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SCANNED JUN 1 8 2012

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

Open to Public Inspection

A	For the	2011 calendar year, or tax year beginning and	ending		
В	Check if applicable	C Name of organization		D Employer identifi	cation number
[]	Addre: chang	S CBSET, INC.			
	Name chang	Doing Business As		1 20-4	325286
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone numbe	
	Termir ated	500 SHIRE WAY		781-	541-5555
	Ameno	City or town, state or country, and ZIP + 4		G Gross receipts \$	13,431,985.
	Applic	LEXINGTON, MA 02421		H(a) Is this a group re	etum
	pendir	F Name and address of principal officer.PETER MARKHAM		for affiliates?	Yes X No
		SAME AS C ABOVE		H(b) Are all affiliates inc	cluded? Yes No
		empt status X 501(c)(3) 501(c) ()	or 527	If "No," attach a	list. (see instructions)
		e: NWW.CBSET.ORG		H(c) Group exemption	
		organization: X Corporation Trust Association Other	L Year	of formation: 2006	M State of legal domicile: MA
P	art I	Summary			
ø		Briefly describe the organization's mission or most significant activities CSBE			
Activities & Governance		RESEARCH, EDUCATION, AND ADVANCEMENT OF			
ern	2	Check this box 🕨 🔲 if the organization discontinued its operations or dispo	sed of more	e than 25% of its net a	ssets
õ	3	Number of voting members of the governing body (Part VI, line 1a)		<u>3</u>	3
<u>«</u>	1	Number of independent voting members of the governing body (Part VI, line 1b)		4	0
ies	5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)		<u>5</u>	59
Ξ		Total number of volunteers (estimate if necessary)		6	0
Act		Total unrelated business revenue from Part VIII, column (C), line 12		. <u>7a</u>	0.
_	b	Net unrelated business taxable income from Form 990-T, line 34	 , 	7b	0.
			-	Prior Year	Current Year
θ	8	Contributions and grants (Par VIII, Inna Int CE) VED	<u> </u>	0.	0.
Revenue	9	Program service revenue (Part VIII, Tine 20)		11,678,254.	13,426,585.
Be.		Investment income (Part VIII) Sumn (A), lines 3, 4, and 7d)	_	6,894.	5,400.
		Other revenue (Part VIII, column (A), lines 5, Ed 80 9c, 10c, and 11e)		0.	0.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		11,685,148.	13,431,985.
		Grants and similar amounts paid (Partix column (A), lines (3)		100,135.	173,000.
	1	Benefits paid to or for members (Part IX, column (A) life 4)	-	0.	5 020 600
Expenses	15	Salaries, other compensation, employee benefits (Part X-column (A), lines 5-10)	-	4,165,543.	5,028,690.
)en	16a	Professional fundraising fees (Part IX, column (A), line 11e)	, <u> </u>	0.	0.
X	47	Total fundraising expenses (Part IX, column (D), line 25)	<u> </u>	7,298,493.	6,637,107.
	1	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		11,564,171.	11,838,797.
		Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 18 from line 12	-	120,977.	1,593,188.
Z e	13	revenue less expenses. Subtract line 16 from line 12	-		
ets	20	Total assets (Part X, line 16)	ь	eginning of Current Year 5,272,885.	End of Year 6,312,764.
Ass	21	Total liabilities (Part X, line 26)		3,839,343.	3,286,034.
Net Assets or Fund Balances	22	Net assets or fund balances Subtract line 21 from line 20		1,433,542.	3,026,730.
P	art II	Signature Block	<u> </u>		3,020,1300
Und	er pena	ties of perjury, I declare that I have examined this return, including accompanying schedule	es and statem	nents, and to the best of m	ov knowledge and belief, it is
		t, and complete. Declaration of preparer (other than officer) is based on all information of w			,,
	•		0		
Sig	n	Signature of officer	U_{Δ}	Date /7	7
Hei		PETER MARKHAM, PRESIDENT	\checkmark	<u> </u>	//2
		Type or print name and title			
		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Paid	t	JOYCE M. CHRISTENSEN JOYCE M. CHRIST	ENSEN	5/1/12 sett-employ	P00175682
Pre	parer	Firm's name SHARKANSKY LLP		Firm's EIN	04-2602838
Use	Only	Firm's address 1350 BELMONT STREET			
		BROCKTON, MA 02301		Phone no. (508) 584-2120
Ma	y the IF	S discuss this return with the preparer shown above? (see instructions)		••••	X Yes No
	01 01-2	-	ons.		Form 990 (2011)

	n 990 (2011) CBSET, INC.	20-4325286	Page 2
Pa	art III Statement of Program Service Accomplishmen	is	
	Check if Schedule O contains a response to any question in thi	s Part III	X
1	Briefly describe the organization's mission:	, , , , , , , , , , , , , , , , , , ,	
-	CBSET INC.'S MISSION IS TO HELP OU	S SPONSORS DEVELOP INTOITE TOOLS AN	m
	NOVEL METHODS TO PROMOTE EARLY DIA		<u></u>
	TREATMENTS FOR COMPLEX DISEASES. C		
	AND APPLICATION OF NOVEL MINIMALLY		<u>;</u>
2	Did the organization undertake any significant program services durir		
	the pnor Form 990 or 990-EZ?	☐ Yes [X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes i	n how it conducts, any program services?	X No
•	If "Yes," describe these changes on Schedule O.	riow it conducts, any program services:	AL 140
_			
4	Describe the organization's program service accomplishments for ear		
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) to		
	others, the total expenses, and revenue, if any, for each program sen		
4a	(Code) (Expenses \$ 9,685,993. including gran	ts of \$ 173,000 •) (Revenue \$13,426,5	·85.)
	CBSET, INC., FOCUSES ITS RESEARCH		
	THERAPEUTIC, SURGICAL MEDICAL DEVICE		IN
	THE DIAGNOSIS AND TREATMENT OF DIS		
			<u> </u>
	SCIENCE AND EDUCATION, IMPROVE REGU		
	METHODS, AND ULTIMATELY IMPROVE DI	AGNOSIS, PATIENT CARE, AND TREATMENT	OF
	DISEASE.		
4b	(Code) (Expenses \$ including gran	s of \$) (Revenue \$)
		 	
	-		
4c	(Code) (Expenses \$ including gran	s of \$) (Revenue \$)
		· · · · · · · · · · · · · · · · · · ·	
			
4d	Other program services (Describe in Schedule O)		_
	(Expenses \$ including grants of \$) (Revenue \$	
4e	Total program service expenses ▶ 9,685,993.		
	3,000,1330.	Form 99 0	1 (2011)
13200. 02-09-		romi 354	- (2011)

Form 990 (2011) CBSET, INC.
Part IV Checklist of Required Schedules

1 Is the organization described in section 501(k)(s) or 4947(k)(1) (other than a private foundation)? 1		ı		Yes	No
2 is the organization required to complete Schedule 6, Schedule of Contribution? Did the organization engage in direct or indirect or public office? If 'Yes, 'complete Schedule C, Part I' Section 501(c) granizations. Did the organization engage in lobbying activities, or have a section 501(fi) election in effect during the tax year? If 'Yes, 'complete Schedule C, Part II' Is the organization a section 501(c)(d). 501(c)(5), or 501(c)(6), or 501	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
3 X Section 501(c)(3) organizations. Did the organization engage in tobbying activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I 'Section 501(c)(3) organizations. Did the organization engage in tobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II 'Section 501(h) organization assettion 501(h)(4), 501(c)(6), 601(c)(6),	_			X	77
Section 501(6)3 organizations. Dot the organization engage in lobbying activities, or have a section 501(h) electron in effect during the tax year? If "Yes," complete Schedule C, Part II sit the organization a section 501(c)(d),			2_		<u>X</u> _
4 X Section 501(c)(3) organizatione. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? if 1"6s, complete Schedule C, Part III S 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 "7es," complete Schedule C, Part III D did the organization mannia may conor advised funds or any similar funds or accounts for which 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 III D did the organization research or hold a conservation easement, including assements to preserve open space, the environment, historic land areas, or historic structure? If "Yes," complete Schedule D, Part III D 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 III D did the organization directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments If "Yes," complete Schedule D, Part VIII If the organization report an amount for liand, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VIII D did the organization report an amount for restiments - other securities in Part X, line 19? If "Yes," complete Schedule D, Part VIII D did the organization report an amount for investments - other securities in Part X, line 19? If "Yes," complete Schedule D, Part XIII D did the organization report an amount for investments - other securities in Part X, line 19? If "Yes," complete Schedule D, Part XIII D did the organization report an amount for investments - other securities in Part X, line 19? If "Yes," complete Schedule D, Part XIIII D did the organization is about for	3				٠,
dump the tax year? If "Yes," complete Schedule C, Part II Is the organization a section Soft(e)(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 Did the organization maintain any donor advised funds or any similar funds or accounts for which 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 III 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 III Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not Issted in Part X, or provide credit counseling, doe'nt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI Did the organization report an amount for investments other securities in Part X, line 10? If "Yes," complete Schedule D, Part XII Did the organization report an amount for investments other securities 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 XII Did the organization report an amount for other liabilities 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 XIII Did the organization report an amount for other liabilities 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 X XIII Did the organization report an amount for other liabilities in Part X			3		_ <u>x</u> _
5 is the organization a section \$01(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or smilar amounts as defined in Revenue Procedure 98:192 if "Yes," complete Schedule C, Part III 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the night to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II 7 Did the organization report and areas, or histone structure? If "Yes," complete Schedule D, Part III 8 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not bised in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quase-redowments? If "Yes," complete Schedule D, Part V 11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V II 12 Did the organization report an amount for investments - program related in Part X, line 10? If "Yes," complete Schedule D, Part V III 2 Did the organization report an amount for orbit assets 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 V III 2 Did the organization report an amount for orbit assets 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 X III 3 Did the organization report an amount for orbit assets 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 X III 4 Did the organization report an amount for orbit assets in Part	4				v
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6 Det the organization maintain any donor advised funds or asy similar funds or accounts? If Yes, "complete Schedule D, Part I I Det 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 Det 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 III. 8 Det 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 negotation services? If Yes," complete Schedule D, Part IV. 10 Det the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If Yes," complete Interest is the organization directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If Yes," complete Schedule D, Part IV. 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If Yes," complete Schedule D, Part VIII. 11 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 XIII. 12 Did the organization report an amount for other liabilities 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 XIII. 13 Did the organization report an amount for other liabilities 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 XIII. 14 Did the organization report an amount for other liabilities in Part X, line 15 that is 5 that is 5% or more of its total assets reported i	5		_		
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7 Dut 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 III. 8 Dut the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III. 9 Dut the organization of part III. 10 Dut the organization of debt management, credit repair, or debt negotation services? If "Yes," complete Schedule D, Part IV. 10 Dut the organization directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V. 11 If the organization services or of the following questions is "Yes," then complete Schedule D, Part V. 12 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VIII. 13 Dut the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of ris total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. 14 Dut the organization report an amount for investments be comparare related in Part X, line 13 that is 5% or more of ris total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XIII. 15 Dut the organization report an amount for other liabilities in Part X, line 15 that is 5% or more of ris total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XIII. 16 Dut the organization report an amount for other liabilities in Part X, line 15 that is 5% or more of ris total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XIII. 17 Dut the organization report an amount for other liabilities in Part X, line 15 that is 5% or more of ris total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XIII. 18 Dut the organization included in accidated, independent audited financial st	O		6		x
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8 Dit the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 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 negotation services? If "Yes," complete Schedule D, Part IV Did the organization debt management, credit repair, or debt negotation services? If "Yes," complete Schedule D, Part VI Did the organization and saves to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII b Did the organization report an amount for investments other securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII c 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 VIII c Did the organization report an amount for investments or program related in Part X, line 16? If "Yes," complete Schedule D, Part VIII c Did the organization report an amount for other lassifies 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 VIII c Did the organization is exparate or consolidated financial statements for the tax year molude a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X, IX, IX, and XIII b Was the organization and should in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X, IX, IX, and XIII b Was the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundrassing, business, investment, and program service a	•		7		x
Schedule D, Part III 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 10 Did the organization, directly or through a related organization, hold assets in temporanly restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part VI 11 If the organization is answer to any of the following questions is "Yes," then complete Schedule D, Part VI, if the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII 12 Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII 13 Did the organization report an amount for investments - other securities 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 14 Did the organization report an amount for other assets 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 15 Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X 16 Did the organization in export an amount for other hisbilities in Part X, line 25? If "Yes," complete Schedule D, Part X 17 Did the organization in separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X 18 Did the organization in All III and II	R		'		
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10 Did the organization, directly or through a related organization, hold assets in temporanly restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V I If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IVI, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI I 11a X I Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII I 11b X I 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 I 11b X I 11	-		9		х
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	<u>b</u>	It "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		000	(0044)

Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 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	X	
24 a	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 through 24d and complete			
	Schedule K If "No", go to line 25	24a		X
	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	L	
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
2 5a	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	ļ	X
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	1		
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			,,
07	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	_26_	 -	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
28	of any of these persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	27	<u> </u>	X
20	instructions for applicable filing thresholds, conditions, and exceptions).			
а	A contract of the contract of	28a		X
b		28b	X	
c		200	Α.	
·	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	23		
	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		x
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	:	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
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		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	<u> </u>	X_
b	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	35b		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36	L	X
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	ļ	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note, All Form 990 filers are required to complete Schodule O	I an '	v	1

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	Check if Schedule O contains a response to any question in this Part V			لـــا
1.	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		Yes	No
la b	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 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			
Č	(gambling) winnings to prize winners?	1c	X	
)a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 59			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	x	İ
_	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		x
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
la	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.			l
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a		Х
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 services provided to the payor?	7a		X
b	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		ľ	
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	ļ	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	79_		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	ļ <u>.</u>	-
3	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting		ŀ	
_	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?	<u>9a</u>		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		<u> </u>
0	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12	}		
b 1	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
1	Section 501(c)(12) organizations. Enter. Gross income from members or shareholders			
a	Gross income from members or shareholders 11a 11a 11a 11a 11a 11a 11a 11a	1		
b				
22	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	120		1
3	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
a	Is the organization licensed to issue qualified health plans in more than one state?	13a		\vdash
u	Note. See the instructions for additional information the organization must report on Schedule O.	134	 	\vdash
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			
		ł	l	
С	Enter the amount of reserves on hand			1
c la	Enter the amount of reserves on hand	14a		x

Par	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a	"No" n	espon	se
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions			
500	Check if Schedule O contains a response to any question in this Part VI	· · ·		X.
Sec	tion A. Governing Body and Management	<u> </u>		
12	Enter the number of voting members of the governing body at the and of the tay year		Yes	No
14	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b			
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		Х
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		X _
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		<u>x</u> _
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	_	<u>x</u> _
6	Did the organization have members or stockholders?	6		<u>x</u>
-	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		x
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	<u> </u>		
	persons other than the governing body?	7b	ľ	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
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		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	_		
-			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			<u> </u>
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			1
	ın Schedule O how this was done	12c	<u> </u>	X
13	Did the organization have a written whistleblower policy?	13	<u></u>	X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent	ļ	,	
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	<u> </u>
b	Other officers or key employees of the organization	15b	X	ļ
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			l
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		X
þ	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	ın joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b	L	
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►MA			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) and 990-T (Section 501(c)(3)s only) and 990-T (Section 501(c)(3)s only) are section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) are section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) are section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) are section 6104 if applicable (section 501(c)(3)s only) are section 6104 if applicabl	availab	le	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finar	ncial	
	statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	tion:		
	PETER MARKHAM - 781-541-5564			
132006	500 SHIRE WAY, LEXINGTON, MA 02421		000	
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- 1 1 m -			 	

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 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

(A) Name and Title	(B) Average hours per week	Average Position (do not check more box, unless person is					n an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) PETER MARKHAM	40.00							350 000		06 004
PRES/EXEC DIR	40.00	X		X				350,229.	0.	26,984
(2) ADAM GROOTHUIS	40.00	X	ļ	х				270 007	0.	29,889
VP/TREAS/CLERK	40.00 AS	^	-	Δ				270,087.	U •	49,009
(3) ELAZER EDELMAN DIRECTOR	REQUIRED	x						187,500.	0.	0
(4) JOHN KEATING	40.00				X			155.005		14 500
PATHOLOGIST	40.00	_	-	-	 	ļ		156,986.	0.	14,592
(5) JAMES STANLEY PATHOLOGIST	40.00				x			191,309.	0.	26,543
(6) LYNN BAILEY	10.00	 -						252,305.	<u> </u>	20,010
INTERVENTIONALIST	40.00				x	ł		155,785.	0.	14,045
(7) ELIZABETH THEVE										
VETERINARIAN	40.00		_	L		X		139,494.	0.	20,121
(8) DANIEL HOWELL										
SALES MANAGER	40.00	_	_	<u> </u>		X		146,422.	0.	23,910
(9) BRETT ZANI STUDY DIRECTOR	40.00					x		113,738.	0.	18,956
(10) ALAN LAROCHELLE	40.00	\vdash	-	_	-	<u> </u>		113,730.		10,550
STUDY DIRECTOR	40.00			:		x		130,105.	0.	15,998
(11) KIMBERLY LESIW										
OFFICE MANAGER	40.00					X		131,540.	0.	6,288
		_				-				<u>.</u>
		-								
					<u> </u>	L				Form 990 (201

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

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\$100,000 of compensation from the organization

Part JX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

Dο	Check if Schedule O contains a response not include amounts reported on lines 6b,		(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	173,000.	173,000.		
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	864,370.	615,901.	248,469.	
6	Compensation not included above, to disqualified	ì			
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	3,362,826.	2,774,303.	588,523.	
8	Pension plan accruals and contributions (include				
	section 401(k) and section 403(b) employer contributions) .	92,809.	76,678.	16,131.	
9	Other employee benefits	415,663.	332,542.	83,121.	
0	Payroll taxes	293,022.	231,487.	61,535.	
1	Fees for services (non-employees).				
а	Management				
b	Legal .	1,639.		1,639.	
С	Accounting	20,396.		20,396.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				
2	Advertising and promotion				
13	Office expenses	48,377.	38,218.	10,159.	
4	Information technology				
15	Royalties				
16	Occupancy	1,691,964.	1,336,652.	355,312.	
7	Travel	87,329.	68,990.	18,339.	
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	31,143.		31,143.	
0	Interest	131,554.		131,554.	
1	Payments to affiliates				
2	Depreciation, depletion, and amortization	960,928.	734,374.	226,554.	<u> </u>
3	Insurance	81,348.	64,265.	17,083.	
4	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line				
	24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
_	SUPPLIES	1,595,133.	1 504 257	10 076	
	OUTSIDE SERVICES		1,584,257.	10,876.	- -
b		1,019,176.	1,019,176.	40 145	
C	EQUIPMENT SERVICE CONTR CONSULTING	234,024.	184,879.	49,145.	
d		224,293.	133,975.	90,318.	
	All other expenses Add lines 1 through 24s	509,803.	317,296.	192,507.	
<u>5</u>	Total functional expenses. Add lines 1 through 24e	11,838,797.	9,685,993.	2,152,804.	
6	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.	ł			
	Check here if following SOP 98-2 (ASC 958-720)				Form 990 (20

Par	tX]	Balance Sheet				
			Ве	(A) ginning of year		(B) End of year
	1	Cash - non-interest-bearing			1	
	2	Savings and temporary cash investments		506,241.	2	511,642.
	3	Pledges and grants receivable, net			3_	
	4	Accounts receivable, net		<u>,305,645.</u>	4	3,999,831.
	5	Receivables from current and former officers, directors, trustees, key				
		employees, and highest compensated employees. Complete Part II			İ	
		of Schedule L			5	
	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				
m		employees' beneficiary organizations (see instructions)			_6_	
Assets	7	Notes and loans receivable, net		1,148.	7	0.
As	8	Inventones for sale or use			8	
	9	Prepaid expenses and deferred charges		217,777.	9	286,666.
	10a	Land, buildings, and equipment cost or other				
		basis. Complete Part VI of Schedule D . 10a 4,951,1	23.			
	ь	Less accumulated depreciation . 10b 3,468,0	76.	2,133,654.	10c	1,483,047.
	11	Investments - publicly traded securities			11	
	12	Investments - other securities. See Part IV, line 11			12	
	13	Investments - program-related. See Part IV, line 11			13	_
	14	Intangible assets	. [14	
	15	Other assets. See Part IV, line 11		108,420.	15	31,578.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	Ţ.	5,272,885.	16	6,312,764.
	17	Accounts payable and accrued expenses		1,010,563.	17	897,051.
	18	Grants payable			18	
	19	Deferred revenue	_	406,488.	19	373,100.
	20	Tax-exempt bond liabilities			20	
စ္	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
ij	22	Payables to current and former officers, directors, trustees, key employees	3,			
Liabilities		highest compensated employees, and disqualified persons. Complete Part of Schedule L	ED .		22	
	23	Secured mortgages and notes payable to unrelated third parties		2,422,292.	23	2,015,883.
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third				
		parties, and other liabilities not included on lines 17-24). Complete Part X of	ıf			
		Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		3,839,343.	26	3,286,034.
		Organizations that follow SFAS 117, check here				
S		lines 27 through 29, and lines 33 and 34.				
nce	27	Unrestricted net assets		1,433,542.	27	3,026,730.
ala	28	Temporanly restricted net assets			28	
d B	29	Permanently restricted net assets			29	_
5		Organizations that do not follow SFAS 117, check here	1			
P.		complete lines 30 through 34.				
ts	30	Canital stock or trust principal or current funds			30	
SSE	31	Paid-in or capital surplus, or land, building, or equipment fund			31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds		·	32	
Š	33	Total and annual autimated belongs		1,433,542.		3,026,730.
	34	Total liabilities and net assets/fund balances		5,272,885.		6,312,764.
			<u> </u>	,, ,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , , , ,	Form 990 (2011)

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Par	rt XI Reconciliation of Net Assets							
	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 13	,43	1,9	<u>85.</u>			
2	2 Total expenses (must equal Part IX, column (A), line 25)							
3	Revenue less expenses. Subtract line 2 from line 1	3 1	,59	3,1	88.			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4 1	,43	3,5	<u>42.</u>			
5	Other changes in net assets or fund balances (explain in Schedule O)	5			0.			
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 3	,02	6,7	<u>30.</u>			
Pai	rt XII Financial Statements and Reporting	_						
	Check if Schedule O contains a response to any question in this Part XII .	•			\mathbf{x}			
				Yes	No			
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				•			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u>X</u>			
b	Were the organization's financial statements audited by an independent accountant?		2b	X				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,						
	review, or compilation of its financial statements and selection of an independent accountant?		2c	_X_				
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O.						
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued	t on a	İ		,			
	separate basis, consolidated basis, or both							
	X Separate basis Consolidated basis Both consolidated and separate basis							
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	igle Audit	ŀ					
	Act and OMB Circular A-133?		3a		X			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit						
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b					
			Form	990 (2011)			

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

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

Open to Public Inspection

Employer identification number Name of the organization 20-4325286 CBSET, INC Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 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 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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. **b** Type II c ___ Type III - Functionally integrated d ____ 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? g (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the 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) Provide the following information about the supported organization(s). h (iii) Type of (vi) Is the (iv) Is the organization (v) Did you notify the (i) Name of supported (vii) Amount of (ii) EIN organization in col. organization organization in col. in col. (i) listed in your organization support (i) organized in the (described on lines 1-9 governing document? (i) of your support? U.S.? above or IRC section (see instructions)) Yes Yes Yes LHA For Paperwork Reduction Act Notice, see the Instructions for

132021 01-24-12

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2011

Schedule A (Form 990 or 990-EZ) 2011 Page 2 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) Section A. Public Support Calendar year (or fiscal year beginning in) (d) 2010 (f) Total (a) 2007 (b) 2008(c) 2009 (e) 2011 1 Gifts, grants, contributions, and membership fees received. (Do not include 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 4 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 line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total 7 Amounts from line 4 8 Gross income from interest. 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, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 14 15 Public support percentage from 2010 Schedule A, Part II, line 14 15 16a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box

Schedule	A (Forn	n 990 or	990-EZ)	201

and stop here. The organization qualifies as a publicly supported organization

17a 10% -facts-and-circumstances test - 2011, If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization

b 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2011 CBSET, INC. Part JII | 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

	Public Support	low, please compl	iete Part II.)				
	r fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	ts, contributions, and	(8) 2007	(6) 2000	(6) 2005	(u) 2010	(e) 2011	(i) rotai
_	ip fees received. (Do not		İ				
	y "unusual grants.")	1,009,291	61,307.	47,700.			1,118,298.
	eipts from admissions,	1,009,291,	01,307.	47,700.			1,110,290.
merchand formed, or any activit	se sold or services per- facilities furnished in y that is related to the on's tax-exempt purpose	7,130,343.	7,495,356.	8,821,017.	11,678,254,	13,276,701,	48,401,671 .
	eipts from activities that						
	unrelated trade or bus-						
	er section 513						
	ies levied for the organ-						
	enefit and either paid to						
•	ed on its behalf						
_	of services or facilities						
	oy a governmental unit to zation without charge			_			
6 Total. Add	l lines 1 through 5	8,139,634.	7,556,663.	8,868,717.	11,678,254.	13,276,701.	49,519,969,
	ncluded on lines 1, 2, and	l					
3 received	from disqualified persons	1,009,291.	61,307.				1,070,598.
from other that exceed the gre	ided on lines 2 and 3 received in disqualified persons that eater of \$5,000 or 1% of the eater of the year						0.
c Add lines	· · · · · · · · · · · · · · · · · · ·	1 009 291.	61,307.				1 070 598
	oport (Subtract line 7c from line 6)	1,009,291	01,307.	-			48,449,371,
	Total Support						48,449,371.
	r fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts f		8,139,634.	7,556,663,	8,868,717.	11,678,254.	13,276,701.	49,519,969
10a Gross inco dividends,	ome from interest, payments received on	0,133,034,	7,330,003,	0,000,717,	11,070,234,	13,270,701.	40,010,000
	loans, rents, royalties e from similar sources	40,939.	34,318.	22,831.	6,894.	5,400.	110,382.
b Unrelated b	usiness taxable income						
•	n 511 taxes) from businesses						
acquired aft	er June 30, 1975						
c Add lines) -	40,939.	34,318.	22,831.	6,894.	5,400.	110,382.
activities n	e from unrelated business of included in line 10b, ont the business is arried on						
or loss from	me. Do not include gain n the sale of capital plain in Part IV)						
	If (Add lines 9, 10c, 11, and 12)	8,180,573,	7,590,981.	8 891 548	11,685,148.	13,282,101.	49 630 351,
14 First five	years. If the Form 990 is for	the organization's	first, second, third	I, fourth, or fifth ta	x year as a section	n 501(c)(3) organiz	ation,
check this	box and stop here						▶□
Section C. (Computation of Public	c Support Per	centage				
15 Public sup	port percentage for 2011 (lii	ne 8, column (f) dr	vided by line 13, co	olumn (f))		15	97.62 %
16 Public sup	port percentage from 2010	Schedule A, Part I	III, line 15			16	%
Section D. 0	Computation of Inves	tment Income	Percentage				
17 Investmen	t income percentage for 20°	11 (line 10c, colum	nn (f) divided by line	e 13, column (f))		17	.22 %
18 Investmen	t income percentage from 2	010 Schedule A, F	Part III, line 17			18	%
19a 33 1/3% s	upport tests - 2011. If the	organization did ne	ot check the box o	n line 14, and line	15 is more than 3	3 1/3%, and line 1	7 is not
	33 1/3%, check this box an						▶\
b 33 1/3% s	upport tests - 2010. If the out more than 33 1/3%, chec	organization did ne	ot check a box on	line 14 or line 19a	, and line 16 is mo	re than 33 1/3%,	. —
	undation. If the organization						· · · · 【片
		or room a b	· · · · · · · · · · · · · · · ·				

Schedule A (Form 990 or 990-EZ) 2011

132023 01-24-12

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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions. 2011
Open to Public Inspection

Name of the organization

Employer identification number

	CBSET, INC.	_				<u>0-43252</u>	
Pa	t I Organizations Maintaining Donor Advis	ed Funds o	r Other Sim	ilar Funds or	Accounts.	Complete if the	ne
	organization answered "Yes" to Form 990, Part IV, III	ne 6.					
			nor advised fu	nds	(b) Funds and	other accou	ints
1	Total number at end of year		-		<u> </u>		
2	Aggregate contributions to (during year)						
			 				
3	Aggregate grants from (dunng year)						
4	Aggregate value at end of year						
5	Did the organization inform all donors and donor advisors in	n writing that th	e assets held i	n donor advised f	unds		
	are the organization's property, subject to the organization'	's exclusive lega	al control?			Yes	└ No
6	Did the organization inform all grantees, donors, and donor	advisors in writ	ing that grant	funds can be use	d only		
	for charitable purposes and not for the benefit of the donor	or donor advis	or, or for any o	ther purpose con	fernng		
	impermissible private benefit?					Yes	☐ No
Pa	t II Conservation Easements. Complete if the o	organization ans	wered "Yes" to	Form 990, Part	IV, line 7		
1	Purpose(s) of conservation easements held by the organiza				·		=
	Preservation of land for public use (e.g., recreation or	•	<u> </u>	ation of an historic	cally important l	and area	
	Protection of natural habitat	oddodiion,		ation of a certified	-		
	Preservation of open space		1 1030146	nion of a certified	Thistoric structe	, i c	
2	·						
2	Complete lines 2a through 2d if the organization held a qua	umed conservat	ion contributio	n in the form of a	conservation e	asement on t	ne last
	day of the tax year.						
					Held a	t the End of th	e Tax Year
а	Total number of conservation easements				2a		
þ	Total acreage restricted by conservation easements				2b		
С	Number of conservation easements on a certified historic s		• •		2c		
d	Number of conservation easements included in (c) acquired	d after 8/17/06,	and not on a h	nistoric structure			
	listed in the National Register			•	2d		
3	Number of conservation easements modified, transferred, r	released, exting	uished, or tern	ninated by the org	janization durin	g the tax	
	year ▶						
4	Number of states where property subject to conservation e	asement is loca	ated >				
5	Does the organization have a written policy regarding the p	eriodic monitori	na, inspection	. handling of			
	violations, and enforcement of the conservation easements			•		Yes	☐ No
6	Staff and volunteer hours devoted to monitoring, inspecting	a, and enforcing	conservation	easements during	the vear ►		
7	Amount of expenses incurred in monitoring, inspecting, and						
8	Does each conservation easement reported on line 2(d) abo			_			-
	and section 170(h)(4)(B)(ii)?		044		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Yes	□ No
9	In Part XIV, describe how the organization reports conserva	 ation essements		and expense eta	 tomont and ha		
•	include, if applicable, the text of the footnote to the organiz						
	conservation easements	ation S illiancia	i staternerits tr	iai describes ine	organization's a	eccounting to	ır
Pai	t III Organizations Maintaining Collections	of Art Histo	rical Treas	ures or Othe	r Similar As	cote	
	Complete if the organization answered "Yes" to Form			ures, or Oure	i Sililiai As	3 0 13.	
		·					
12	If the organization elected, as permitted under SFAS 116 (A						
	historical treasures, or other similar assets held for public ex			ch in furtherance	of public service	e, provide, in	Part XIV,
	the text of the footnote to its financial statements that desc						
Ь	If the organization elected, as permitted under SFAS 116 (A						
	treasures, or other similar assets held for public exhibition,	education, or re	esearch in furth	erance of public	service, provide	the following	g amounts
	relating to these items:						
	(i) Revenues included in Form 990, Part VIII, line 1				▶ \$		
	(ii) Assets included in Form 990, Part X				▶ \$		
2	If the organization received or held works of art, historical tr	reasures, or oth	er sımılar asse	ts for financial gai			
	the following amounts required to be reported under SFAS	116 (ASC 958)	relating to the	se items.			
а	Revenues included in Form 990, Part VIII, line 1	-		_	▶ \$		
b	Assets included in Form 990, Part X	•		-	▶ \$		
	·	•••		•••••	· · · · —		

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Schedule D (Form 990) 2011

	dule D (Form 990) 2011 CBSET,							4325286 Page 2
Par	t III Organizations Maintaining C	ollections of A	rt, Historic	cal Tre	easures, c	or Othe	er Similar A	ssets (continued)
3	Using the organization's acquisition, accession	on, and other record	ls, check any	of the f	ollowing tha	t are a s	ignificant use o	f its collection items
	(check all that apply).							
а	Public exhibition	d	I 🔲 Loan	or exch	ange progra	ams		
b	Scholarly research	e	Othe	r				
С	Preservation for future generations							
4	Provide a description of the organization's co	illections and explai	n how they fu	urther th	e organizati	on's exe	mpt purpose in	Part XIV
5	During the year, did the organization solicit or	receive donations	of art, historic	cal treas	ures, or oth	er sımıla	r assets	
	to be sold to raise funds rather than to be ma							Yes No
Par	t IV Escrow and Custodial Arrang	gements. Compl	ete if the orga	anızatıor	n answered	"Yes" to	Form 990, Part	IV, line 9, or
	reported an amount on Form 990, Par	t X, line 21.						
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for cont	nbutions	s or other as	sets not	ncluded	
	on Form 990, Part X?							Yes No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing table	:			<u> </u>	
								Amount
С	Beginning balance	•					1c	
ď	Additions during the year	•					1d	
e	Distributions during the year						1e	
f	Ending balance .						1f	
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?					Yes No
	If "Yes," explain the arrangement in Part XIV							
Par	t V Endowment Funds. Complete r	the organization ar	nswered "Yes	to For				
		(a) Current year	(b) Prior	year	(c) Two year	rs back	(d) Three years t	oack (e) Four years back
1a	Beginning of year balance							
b	Contributions							
С	Net investment earnings, gains, and losses							
d	Grants or scholarships							
е	Other expenditures for facilities							
	and programs							
f	Administrative expenses							
g	End of year balance							<u>.=</u>
2	Provide the estimated percentage of the curr	ent year end baland	ce (line 1g, co	olumn (a)) held as:			
а	Board designated or quasi-endowment		_%					
Ь	Permanent endowment	%						
C	Temporarily restricted endowment ▶	%						
	The percentages in lines 2a, 2b, and 2c should	ld equal 100%.						
3a	Are there endowment funds not in the posse	ssion of the organiz	ation that are	e held ar	nd administe	ered for t	the organization	·
	by							Yes No
	(i) unrelated organizations							3a(i)
	(ii) related organizations							3a(ii)
b	If "Yes" to 3a(ii), are the related organizations	· ·						3b
4 Door	Describe in Part XIV the intended uses of the							
Par			ı					T
	Description of property	(a) Cost or o	1 .		or other		ccumulated	(d) Book value
		basis (investi	ment)	basis (omer)	ae	preciation	
	Land							
Ь	Buildings	.					424 225	0.
С	Leasehold improvements	930,					<u>431,332.</u>	499,591.
d	Equipment	4,020,	200.			3,	036,744.	983,456.
	Other							0.
Total.	. Add lines 1a through 1e. (Column (d) must e	aual Form 990. Part	X. column (E	3), line 1-	0(c))		•	1,483,047.

Schedule D (Form 990) 2011

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c))

Schedule D (Form 990) 2011 CBSET, INC Part VII Investments - Other Securities. S		2.	20-4325286 Page 3
(a) Description of security or category (including name of security)	(b) Book value	(c) Meth	nod of valuation: of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)	<u> </u>		
(F)			
(G)			
(H)			
(1)			
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)	<u>.l.,</u>	<u> </u>	
Part VIII Investments - Program Related.	See Form 990, Part X, line		
(a) Description of investment type	(b) Book value		hod of valuation -of-year market value
(1)			
(2)			
(3)			
(4)		-	
(5)			
(6)	==	-	
		<u> </u>	
(8)			<u> </u>
(9)			
(10)		-	
Total (Col (b) must equal Form 990, Part X, col (B) line 13.) ► Part IX Other Assets. See Form 990, Part X, Iir	 no.15		
	a) Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)		. =	
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, col (B) II	ne 15)		<u> </u>
Part X Other Liabilities. See Form 990, Part X	X, line 25		
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
(11)			
Total. (Column (b) must equal Form 990, Part X, col (b) In FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote 2. FIN 48 (ASC 740).	ne 25)	ments that reports the organization's lie	hility for uncertain tax positions under
2. FIN 48 (ASC 740) Footnote in Part XIV, provide the text of the footnote	To the organization 5 illiancial State	smanta macreporta me organization s na	winty for united task positions united

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Sche	dule D (Form 990) 2011 CBSET, INC.		20-4325286 Page 4
Par	rt XI Reconciliation of Change in Net Assets from Form 99	0 to Audited Financial Sta	tements
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	13,431,985.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	11,838,797.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	1,593,188.
4	Net unrealized gains (losses) on investments	. 4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net) Add lines 4 through 8	9	
10 Par	Excess or (deficit) for the year per audited financial statements. Combine lines rt XII. Reconciliation of Revenue per Audited Financial State		1,593,188. Return
1	Total revenue, gains, and other support per audited financial statements		1 13,431,985.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
С	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
е	Add lines 2a through 2d		2e 0.
3	Subtract line 2e from line 1		3 13,431,985.
4	Amounts 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 0.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5 13,431,985.
Pa	rt XIII Reconciliation of Expenses per Audited Financial Sta	tements With Expenses po	
1	Total expenses and losses per audited financial statements		1 11,838,797.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1	
а	Donated services and use of facilities		
b	Prior year adjustments	2b	
С	Other losses	2c	<u> </u>
d	Other (Describe in Part XIV.)	2d	
е	Add lines 2a through 2d	-	2e U.
3	Subtract line 2e from line 1		<u>3</u> 11,838,797.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1.1	i t
a	•	4a	⊣ i
b	Other (Describe in Part XIV.)		- 4c 0 .
_C	Add lines 4a and 4b		5 11,838,797.
Pa:	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIV Supplemental Information		9 11,030,737.
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; I	Part III, lines 1a and 4; Part IV, lines	s 1b and 2b; Part V, line 4; Part
	e 2; Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also		

SCHEDULE 1 (Form 990) Department of the Treasury Internal Revenue Service

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

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

Open to Public OMB No 1545-0047 Inspection

% ⊠ **Employer identification number** 20-4325286 DISCRETIONARY RESEARCH (h) Purpose of grant or assistance Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any FUND recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed in additional space is needed (i) Method of valuation (book, recash assistance of societies). 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 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 173,000 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 501(C)(3) Enter total number of other organizations listed in the line 1 table 04-3299490 General Information on Grants and Assistance criteria used to award the grants or assistance? 1 (a) Name and address of organization CENTER FOR BIOMEDICAL SCIENCE & ENGINEERING TRUST - 30 WARREN STREET - BROOKLINE, MA 02445 Name of the organization Partl Part II

Schedule I (Form 990) (2011)

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2011)

21

132102 01-27-12

Page 2

20-4325286

CBSET,

Schedule I (Form 990) (2011)

SCHEDULÈ J (Form 990)

Compensation Information

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

➤ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

es" to Form 990,

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

CBSET

INC.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Employer identification number 20 – 4325286

OMB No 1545-0047

Pa	rrt I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
þ	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		<u> </u>
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director. Explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			1
7	organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.		Ì	
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of			
а	The organization?	_5a_		X
b	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	1		
	contingent on the net earnings of:			
а	The organization?	6a		X
b	Any related organization?	6b	ļ	X
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7	-	X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8_	_	X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9		

132111 01-23-12 Schedule J (Form 990) 2011

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of \	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C)	(a)	(E)	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	reported as deferred in prior Form 990
	E	299,999.	50,000.	230.	0.	26,984.	377,213.	0
1 PETER MARKHAM	<u> </u>		0	0	0	ł	0	0
	ε	239,99	30,000.	90.	0	29,889.	299,976.	0.
2 ADAM GROOTHUIS	3			0	0.	0.	0	0
	ε	187,500.	0.	0.	0.	0.	187,500.	0.
3 ELAZER EDELMAN	€	0	0	0	0	0		0.
	ε	150,000.	6,886.	100.	0	14,592.	171,578.	0.
4 JOHN KEATING	(ii)		0	0	0	0		
	ε	171,15	20,000.	150.	0	26,543.	217,852.	
5 JAMES STANLEY	(ii)		0.	0.	0	0		
	ε	149,635.	9,000.	150.	0	14,045.	169,83	0.
6 LYNN BAILEY	(ii)		0.	0.	0.	0		0
	ε	131,	8,000.	100.	0	20,121.	159,61	0.
7 ELIZABETH THEVE	(ii)	0	0	0.	0	1		0
	Ξ	80,000.	59,162.	7,260.	0	23,910.	170,332.	0
8 DANIEL HOWELL	⊞	0	0	0	0	0	0	0
	8							
6	≘							
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SCHEDULE L

(Form 990 or 990-EZ)

Department of the Treasury

Transactions With Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

OMB No 1545-0047

Open To Public Inspection

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions. Internal Revenue Service Name of the organization

Employer identification number CBSET TNC 20-4325286

Part I			ns (section			n 501(c)(4) organizatio				<u> 2220</u>		
1	· · · · · · · · · · · · · · · · · · ·			on Form	990, Part IV,	line 25a or 25b, or For			v, line 4L	JD	(c) Corr	ected?
	(a) Name of dis	squaimed person	on 		-	(b) Description	ot transa	ction			Yes	No_
					•							
	 											
	the amount of tax imp	oosed on the o	rganization	manager	s or disqualifi	ed persons during the	year un	der	▶ \$			
3 Enter	the amount of tax, if a	ny, on line 2, a	bove, reim	bursed by	the organiza	ation .			> \$			
Part II	Loans to and/o											
	ame of interested	(b) Loan to	o or from	(c) Origi	990, Part IV, nal principal nount	(d) Balance due	(e)	ln .	(f) App	oroved ard or	(g) W	
pers	on and purpose	the organ To	From	aı —	nount		Yes	ult?	_comm	nttee? No	agreei Yes	No_
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					-		<u> </u>					
otal Part III	Grants or Assis	stance Ben	efiting Ir	ntereste	▶ \$ ed Person	s.		-		!		
	Complete if the orga		ered "Yes"			•						
	a) Name of interested	person	· · ·	(b) Relati		een interested person ganization	and			ount an assistan	d type o	
							<u> </u>					
											-	
							•				-	
		 -				·						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2011

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 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

Name of the organization **Employer identification number** 20-4325286 INC. CBSET, FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: OF CARDIOLOGY, ENDOSCOPY, SURGERY, DRUG, AND DEVICE DELIVERY, DRUG AND DEVICE SAFETY, AND DIAGNOSTIC IMAGING. FORM 990, PART VI, SECTION B, LINE 11: BOARD OF DIRECTORS AND MANAGEMENT REVIEW FORM 990 FOR ACCURACY AND APPROVE PRIOR TO FILING. FORM 990, PART VI, SECTION B, LINE 15: THE BOARD APPROVES THE PAYROLL OF TOP MANAGEMENT AND KEY EMPLOYEES USING THE INPUT FROM OUTSIDE CONSULTANTS. THE ORGANIZATION LEASES EMPLOYEES THROUGH A STAFFING COMPANY, GENESIS CONSOLIDATED SERVICES, WHICH PROVIDES SALARY RECOMMENDATIONS. FORM 990, PART VI, SECTION C, LINE 18: THE ORGANIZATION WILL FURNISH DOCUMENTATION UPON REQUEST. FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION WILL FURNISH DOCUMENTATION UPON REQUEST. THERE HAS BEEN NO CHANGE FROM THE PRIOR YEAR WITH RESPECT TO THIS PROCEDURE.

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property)

990

OMB No 1545-0172

Name(s) shown on return

► See separate instructions.

► Attach to your tax return. Business or activity to which this form relates

Identifying number

CBSET	, INC.			FOR	м 99	0 PA	GE 10			20-4325286
Part I	Election To Expense Certain Property	y Under Section 17	79 Note: If you ha	ve any lis	ted prop	erty, co	mplete Part	V be	fore yo	u complete Part I.
1 Maxim	um amount (see instructions)								1	500,000.
2 Total o	cost of section 179 property place	d in service (see	instructions)	•••					2	
3 Thresh	nold cost of section 179 property b	pefore reduction	in limitation				·		3	2,000,000.
4 Reduc	tion in limitation. Subtract line 3 fr	om line 2 If zero	or less, enter -0-						4	
5 Dollar lin	nitation for tax year Subtract line 4 from line 1	I If zero or less, enter	-0- If married filing se	parately, see	instruction	ns	•		5	
6	(a) Description of prop		7) Cost (busin			(c) Elected	l cost		
					-					
		•			•					
	property. Enter the amount from I					7				
	elected cost of section 179 proper	-	in column (c), iir	ies 6 and	<i>'</i> .	•			8	
	ive deduction. Enter the smaller of					•			9	
=	over of disallowed deduction from	•			>1			••	10	
	ess income limitation. Enter the sm					9 5			11	
	n 179 expense deduction. Add lin	•				40			12	
	over of disallowed deduction to 20 not use Part II or Part III below for					13				
Part II	Special Depreciation Allowan				de listed		hv 1			
	al depreciation allowance for qualif		···				· · · · · · · · · · · · · · · · · · · 			
the tax		ned property (of	iei triair listeu pr	operty) pi	aceu III :	Service (unng		4.	
	rty subject to section 168(f)(1) elec	etion						•	14	
•	depreciation (including ACRS)	CHOT		•	•••	•	•		15_	892,698.
Part III	MACRS Depreciation (Do not	unclude listed or	operty) (See inc	tructions	`				16	034,030.
	William Depression (De not	molade noted pr	Section		<u>, </u>					
17 MACB	S deductions for assets placed in	sonuso in tox vi							17	
								٦	''	
IO IT you are	e electing to group any assets placed in service Section B - Assets F						ral Deprecia	 etior	Svete	
	Gection b - Assets i	(b) Month and	(c) Basis for dep				ai Deprecia	luoi	Joysie	
	(a) Classification of property	year placed in service	(business/investr only - see instri	ment use		covery riod	(e) Convention	Ë	fethod	(g) Depreciation deduction
19a 3-)	year property			<u>,118.</u>		RS.	MQ	_	0DB	14,390.
b 5-y	year property			<u>,980.</u>	5 Y	RS.			0DB	22,163.
<u>c 7-</u>	year property		1	<u>,882.</u>	7 Y	RS.	MQ	20	0DB	336.
d 10	-year property									
e 15	year property									
f 20	-year property									
g 25	-year property				25	yrs.		<u> </u>	S/L	
h Re	esidential rental property	1			27.5	yrs.	MM	_ ;	S/L	
		/			27 5	yrs.	MM	_ ;	S/L	
i No	onresidential real property	/			39	yrs.	MM	Ŀ	S/L	
		/	_		<u> </u>		MM		S/L	
	Section C - Assets Pl	aced in Service	During 2011 Ta	x Year Us	sing the	Alterna	ative Deprec	iati	on Sys	tem
20a Cla	ass life				ļ			;	S/L	
b 12	-year				12	yrs.		_:	S/L	
	year	/	<u> </u>		40	yrs.	MM	<u> </u>	S/L	
Part IV										
	property. Enter amount from line								21	
22 Total.	Add amounts from line 12, lines 1	4 through 17, ևո	es 19 and 20 in (column (g), and lir	ne 21.				
Enter h	nere and on the appropriate lines o	of your return. Pa	artnerships and S	S corporat	tions - <u>s</u> e	ee instr.	<u> </u>		22	929,587.
23 For as:	sets shown above and placed in s	ervice during the	e current year, er	nter the					ļ	
	of the basis attributable to section	on 263A costs				23				
116251 11-21-11 l	LHA For Paperwork Reduction	Act Notice, see	separate instru	ctions.						Form 4562 (2011)

		(2011)		<u>ET, INC</u>											<u> 286 </u>	
Pa	rt·V	Listed Proper	ty (Include a	utomobiles, ce	rtaın oth	er vehicle	es, cert	taın com	puters	s, and prop	erty use	d for er	itertainm	ent, rec	reation, d	or
		amusement) Note: For any	vehicle for wi	hich vou are us	una the	standard	milean	ie rate or	dedu	ctina lease	expens	e comn	lete only	24a 24	th colun	nns (a)
		through (c) of S								cang icase	Схрспо	, comp		, z , a, z		o (u)
		Section A	- Depreciation	on and Other	Informa	tion (Cau	ition: S	See the i	nstruc	tions for lii	mits for p	asseng	er autom	obiles)		
24a	Do you	have evidence to s						es	7 -		-				Yes [☐ No
		(a)	(b)	(c)				(e)		(f)		g)		h)		(i)
	Type	of property	Date	Business/		(d) Cost or		sis for depre		Recovery		hod/		ciation		cted
	(list ve	ehicles first)	placed in service	investment use percentag	ie otl	her basis	(bus	siness/inve use only		period	Conv	ention	dedu	iction	1	n 179 Ist
25	Snooia	depreciation all		<u> </u>		nlaced u	n conv	ce dunne	the t	av vear an	d	T				
	•	•			property	piaceu	1 Servic	ce aami	y an e a	ax year arr	u	05				
		nore than 50% in ty used more tha									-	25	1		L	
20	riopei	ty used more tha	11 30% III a C	1		-					Γ				I	
			<u> </u>	9												
			.	9							 		-			
				9	· · · · · · ·						L		<u> </u>		l <u>-</u>	
<u>27</u>	Proper	ty used 50% or l	ess in a qual	fied business	use.								r		Υ	
				9	6			-			S/L ·					
			<u> </u>	9	6					<u> </u>	S/L·					
			<u> </u>	9	6					L	S/L -			_		
28	Add an	mounts in column	n (h), lines 25	through 27. E	nter here	e and on	lıne 21	, page 1				28				
29	Add an	nounts in column	n (i), line 26 E	nter here and	on line 7	7, page 1								29		
			•	S	ection I	3 - Inforr	nation	on Use	of Vel	hicles						
Con	nolete t	this section for ve	ehicles used	by a sole prop	netor, p	artner, or	other '	"more th	an 5%	owner."	or related	d persor	٦.			
		ided vehicles to												na this s	section fo	or
-	se vehi	· ·	,	,						,						
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	T - 4 - 1 b					a)		(b)	Ι,	(c)		d) 	1	e)) (1	
		usiness/investment 		luring the	Ver	ncle	ve	hicle	 	/ehicle	ver	ncle	ver	ncle	Ven	ııcle
		o not include com	,	•									ļ - ·			
31	Total c	commuting miles	dnven during	the year					-		ļ		-			
32	Total o	other personal (no	oncommuting	g) miles		1					1		l			
	dnven				ļ										_	
33	Total n	nıles driven durin	g the year.			ŀ							Į.			
	Add lin	nes 30 through 32	2													
34	Was th	ne vehicle availab	ole for persor	nal use	Yes	No	Yes	No	Yes	s No	Yes	No	Yes	No	Yes	No
	dunng	off-duty hours?														
	-	ne vehicle used p	nmanly by a	more					1							
		% owner or relat										}			ļ	
36		ther vehicle availa	•	nnal		† †									<u> </u>	
	_	ulei vellicie avalie	able for pers	Jilai									İ		ŀ	
	use?		C4: 0	0			h - D		L	for Hook	. Their !				<u> </u>	L
				- Questions 1	-	-										. E0/
		ese questions to	determine ir	you meet an e	xceptior	i to comp	pleting	Section	B for v	venicies us	sea by ei	прюуее	es who an	re not II	iore mai	1 370
		related persons.	 -												1.4	т
37	Do you	u maintain a writt	en policy sta	tement that pr	ohibits a	ıll person	al use	of vehicl	es, inc	cluding coi	mmuting	, by you	ır		Yes	No
	employ	yees?									•	•••	-		ļ	+
38	Do you	ı maıntaın a writt	en policy sta	tement that pr	ohibits p	ersonal (use of	vehicles	exce	pt commul	ting, by y	our/				
	employ	yees? See the in:	structions fo	r vehicles used	by con	orate off	icers, c	directors	, or 19	6 or more	owners				<u> </u>	ļ
39	Do you	u treat all use of v	ehicles by e	mployees as p	ersonal	use?									<u> </u>	<u> </u>
40	Do you	a provide more th	an five vehic	les to your em	ployees	, obtaın ıı	nforma	ition fron	n your	employee	s about				1	1
	_	e of the vehicles,		=												ŀ
		u meet the require					nonstra	atıon use	- ?			•				
	•	If your answer to		• .						covered ve	ehicles	• •	•	•		
	art VI	Amortization	07,00,00,4	0,014710 10	<u>0, 00 ///</u>	or compr	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u> </u>	J. (1.70	0070700 70						
		(a)			(b)		(c)		\neg	(d)	I	(e)			(f)	
		Description of	of costs	Date	amortzation		Amortiza			Code		Amortiz	abon		mortization or this year	
	A == = -				begins 1 tox vo	l	amoun			section		period or pe	remage [- una yed	
42	AITION	zation of costs th	iai pegins di	uring your 201	ı tax ye	ar.			1		 r					
							<u> </u>		+		<u>-</u> -					
		_				<u> </u>							+-			
43	Amortı	zation of costs th	nat began be	fore your 201	l tax yea	ar	••						43			
44	Total.	Add amounts in	column (f) S	ee the instruct	ions for	where to	report	<u> </u>					44			
1162	52 11-18	B-11												F	orm 456	2 (201

CBSET, Inc. **Financial Statements** Years Ended December 31, 2011 and 2010

Contents

Independent auditors' report	1
Financial statements:	
Statements of financial position	2
Statements of activities	3
Statements of cash flows	4
Notes to financial statements	5-15



Independent Auditors' Report

To the Board of Trustees CBSET, Inc. Lexington, Massachusetts

We have audited the accompanying statements of financial position of CBSET, Inc. (a non-profit organization) as of December 31, 2011 and 2010, and the related statements of activities and of cash flows for the years then ended. These financial statements are the responsibility of the Organization's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of CBSET, Inc. as of December 31, 2011 and 2010, and the changes in its net assets and its cash flows for the years then ended, in conformity with accounting principles generally accepted in the United States of America.

Sharkansky LLP Certified Public Accountants

Brockton, Massachusetts April 2, 2012

Statements of Financial Position

		7 00111011
December 31,	2011	2010
ASSETS		
Current:		
Accounts receivable (net of allowance for doubtful		
accounts. 2011, \$15,000; 2010, \$-0-)	\$ 3,659,460	\$ 1,781,805
Employee advance	-	1,148
Due from affiliate	-	48,000
Costs and estimated earnings in excess of billings		
on uncompleted contracts	340,371	523,840
Prepaid medical supplies and expenses	286,666_	217,777
Total current assets	4,286,497	2,572,570
Property and equipment - net	1,483,047	2,133,654
Other assets.		
Cash and cash equivalents - pledged	511,642	506,242
Lease acquisition costs - net	24,269	31,877
Deferred financing costs - net	7,309	15,519
Organization costs - net	-	13,023
Total other assets	543,220	566,661
TOTAL	\$ 6,312,764	\$ 5,272,885
LIABILITIES AND NET ASSETS		
Current:		
Line-of-credit	\$ 669,546	\$ 383,645
Accounts payable	671,544	796,365
Accrued expenses	225,507	214,198
Billings in excess of costs and estimated earnings		
on uncompleted contracts	373,100	406,488
Capital lease obligation - current portion	21,750	20,692
Notes payable - current portion	624,099	643,051
Total current liabilities	2,585,546	2,464,439
Capital lease obligation - net of current portion	1,862	23,612
Notes payable - net of current portion	698,626	1,351,292
Total liabilities	3,286,034	3,839,343
Unrestricted net assets	3,026,730	1,433,542
TOTAL	_\$ 6,312,764	\$ 5,272,885
		

See accompanying notes and independent auditors' report.

Statements of Activities

Years Ended December 31,	2011	2010
Unrestricted support and revenue:		
Contract income	\$ 13,426,585	\$ 11,678,254
Interest income	5,400	6,894
Total unrestricted support and revenue	13,431,985	11,685,148
Expenses:		
Program services - research	9,685,993	9,688,654
General and administrative expenses	2,152,804	1,875,517
Total expenses	11,838,797	11,564,171
Increase in unrestricted net assets	1,593,188	120,977
Unrestricted net assets, beginning of year	1,433,542	1,312,565
Unrestricted net assets, end of year	\$ 3,026,730	\$ 1,433,542

Statements of Cash Flows

Years Ended December 31,	2011	2010
Cash flows from operating activities		
Increase in unrestricted net assets	\$ 1,593,188	\$ 120,977
Adjustments to reconcile increase/(decrease) in unrestricted net	,	
assets to net cash provided by operating activities		
Depreciation and amortization	960,928	925,594
Changes in assets and liabilities:		
(Increase)/decrease in:		
Accounts receivable	(1,877,655)	(196,869)
Employee advances	1,148	(1,148)
Costs and estimated earnings in excess of billings		
on uncompleted contracts	183,469	(128,234)
Prepaid medical supplies and expenses	(68,889)	69,818
Increase/(decrease) in:		
Accounts payable	(124,821)	14,841
Accrued expenses	11,309	(9,892)
Deferred revenue	-	(51,720)
Billings in excess of costs and estimated earnings		
on uncompleted contracts	(33,388)	405,623
Net cash provided by operating activities	645,289	1,148,990
Cash flows from investing activities:		
Purchase of property and equipment	(278,980)	(183,967)
Cash flows from financing activities:		
Pledged cash and cash equivalents	(5,400)	405,829
Deferred financing costs	(2,500)	-
Net borrowings/(repayment) on line-of-credit	285,901	(191,355)
Repayment of capital lease obligation	(20,692)	(19,686)
Repayment of long-term debt	(671,618)	(746,497)
Repayment of short-term loan	-	(138,520)
Net advances from/(to) affiliate	<u>48,000</u>	(300,000)
Net cash used financing activities	(366,309)	(990,229)
Net decrease in cash and cash equivalents	-	(25,206)
Cash and cash equivalents, beginning of year		25,206
Cash and cash equivalents, end of year		
Supplemental disclosures of cash flow information Cash paid during the year for:		•
Interest	<u>\$ 131,554</u>	\$ 176,276

Notes to Financial Statements

 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES This summary of significant accounting policies is presented to assist in understanding CBSET, Inc.'s ("CBSET") financial statements. The financial statements and notes are representations of the Organization's management, which is responsible for their integrity and objectivity. These accounting policies conform to generally accepted accounting principles and have been consistently applied in the preparation of these financial statements.

Basis of Accounting

The financial statements of the Organization have been prepared on the accrual basis of accounting, and accordingly, reflect all significant receivables, payables, and other liabilities.

Basis of Presentation

Financial statement presentation follows the recommendations under the not-for-profit entities topic of the FASB Accounting Standards Codification. The Corporation is required to report information regarding its financial position and activities according to three classes of net assets. Descriptions of the three categories of net assets are as follows:

Unrestricted net assets

Net assets that are not subject to donor-imposed stipulations.

Temporarily restricted net assets

Net assets subject to donor-imposed stipulations that will be met either by actions of the Organization and/or the passage of time. No temporarily restricted net assets were received or held by the Organization in 2011 and 2010; accordingly, no temporarily restricted net assets are reflected in the accompanying financial statements.

Permanently restricted net assets

Net assets subject to donor-imposed stipulations such that they are maintained permanently by the Organization. Generally, the donors of these assets permit the Organization to use all or part of the income earned on related investments for general or specific purposes. No permanently restricted net assets were received or held by the Organization in 2011 and 2010; accordingly, no permanently restricted net assets are reflected in the accompanying financial statements.

Notes to Financial Statements

 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (cont'd)

Financial Instruments

The Organization's financial instruments that are exposed to concentrations of credit risk consist primarily of cash and cash equivalents and accounts receivable. The Organization places its cash with high quality financial institutions.

Revenue Recognition

The Organization receives substantially all of its contract revenue from private companies for the performance of medical research studies in the fields of biological and physical sciences. Revenues from contracts are recognized on the percentage-of-completion method, measured by the percentage of costs incurred to date to estimated total costs for each contract. This method is used because management considers expended costs to be the best available measure of progress on these contracts. Because of inherent uncertainties in estimating costs, it is at least reasonably possible that the estimates used will change within the near-term.

Percentage of completion is reviewed by management monthly for reasonableness of cost estimates and the amounts are adjusted accordingly. Additionally, management reviews the percentage of completion calculation and may adjust on a specific contract basis. Contract costs include direct labor and supply costs, and indirect overhead costs. Provisions for estimated losses on uncompleted contracts are made in the period in which such losses are determined. As contracts can extend over one or more years, changes in study performance, study conditions, and estimated profitability may result in revisions in costs and income and are reflected during the accounting period in which the facts requiring the revision became known.

The asset, "costs and estimated earnings in excess of billings on uncompleted contracts," represents revenues recognized in excess of amounts billed. The liability, "billings in excess of costs and estimated earnings on uncompleted contracts," represents billings in excess of revenues recognized.

Operating Cycle

The Organization's work is performed under cost-plus-fee contracts and fixed-price contracts modified by various amendments. The lengths of the Organization's contracts vary, but are typically in excess of one year. Therefore, assets and liabilities are not classified as current and noncurrent because the contract-related items in the balance sheet have realization and liquidation periods extending beyond one year.

Notes to Financial Statements

1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (cont'd)

Contributions

Contributions received are recorded as unrestricted, temporarily restricted, or permanently restricted support, depending on the existence and/or nature of any donor restrictions.

All donor-restricted contributions are reported as an increase in temporarily or permanently restricted net assets, depending on the nature of the restriction. When a restriction expires (that is, when a stipulated time restriction ends or purpose restriction is accomplished), temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions. Unrestricted contributions are recognized when received or committed by the donor.

Subsequent Events

The Organization evaluated subsequent events through April 2, 2012, the date the financial statements were available to be issued.

Accounts Receivable

The allowance for doubtful accounts is based on management's evaluation of outstanding accounts receivable at the end of the year based on a history of past write-offs, collections, and current credit and economic conditions. Consequently, an adverse change in those factors could affect the Organization's estimate of its bad debt. The allowance for doubtful accounts was \$15,000 and \$-0- at December 31, 2011 and 2010, respectively. Bad debt expense for the years ended December 31, 2011 and 2010 amounted to \$15,000 and \$-0-, respectively.

Fair Value of Financial Instruments

The FASB ASC topic on fair value establishes a fair value hierarchy that prioritizes the inputs used to measure fair value. The hierarchy gives the highest priority to quoted prices in active markets for identical assets or liabilities (Level 1 measurement); then priority to quoted prices for similar instruments in active markets, quoted prices for identical or similar instruments in markets that are not active, and model-based valuation techniques for which all significant assumptions are observable in the market (Level 2 measurement); then the lowest priority to unobservable inputs (Level 3 measurement).

Notes to Financial Statements

1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (cont'd)

Fair Value of Financial Instruments (cont'd)

The carrying value of cash and cash equivalents, accounts receivable, prepaid expenses, other assets, accounts payable, accrued expenses, and the credit line approximates fair value because of the short maturity of their instruments

The carrying value of the notes payable and the capital lease obligation approximates fair value because the Organization can obtain similar loans at the same terms.

Property and Equipment

Property and equipment are carried at cost or, if donated, at the approximate fair value at the date of donation. Depreciation is computed using accelerated and straight-line depreciation methods over the estimated useful life of the asset. Maintenance, repairs, and renewals, which neither materially add to the value of the property nor appreciably prolong its life, are charged to expense as incurred. CBSET's capitalization policy is to capitalize assets with a useful life that exceeds one year.

Intangible Assets

The costs of intangible assets are being amortized on a straightline method over their estimated lives, as follows:

Lease acquisition costs – 8 years
Deferred financing costs related to long-term debt – 5 years
Deferred financing costs related to credit line – 2-5 years

Intangible assets presented on the statement of financial position consist of the following:

<u>December 31, 2011</u> :	Gross Carrying <u>Amount</u>	Accumulated Amortization
Amortized intangible assets Lease acquisition costs Deferred financing costs	\$ 48,286 51,988	\$ 24,017 44,679
Total	<u>\$ 100,274</u>	<u>\$ 68,696</u>

Notes to Financial Statements

1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (cont'd)

Intangible Assets (cont'd)

<u>December 31, 2010</u> :	Gross Carrying <u>Amount</u>	Accumulated Amortization
Amortized intangible assets Lease acquisition costs Deferred financing costs Organization costs	\$ 48,286 49,488 	\$ 16,409 33,969 <u>5,121</u>
Total	<u>\$ 115,918</u>	<u>\$ 55,499</u>

Amortization on these intangible assets is expected to be as follows:

2012	\$ 14	1,188
2013	\$ 8	3,337
2014	\$ 7	7,608
2015	\$ -	1,445

Amortization expense for the years ended December 31, 2011 and 2010 amounted to \$31,341 and \$19,670, respectively. The weighted average amortization period for these assets is 6.44 years.

Use of Estimates in the Preparation of Financial Statements

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets, liabilities, and disclosure of contingent assets and liabilities at the date of the financial statements. These estimates also affect the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Income Taxes

CBSET, Inc. is a nonprofit corporation under Section 501(c)(3) of the Internal Revenue Code, and is classified as a public charity. As such, it is exempt from Federal and state income taxes. The Organization's information returns are subject to examination by the appropriate taxing jurisdictions. As of December 31, 2011, the returns generally remain open for the last three years.

Cash and Cash Equivalents

CBSET considers all highly liquid investments with a maturity of three months or less to be cash equivalents. CBSET's cash balances deposited at financial institutions exceeded the Federal

Notes to Financial Statements

1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (cont'd)

Cash and Cash Equivalents (cont'd)

Deposit Insurance Corporation limit of \$250,000 by \$261,642 and \$256,242 (including restricted cash and cash equivalents) at December 31, 2011 and 2010, respectively. On a daily basis, available unrestricted cash is swept to the line-of-credit, thereby reducing the outstanding credit line balance on which interest is calculated.

Pledged Cash and Cash Equivalents

CBSET established a collateral account equal to its obligation under a letter of credit obtained as security for the lessor. Restricted cash is presented as a noncurrent asset, reflecting the nature of the underlying letter of credit.

Planned Major Maintenance Activities

The Organization uses the direct expensing method to account for planned major maintenance activities.

Donated Services

Donated services are recorded as contributions at their estimated fair values in the period received. Certain donated services have not been recognized in the statement of activities because the criteria for recognition have not been satisfied.

Uncertain Tax Positions

The Organization evaluates uncertain tax positions with a two-step recognition and measurement approach. The Organization recognizes interest accrued related to uncertain tax positions in interest expense, and penalties in operating expenses, when applicable.

2. DESCRIPTION OF THE ORGANIZATION

CBSET, Inc., located in Lexington, Massachusetts, is a not-for-profit organization established in 2006 under the laws of the Commonwealth of Massachusetts. CBSET is dedicated to medical research in the fields of biological and physical sciences. CBSET's primary funding sources are sponsor contributions and contract revenue for medical research.

3. PROPERTY AND EQUIPMENT

Property and equipment consists of the following:

	Estimated Useful Life	2011	<u>2010</u>
Equipment Computer software Computers	5 years	\$3,438,587	\$3,214,528
	3 years	291,597	280,955
	5 years	290,016	272,213

Notes to Financial Statements

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3.	PROPERTY AND EQUIPMENT (cont'd)		Estimated	0044	0040
	EQUIFMENT (COILE)		<u>Useful Life</u>	<u>2011</u>	<u>2010</u>
		Leasehold improvements Total	8 years	930,923 4,951,123	904,447 4,672,143
		Less accumulated deprec	iation	3,468,076	2,538,489
		Property and equipmen	t – net	<u>\$1,483,047</u>	<u>\$2,133,654</u>
		Depreciation expense for and 2010 amounted to \$93			
4.	LETTERS OF CREDIT	The Organization had an inbank totaling \$800,000 ative January 15, 2010, the Organization has a portion as collateral, was reduced the lease agreement. The pires on July 14, 2012. fourths of one percent fee	es security for e standby left of pledged from \$800,0 ne letter is re	or an office leter of credit, cash and cas 00 to \$500,00 enewable ann	ease. Effec- for which the h equivalents 0 pursuant to ually and ex-
		The letter of credit is equivalents held in a cert \$511,642 and \$506,242 a tively.	ificate of dep	osit account	amounting to
5.	LINE-OF-CREDIT	In July 2007, CBSET of agreement with Boston Provides borrowings not borrowing base. The borrowing base. The borrowing ligible foreign account of July 31, 2011, this agreems for an additional two bears interest at prime plecember 31, 2011 and 20	rivate Bank a to exceed owing base is able plus the is receivable. reement was o years througus one-quarte	nd Trust. Th \$1,000,000, defined as 7 lesser of \$150 Upon the ex renewed und gh July 31, 20 er percent pe	is agreement subject to a 5% of eligible 0,000 or 50% expiration date der the same 013. The line r annum. At
		The following summariz December 31:	es the bor	rowing availa	ability as of
				<u>2011</u>	<u>2010</u>
		Loan amount Less amount in excess of borrowing base		\$1,000,000	\$1,000,000
		Total borrowing availa Less balance of line-of-cre		1,000,000 669,546	1,000,000 383,645

See independent auditors' report.

\$ 330,454 \$ 616,355

Net borrowing availability

Notes to Financial Statements

6. NOTES PAYABLE	Notes payable consist of the following	ıg:	
		<u>2011</u>	<u>2010</u>
	Boston Private Bank and Trust Company – equipment loan, \$2,400,000, dated September 29, 2006, secured, maturing September 29, 2013, payable in monthly installments of principal in the amount of \$28,571 plus interest, interest shall accrue at a fixed rate per annum, equal to 6.68%	\$ 657,169	\$1,028,592
	Boston Private Bank and Trust Company – term loan, \$750,000, dated April 27, 2009, secured, maturing April 27, 2014, payable in monthly installments of principal in the amount of \$12,500 plus interest interest shall accrue at a fixed rate per annum, equal to 5.71%	st, 50,000	500,000
	Boston Private Bank and Trust Company – secured, equipment draw down note up to \$750,000, dated August 20, 2008, converted to term loan November 30, 2008. The note matures September 30, 2013 and is payable in monthly installments of interest only at prime plus 0.25% through the date of conversion, at which time payments of \$14,578 commenced for principal and interest at a fixed rate equal to the sum of the five year Federal Home Loan Bank "Classic" rate plus		
	2.0% per annum, equal to 6.22%	<u>315,556</u>	<u>465,751</u>
	Total	1,322,725	1,994,343
	Current portion of notes payable	624,099	643,051
	Notes payable - net	<u>\$ 698,626</u>	<u>\$1,351,292</u>

See independent auditors' report.

Notes to Financial Statements

6. NOTES PAYABLE (cont'd)

Maturities of notes payable are as follows:

2012	\$ 624,099
2013	648,626
2014	 50,000

Total \$1,322,725

Interest expense amounted to \$131,554 and \$176,276 for the years ended December 31, 2011 and 2010, respectively.

The debt is also secured by a third-party pledge agreement from The Center for Biomedical Science and Engineering Trust ("The Center"). As is explained in Note 9, the Center is a related party with respect to CBSET. The Center has pledged as collateral an investment management and trust account maintained with the lender, and other assets of the entity. At December 31, 2011 and 2010, the market value of this account amounted to \$2,159,569 and \$2,137,706, respectively. The Center must maintain fair value in excess of two million dollars for the purpose of collateral. The financing agreements include certain financial covenants including requirements to maintain defined levels of debt to tangible net worth, debt service, and financial statement reporting requirements. As of December 31, 2011, the Organization was in compliance with these covenants.

7. CONCENTRATIONS

For the years ended December 31, 2011 and 2010, five customers accounted for 43% and 63%, respectively, of the Organization's contract revenue. Management does not anticipate any adverse conditions regarding these customers' business.

8. LEASE COMMITMENTS

The Organization leases its office facilities under a noncancellable lease expiring in January 2015. The lease requires monthly rental payments and a proportionate share of operating and property tax costs.

At December 31, 2011, the minimum rental payments due under this lease are as follows:

2012	\$1,200,885
2013	1,200,885
2014	1,200,885
2015	100,074
Total	\$3 702 729

Notes to Financial Statements

8. LEASE COMMITMENTS (cont'd)

Rent expense amounted to \$1,691,964 and \$1,679,582, including operating and property tax costs for the years ended December 31, 2011 and 2010, respectively.

The Organization leases office equipment under various operating lease agreements that expire through July 2012. Rent expense relating to these operating leases amounted to \$8,367 and \$8,127 for the years ended December 31, 2011 and 2010, respectively.

At December 31, 2011, the minimum rental payments due under these leases are as follows:

2012

\$ 2,548

RELATED PARTY TRANSACTIONS

The Center for Biomedical Science and Engineering Trust (the "Center") is considered a related party by virtue of common management and a common board member. CBSET and the Center share certain administrative staff, facilities, and other services. The Center has executed a pledge agreement, pledging the Center's Investment Management and Trust Account with a lender as collateral security for the obligation as described in Note 6.

At December 31, 2010, there was a balance from the Center amounting to \$48,000 related to cash flow advances received. This balance, as well as an additional \$125,000, was contributed to the Center during the year ended December 31, 2011, and is included in program service expense in the statement of activities.

During the year ended December 31, 2010, the Center performed medical research studies for CBSET totaling \$45,000 included in program services expense in the statement of activities.

The Board President is compensated by the Organization for services as Executive Director, the Treasurer/Clerk of the Board is compensated for services as Vice President of the Organization, and a Board Director is compensated for program advisory services.

10. CAPITAL LEASES

In February, 2008, the Organization acquired equipment, included in property and equipment, under a capital lease agreement expiring January 2013. The lease provides the option to purchase the equipment at fair market value at the expiration of the lease term. The cost of the equipment amounted to \$99,500, and related accumulated depreciation amounted to \$69,650 and \$49,750 at December 31, 2011 and 2010, respectively.

Notes to Financial Statements

10. CAPITAL LEASES (cont'd)	At December 31, 2011, the future minimum lease payments under capital leases are presented as follows:	
	2012 2013 Total Less amount representing interest	\$22,435
	Present value of minimum lease payments	<u>\$23,612</u>
	Current maturities Noncurrent maturities	\$21,750
	Total	<u>\$23,612</u>
	Maturities of capital lease obligations are as follows:	
	2012 2013	\$21,750 1,862
	Total	<u>\$23,612</u>
11. COMPENSATED ABSENCES	Employees of CBSET are contracted through a third-party service provider. Vacation and sick days off are the responsibility of the third-party service provider; accordingly, no liability has been recorded on the accompanying financial statements. The Organization's policy is to recognize the costs of compensated absences when actually paid to employees.	
12. RECLASSIFICATION	Certain accounts in the 2010 financial state reclassified to conform to the 2011 financia tation.	-