UNRESTRICTED REVENUE	
Dividend Income	\$ 211,913
Interest Income	99,629
Capital Gain	22,452
Unrealized Loss on Investments	(204,002)
Total Unrestricted Revenue	129,992
EXPENSES	
Management & General	
Advertising	2,446
Bank Charges	225
Insurance	7,677
Meeting Reimbursement	57,702
Office Supplies	6,999
Payroll	25,000
Professional Fees - Accounting	7,500
Professional Fees - Website	1,400
Taxes - Excise Tax	6,680
Taxes - Payroll	2,032
Telephone	2,426
Payroll Service Charges	1,700
Program Services	
Awards & Grants	4,094,811
Payroll	25,000
Taxes - Payroll	2,032
Total Expenses	4,243,630
DECREASE IN UNRESTRICTED NET ASSETS	(4,113,638)
UNRESTRICTED NET ASSETS, BEGINNING OF YEAR	22,537,201
UNRESTRICTED NET ASSETS, END OF YEAR	\$ 18,423,563

THE CARDIOVASCULAR MEDICAL RESEARCH AND EDUCATION FUND, INC. STATEMENT OF CASH FLOWS FOR THE YEAR ENDED DECEMBER 31, 2011

Cash flows from operating activities	
Decrease in Net Assets	\$ (4,113,638)
Adjustments to reconcile increase in Net Assets to net cash used in operating activities:	
Unrealized Loss on Investments	\$ 204,002
Increase in dividend income receivable	(20,969)
Decreased in prepaid excise tax	5,337
Increased in accrued excise tax	 1,343
Net Cash used in operating activities	(3,923,925)
Cash flows from investing activities	
Proceeds from sale of Investments	11,000,000
Purchase of Investments	 (5,007,204)
Net Cash used in investing activities	 5,992,796
Net Increase in Cash and Cash Equivalents	2,068,871
Cash and Cash Equivalents, Beginning of Year	 7,438,685
Cash and Cash Equivalents, End of Year	\$ 9,507,556

NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Organization and Nature of Activities

The Cardiovascular Medical Research and Education Fund (the Fund) is a non-profit organization exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code. The Fund has been established to carry out part of the Nationwide Class Action Settlement Agreement ("Settlement Agreement") with American Home Products Corporation. The Settlement Agreement requires the creation of the Fund to carry out medical research and education related to the treatment and cure of primary pulmonary hypertension, a disease which is nearly always fatal.

Basis of Accounting

The accompanying financial statements have been prepared on the accrual basis of accounting in accordance with generally accepted accounting principles.

Financial Statement Presentation

The Organization is required to report information regarding its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets.

Contributions

Contributions are required to be reported as unrestricted, temporarily restricted, or permanently restricted support depending on the existence and/or nature of any donor restrictions.

Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

Cash and Cash Equivalents

For purposes of the statement of cash flows, the Organization considers all unrestricted highly liquid investments with a maturity of three months or less to be cash equivalents.

NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Income Taxes

The Fund is exempt from federal income taxes under section 501(c)(3) of the Internal Revenue Code (IRC) and, accordingly, has made no provision for federal income taxes in the accompanying financial statements. As a Private Foundation, the Fund is subject to federal excise tax on net investment income as defined by the IRC. The Organization's Federal Exempt Organization Return of Private Foundation for years 2009, 2010 & 2011 are subject to examination by the IRS, generally for three years after they were filed.

NOTE 2 - CONCENTRATION OF CREDIT RISK

The Fund maintains the majority of its cash balances at one financial institution. This account significantly exceeds federally insured limits. Management of the Fund does not believe it is exposed to significant credit risk with this financial institution.

NOTE 3 - SET-ASIDE DISTRIBUTION

The Fund is required to distribute 5% of its net assets to specific projects each year in order to avoid incurring excise tax. Such distributions are recognized at the time that the unconditional promises to give by the Fund are made. The Fund met its requirements with respect to required distributions for the year ended December 31, 2011.

NOTE 4 - INVESTMENTS

Investments in marketable securities are carried at fair value based on quoted prices in active markets (all'level 1 measurements) and consist of the following at December 31, 2011:

Government & Agency Bond		3,019,600
Short-Term Bond Fund		5,857,243
		<u> </u>
Total Investments	\$	8,876,843

Form 8868

(Rev January 2012)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

X If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box • If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870. Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions) For more details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Chanties & Nonprofits Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed) A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number, see instructions Name of exempt organization or other filer, see instructions. Employer identification number (EIN) or Type or THE CARDIOVASCULAR MEDICAL RESEARCH print AND EDUCATION FUND, INC. 05-0579911 File by the Number, street, and room or suite no. If a P O box, see instructions. Social security number (SSN) due date for 510 WALNUT STREET filing your City, town or post office, state, and ZIP code. For a foreign address, see instructions return See instructions PHILADELPHIA, PA 19106-3601 Enter the Return code for the return that this application is for (file a separate application for each return) Application Return Return **Application** Code Code Is For Is For Form 990-T (corporation) 07 01 Form 990 80 Form 990-BL Form 1041-A 02 09 Form 4720 Form 990-EZ 01 Form 990-PF 04 Form 5227 10 Form 6069 11 Form 990-T (sec 401(a) or 408(a) trust) 05 Form 990-T (trust other than above) Form 8870 12 The books are in the care of ► MICHAEL D. FISHBEIN, ESQUIRE Telephone No. ▶ 215 592-1500 FAX No. ▶ . If this is If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) for the whole group, check this box ▶ 🔲 . If it is for part of the group, check this box ▶ 🔲 and attach a list with the names and EINs of all members the extension is for I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time 08/15 , 20 12 , to file the exempt organization return for the organization named above. The extension is for the organization's return for ► X | calendar year 2011 or , 20 ____, and ending tax year beginning If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Change in accounting period 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 0 estimated tax payments made. Include any prior year overpayment allowed as a credit 3b \$ c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS 0 (Electronic Federal Tax Payment System). See instructions. Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions