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Form 990  Department of the Treasury Internal Revenue Service	Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)	OMB No 1545-0047 <div> <div>2011</div> <div>Open to Public Inspection</div> </div>
	The organization may have to use a copy of this return to satisfy state reporting requirements	

A For the 2011 calendar year, or tax year beginning 01-01-2011 and ending 12-31-2011		D Employer identification number 31-1584621	
B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending		E Telephone number (314) 587-1000	
C Name of organization DONALD DANFORTH PLANT SCIENCE CENTER		G Gross receipts \$ 171,714,150	
Doing Business As			
Number and street (or P O box if mail is not delivered to street address) Room/suite 975 NORTH WARSON ROAD			
City or town, state or country, and ZIP + 4 SAINT LOUIS, MO 63132			
F Name and address of principal officer JAMES CARRINGTON PRESIDENT 975 N WARSON ROAD ST LOUIS, MO 63132		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)	
I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (Insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶	
J Website: ▶ www.DanforthCenter.org			
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation 1998	M State of legal domicile MO

Part I	Summary
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Activities & Governance	1 Briefly describe the organization's mission or most significant activities IMPROVE THE HUMAN CONDITION THROUGH PLANT SCIENCE/RESEARCH FEED THE HUNGRY AND IMPROVE HUMAN HEALTH, PRESERVE AND RENEW OUR ENVIRONMENT AND ENHANCE OUR REGION'S ECONOMY		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	23
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	22
	5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	248
	6 Total number of volunteers (estimate if necessary)	6	3,000
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
	7b Net unrelated business taxable income from Form 990-T, line 34	7b	0
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	26,301,125	155,886,335
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,916,811	1,350,409
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	4,613,228	7,178,366
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	287,386	423,867
		33,118,550	164,838,977
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	9,949,530	10,186,842
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	13,767,378	13,966,352
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	16b Total fundraising expenses (Part IX, column (D), line 25) <u>1,617,614</u>		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	11,546,691	12,829,792
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	35,263,599	36,982,986
	19 Revenue less expenses Subtract line 18 from line 12	-2,145,049	127,855,991
Net Assets or Fund Balances		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	256,427,830	347,875,903
	21 Total liabilities (Part X, line 26)	44,427,905	18,991,723
	22 Net assets or fund balances Subtract line 21 from line 20	211,999,925	328,884,180

Part II	Signature Block
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Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	***** Signature of officer			2012-11-15 Date	
	HAROLD DAVIES, CHIEF FINANCIAL OFFICER Type or print name and title				
Paid Preparer's Use Only	Preparer's signature		Date	Check if self-employed <input type="checkbox"/>	Preparer's taxpayer identification number (see instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4	RUBINBROWN LLP ONE NORTH BRENTWOOD SAINT LOUIS, MO 63105			EIN
					Phone no (314) 290-3300

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

Part III

Statement of Program Service Accomplishments

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

1

Briefly describe the organization’s mission

IMPROVE THE HUMAN CONDITION THROUGH PLANT SCIENCE/RESEARCH FEED THE HUNGRY AND IMPROVE HUMAN HEALTH, PRESERVE AND RENEW OUR ENVIRONMENT AND ENHANCE OUR REGION'S ECONOMY

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes

☒

No

If “Yes,” describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes

☒

No

If “Yes,” describe these changes on Schedule O

4

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

4a

(Code) (Expenses \$ 31,080,487 including grants of \$ 10,186,842) (Revenue \$ 1,350,409)

PLANT SCIENCE RESEARCH, EDUCATION OUTREACH & TRAINING 79 ACTIVE RESEARCH PROJECTS INCLUDING - VIRUS RESISTANT CASSAVA FOR SUB-SAHARAN AFRICA - NUTRITIONALLY ENHANCED CASSAVA FOR SUB-SAHARAN AFRICA - VIRUS RESISTANT SWEET POTATO FOR SUB-SAHARAN AFRICA - NUTRITIONALLY ENHANCED SWEET POTATO FOR SUB-SAHARAN AFRICA - INCREASING SEED OIL YIELD FOR BIODIESEL FUEL PRODUCTION - OPTIMIZATION OF BIOFUEL PRODUCTION FROM ALGAE - DROUGHT TOLERANCE IN MODEL SWITCH GRASS - ARPA-E CENTER FOR ENHANCED CAMELINA OILS MAJOR RESEARCH SPONSORS INCLUDE THE DEPARTMENT OF ENERGY, GATES FOUNDATION, THE HOWARD BUFFET FOUNDATION, NATIONAL SCIENCE FOUNDATION (NSF), NATION INSTITUTES OF HEALTH (NIH), USDA, USAID, AND THE DEPT OF TRANSPORTATION

4b

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

4c

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

4d

Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e

Total program service expenses \$ 31,080,487

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A.	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I.		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II.	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III.		No
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? If "Yes," complete Schedule D, Part I.		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II.		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.		No
10	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 V.	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	Yes	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I.	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U.S.? If "Yes," complete Schedule F, Part II and IV.	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U.S.? If "Yes," complete Schedule F, Part III and IV.		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I.		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H.		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements.		

Part IV

Checklist of Required Schedules (continued)

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

<div>Part V</div> <div>Statements Regarding Other IRS Filings and Tax Compliance</div>			
Check if Schedule O contains a response to any question in this Part V <input type="checkbox"/>			
		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. .	1a80	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	
2a	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.	2a248	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2b	Yes
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities account)?	4a	Yes
b	If "Yes," enter the name of the foreign country: CJ, UK, SF See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a	No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	No
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?	9a	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b	
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders.	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state.	13a	
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b	
c	Enter the aggregate amount of reserves on hand.	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	

Part VI

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.
Check if Schedule O contains a response to any question in this Part VI ☒

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
1a	23		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	22
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	No
7a	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	No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a	The governing body?	8a	Yes
b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	No
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	Yes
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
13	Did the organization have a written whistleblower policy?	13	Yes
14	Did the organization have a written document retention and destruction policy?	14	Yes
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	15a	Yes
b	Other officers or key employees of the organization	15b	Yes
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	Yes
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	Yes

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed ▶
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ HAROLD DAVIES 975 N WARSON RD SAINT LOUIS, MO 63132 (314) 587-1041

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

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

[illegible]

Part VII

1b	Sub-Total			
c	Total from continuation sheets to Part VII, Section A			
d	Total (add lines 1b and 1c)	3,098,946	0	373,714

2 Total number of individuals (including but not limited to those listed in Item 1) who received more than \$100,000 of reportable compensation from the organization. 26

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
MITCH MURCH'S MAINTENANCE MANAGEMEN 2827 CLARK AVE SAINT LOUIS, MO 63103	CLEANING SERVICES	151,495
BUTLER'S PANTRY 1414 PARK AVENUE SAINT LOUIS, MO 63104	CATERING SERVICE	148,058
GLOBAL PATENT GROUP LLC 1005 NORTH WARSON ROAD STE 201 SAINT LOUIS, MO 63132	LEGAL SERVICES	261,424
WILLIAM TAO ASSOCIATES INC 7955 MANCHESTER ROAD STE 125 SAINT LOUIS, MO 63143	CONSULTING ENGINEERS	255,815
OMNI LAND CARE 11115 DORSETT ROAD MARYLAND HEIGHTS, MO 63043	LANDSCAPING SERVICES	114,061

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►5

Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e	14,918,763				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	140,967,572				
	g	Noncash contributions included in lines 1a-1f \$ 13,241,553						
	h	Total. Add lines 1a-1f		155,886,335				
Program Service Revenue			Business Code					
	2a	REG AND USER FEES	541900	629,365	629,365			
	b	SCIENCE PROG INCOME	541900	5,796	5,796			
	c	CONTRACTS	541900	715,248	715,248			
	d							
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f		1,350,409				
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		4,654,879			4,654,879	
	4	Income from investment of tax-exempt bond proceeds . . .		0				
	5	Royalties		21,500			21,500	
	6a	(i) Real		(ii) Personal				
		Gross rents	136,142					
		b Less rental expenses						
		c Rental income or (loss)	136,142					
	d	Net rental income or (loss)		136,142			136,142	
	7a	(i) Securities		(ii) Other				
		Gross amount from sales of assets other than inventory	9,189,551	209,109				
		b Less cost or other basis and sales expenses	6,609,956	265,217				
		c Gain or (loss)	2,579,595	-56,108				
	d	Net gain or (loss)		2,523,487				
	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18	a					
	b	Less direct expenses	b					
	c	Net income or (loss) from fundraising events . . .		0				
	9a	Gross income from gaming activities See Part IV, line 19	a					
	b	Less direct expenses	b					
	c	Net income or (loss) from gaming activities . . .		0				
	10a	Gross sales of inventory, less returns and allowances	a					
	b	Less cost of goods sold	b					
	c	Net income or (loss) from sales of inventory . . .		0				
	Miscellaneous Revenue		Business Code					
11a	REGISTRATION FEES	900099	90,270	90,270				
b	FOOD SERVICE INCOME	721110	53,775			53,775		
c	FACILITY USAGE FEE	900099	17,920			17,920		
d	All other revenue		104,260			104,260		
e	Total. Add lines 11a-11d		266,225					
12	Total revenue. See Instructions		164,838,977	1,440,679	0	4,988,476		

Part IX

Statement of Functional Expenses

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

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	9,838,498	9,838,498		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	348,344	348,344		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	2,376,381	384,609	1,782,115	209,657
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	9,124,192	8,306,530	234,868	582,794
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	568,684	507,107	29,685	31,892
9	Other employee benefits	1,158,715	966,599	120,069	72,047
10	Payroll taxes	738,380	567,398	120,946	50,036
11	Fees for services (non-employees)				
a	Management	0			
b	Legal	388,269	317,969	68,837	1,463
c	Accounting	61,975		61,975	
d	Lobbying	0			
e	Professional fundraising See Part IV, line 17	0			
f	Investment management fees	764,589		764,589	
g	Other	907,467	808,463	89,600	9,404
12	Advertising and promotion	89,381	32,596	151	56,634
13	Office expenses	0			
14	Information technology	127,265	107,305	11,687	8,273
15	Royalties	0			
16	Occupancy	699,388	592,369	84,449	22,570
17	Travel	426,054	379,904	34,976	11,174
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	254,332	249,306	757	4,269
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	4,192,623	3,858,387	267,656	66,580
23	Insurance	157,408		157,408	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	EQUIP RENTAL & MAINTENANCE	750,135	652,421	68,863	28,851
b	OUTSIDE SERVICES	561,411	480,575	56,786	24,050
c	PERSONEL EXPENSE	694,366	556,170	132,644	5,552
d	SUPPLIES & EQUIPMENT	1,972,272	1,896,196	53,983	22,093
e					
f	All other expenses	782,857	229,741	142,841	410,275
25	Total functional expenses. Add lines 1 through 24f	36,982,986	31,080,487	4,284,885	1,617,614
26	Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			6,080,630	1	875
	2	Savings and temporary cash investments			0	2	6,252,020
	3	Pledges and grants receivable, net			4,345,963	3	17,676,013
	4	Accounts receivable, net			0	4	0
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			0	5	0
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L			0	6	0
	7	Notes and loans receivable, net			0	7	0
	8	Inventories for sale or use			0	8	0
	9	Prepaid expenses and deferred charges			1,220,355	9	1,432,997
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	103,812,931			
	b	Less: accumulated depreciation	10b	33,341,735	72,259,604	10c	70,471,196
	11	Investments—publicly traded securities			118,247,948	11	174,998,350
	12	Investments—other securities. See Part IV, line 11			54,273,330	12	77,044,452
	13	Investments—program-related. See Part IV, line 11			0	13	0
	14	Intangible assets			0	14	0
	15	Other assets. See Part IV, line 11			0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)			256,427,830	16	347,875,903
Liabilities	17	Accounts payable and accrued expenses			3,275,515	17	6,532,162
	18	Grants payable			0	18	0
	19	Deferred revenue			13,033,101	19	9,149,073
	20	Tax-exempt bond liabilities			0	20	2,500,000
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			0	21	0
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			0	22	0
	23	Secured mortgages and notes payable to unrelated third parties			0	23	0
	24	Unsecured notes and loans payable to unrelated third parties			0	24	0
	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 Schedule D			28,119,289	25	810,488
	26	Total liabilities. Add lines 17 through 25			44,427,905	26	18,991,723
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			98,330,717	27	103,198,019
	28	Temporarily restricted net assets			14,052,661	28	23,137,666
	29	Permanently restricted net assets			99,616,547	29	202,548,495
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			211,999,925	33	328,884,180
	34	Total liabilities and net assets/fund balances			256,427,830	34	347,875,903

Part 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	164,838,977
2	Total expenses (must equal Part IX, column (A), line 25)	2	36,982,986
3	Revenue less expenses Subtract line 2 from line 1	3	127,855,991
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	211,999,925
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-10,971,736
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	328,884,180

Part XII Financial Statements and Reporting

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

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

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization DONALD DANFORTH PLANT SCIENCE CENTER	Employer identification number 31-1584621
--	--

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

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

1

☐

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

2

☐

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

3

☐

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

4

☐

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

5

☐

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

6

☐

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

7

☒

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

8

☐

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

9

☐

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

10

☐

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

11

☐

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

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

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

f

☐

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

g

☐

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

(i)

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

(ii)

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

(iii)

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

h

☐

Provide the following information about the supported organization(s)

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

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

Part II

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I 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)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	39,235,594	24,192,120	27,000,003	26,301,125	155,886,335	272,615,177
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	39,235,594	24,192,120	27,000,003	26,301,125	155,886,335	272,615,177
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)						168,963,420
6 Public Support. Subtract line 5 from line 4						103,651,757

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	39,235,594	24,192,120	27,000,003	26,301,125	155,886,335	272,615,177
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,132,001	3,314,801	2,211,771	3,326,768	4,812,521	15,797,862
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets	152,265	137,972	87,695	126,266	266,225	770,423
11 Total support (Add lines 7 through 10)						289,183,462

12 Gross receipts from related activities, etc (See instructions)

128,518,713

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

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f))	14	35.843 %
15 Public Support Percentage for 2010 Schedule A, Part II, line 14	15	48.586 %

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 the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—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 meets the "facts and circumstances" test The organization qualifies as a publicly supported 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 organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization

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

Part IIIPart III

Support Schedule for Organizations Described in IRC 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11 and 12.)						
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage			
15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	15		
16 Public support percentage from 2010 Schedule A, Part III, line 15	16		

Section D. Computation of Investment Income Percentage			
17 Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))	17		
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18		
19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization			
b 33 1/3% support tests—2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization			
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions			

Part IV **Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ **Complete if the organization is described below.**

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

OMB No 1545-0047

2011

Open to Public
Inspection

If the organization answered “Yes,” to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered “Yes,” to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered “Yes,” to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35c (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization DONALD DANFORTH PLANT SCIENCE CENTER	Employer identification number 31-1584621
--	--

Part I-A

Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1
- Provide a description of the organization's direct and indirect political campaign activities on behalf of or in opposition to candidates for public office in Part IV
- 2
- Political expenditures ▶ \$
- 3
- Volunteer hours

Part I-B

Complete if the organization is exempt under section 501(c)(3).

- 1
- Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$
- 2
- Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$
- 3
- If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
- 4a
- Was a correction made? ☐ Yes ☐ No
- b
- If "Yes," describe in Part IV

Part I-C

Complete if the organization is exempt under section 501(c) except section 501(c)(3).

- 1
- Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$
- 2
- Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities ▶ \$
- 3
- Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ \$
- 4
- Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No
- 5
- Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

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

Part II-A

Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A

Check

☐

if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B

Check

☐

if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing Organization's Totals	(b) Affiliated Group Totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)															
c Total lobbying expenditures (add lines 1a and 1b)															
d Other exempt purpose expenditures															
e Total exempt purpose expenditures (add lines 1c and 1d)															
f Lobbying nontaxable amount Enter the amount from the following table in both columns															
<table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g Grassroots nontaxable amount (enter 25% of line 1f)															
h Subtract line 1g from line 1a If zero or less, enter -0-															
i Subtract line 1f from line 1c If zero or less, enter -0-															
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No													

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B

Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?		No	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
c	Media advertisements?		No	
d	Mailings to members, legislators, or the public?		No	
e	Publications, or published or broadcast statements?		No	
f	Grants to other organizations for lobbying purposes?		No	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		9,667
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i	Other activities? If "Yes," describe in Part IV		No	
j	Total lines 1c through 1i			9,667
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A

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

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

Part III-B

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

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV

Supplemental Information

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

Identifier	Return Reference	Explanation
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SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
DONALD DANFORTH PLANT SCIENCE CENTER

Employer identification number
31-1584621

Part I

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

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

Part II

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

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or pleasure) ☐ Preservation of an historically importantly land area

☐ Protection of natural habitat ☐ Preservation of a certified historic structure

☐ Preservation of open space

2

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

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

3

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

4

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

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6

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

7

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

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9

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

Part III

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

1a

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

b

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

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

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

2

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

a

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

b

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

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D

Schedule D (Form 990) 2011

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

3

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

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

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

5

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

☐ Yes

☐ No

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

1a

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

☐ Yes

☐ No

b

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

	Amount
1c	
1d	
1e	
1f	

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

2a

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

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

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

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a	Beginning of year balance	155,834,732	109,190,816	80,594,194	85,670,635
b	Contributions	69,232,185	33,334,891	12,243,364	24,828,880
c	Investment earnings or losses	-3,700,327	13,309,025	16,353,258	-28,513,232
d	Grants or scholarships				
e	Other expenditures for facilities and programs	6,900,000			-1,392,089
f	Administrative expenses				
g	End of year balance	214,466,590	155,834,732	109,190,816	83,378,372

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ 10 000 %

b

Permanent endowment ▶ 90 000 %

c

Term endowment ▶

3a

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

(i)

unrelated organizations

(ii)

related organizations

b

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

	Yes	No
3a(i)		No
3a(ii)		No
3b		

4

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

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

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		11,400,000		11,400,000
b Buildings		66,266,435	17,235,973	49,030,462
c Leasehold improvements		0		0
d Equipment		16,677,603	12,351,423	4,326,180
e Other		9,468,893	3,754,339	5,714,554
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				70,471,196

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1164,838,977
2	Total expenses (Form 990, Part IX, column (A), line 25)	236,982,986
3	Excess or (deficit) for the year Subtract line 2 from line 1	3127,855,991
4	Net unrealized gains (losses) on investments	4-10,973,101
5	Donated services and use of facilities	5
6	Investment expenses	6
7	Prior period adjustments	7
8	Other (Describe in Part XIV)	81,365
9	Total adjustments (net) Add lines 4 - 8	9-10,971,736
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10116,884,255

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return		
1	Total revenue, gains, and other support per audited financial statements	1153,158,760
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
a	Net unrealized gains on investments2a-10,973,101	
b	Donated services and use of facilities2b	
c	Recoveries of prior year grants2c	
d	Other (Describe in Part XIV)2d1,365	
e	Add lines 2a through 2d2e-10,971,736	
3	Subtract line 2e from line 13	3164,130,496
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	
a	Investment expenses not included on Form 990, Part VIII, line 7b4a764,589	
b	Other (Describe in Part XIV)4b-56,108	
c	Add lines 4a and 4b4c708,481	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)5	5164,838,977

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return		
1	Total expenses and losses per audited financial statements	136,274,505
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	
a	Donated services and use of facilities2a	
b	Prior year adjustments2b	
c	Other losses2c	
d	Other (Describe in Part XIV)2d56,108	
e	Add lines 2a through 2d2e56,108	
3	Subtract line 2e from line 13	336,218,397
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b4a764,589	
b	Other (Describe in Part XIV)4b	
c	Add lines 4a and 4b4c764,589	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)5	536,982,986

Part XIV Supplemental Information

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

Identifier	Return Reference	Explanation
ENDOWMENT PURPOSE	SCHEDULE D PART V LINE 4	THE PURPOSE OF THE ENDOWMENT IS TO FUND RESEARCH AND OTHER SCIENTIFIC ACTIVITIES IN ACCORDANCE WITH THE CENTER'S OVERALL MISSION
UNCERTAIN TAX POSITIONS	SCHEDULE D, PART XIV	THE FINANCIAL STATEMENTS ARE NOT REQUIRED TO CONTAIN A FOOTNOTE ADDRESSING UNCERTAIN TAX POSITIONS AS THE ORGANIZATION DOES NOT HAVE MATERIAL UNCERTAIN TAX POSITIONS
OTHER DIFFERENCES - REVENUE	PART XII, LINE 4B	OTHER DIFFERENCE IN REVENUE LOSS ON ASSET DISPOSAL (\$56,108)
OTHER DIFFERENCES - EXPENSE	PART XIII, LINE 1E	OTHER DIFFERENCE IN EXPENSE LOSS ON ASSET DISPOSAL \$56,108
OTHER DIFFERENCES - NET ASSETS	SCH D, PART XI, LINE 8	OTHER DIFFERENCES IN NET ASSETS FOREIGN CURRENCY EXCHANGE \$1,365

OMB No 1545-0047

Open to Public Inspection

31-1584621

3 Activities per Region (Use Part V if additional space is needed)

Schedule F (Form 990) 2011

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 ☐

Use Part V if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			South America	RESEARCH	40,135	WIRE TRANSF	0		
			Sub-Saharan Africa	RESEARCH	44,178	WIRE TRANSF	0		
			Sub-Saharan Africa	RESEARCH	22,418	WIRE TRANSF	0		
			Europe/Iceland/Greenland	RESEARCH	22,955	CHECK	0		
			Sub-Saharan Africa	RESEARCH	5,103	WIRE TRANSF	0		
			Europe/Iceland/Greenland	RESEARCH	55,790	WIRE TRANSF	0		
			Sub-Saharan Africa	RESEARCH	7,000	WIRE TRANSF	0		
			Sub-Saharan Africa	RESEARCH	35,990	WIRE TRANSF	0		
			Sub-Saharan Africa	RESEARCH	33,602	WIRE TRANSF	0		
			Sub-Saharan Africa	RESEARCH	80,100	WIRE TRANSF	0		

2

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ☐

4

3

Enter total number of other organizations or entities ☐

6

Part III

[illegible]

Part IV Foreign Forms

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)*

☐

Yes

☒

No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If " Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)*

☒

Yes

☐

No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)*

☐

Yes

☒

No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)*

☐

Yes

☒

No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)*

☐

Yes

☒

No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).*

☒

Yes

☐

No

Supplemental Information

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

[illegible]

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization
DONALD DANFORTH PLANT SCIENCE CENTER

Employer identification number
31-1584621

Part I

General Information on Grants and Assistance

- 1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No
- 2

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

Part II

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶

22

3

Enter total number of other organizations listed in the line 1 table ▶

14

Part III

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

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV

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

Identifier	Return Reference	Explanation
GRANT MONITORING PROCESS	SCHEDULE I, PART 1, LINE 2	DOMESTIC GRANT MONITORING PROCESS A RISK-BASED APPROACH IS UTILIZED TO DETERMINE THE APPROPRIATE PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS BY DOMESTIC SUBRECIPIENTS WHICH MAY INCLUDE, BUT IS NOT LIMITED TO A) COLLECTION OF TECHNICAL PERFORMANCE REPORTS, B) REVIEW OF INVOICES AND CORRESPONDING EXPENSES TO ENSURE THAT INVOICED CHARGES APPEAR REASONABLE BASED UPON TECHNICAL PROGRESS OF THE PROJECT, ARE WITHIN THE BUDGET PARAMETERS, AND ARE CONSISTENT AND SUBMITTED TIMELY, C) QUESTIONING AND CLARIFICATION OF INVOICED CHARGES, AND D) ON-SITE VISITS AND EXAMINATION OF WORK PERFORMED ON AN ANNUAL BASIS, FOR SUBRECIPIENTS SUBJECT TO OMB CIRCULAR A-133, 10 CFR 600, SUBPART D, OR PROGRAM SPECIFIC AUDITS AS IDENTIFIED IN THE PRIME AWARD THE CENTER EXAMINES THE FINANCIAL STATEMENT AND/OR COMPLIANCE AUDITS FOR AUDITOR'S OPINION, FINDINGS AND QUESTIONED COSTS, CORRECTIVE ACTION PLANS WHEN FINDINGS ARE DISCLOSED, AND PROPER SUBMISSION OF THE SF-SAC (DATA COLLECTION FORM) TO THE FEDERAL AUDIT CLEARINGHOUSE (A-133 AUDITS) FOR ALL FEDERALLY FUNDED SUBRECIPIENTS, ANNUAL VERIFICATIONS ARE PERFORMED VIA THE SYSTEM FOR AWARD MANAGEMENT (WWW.SAM.GOV) TO ENSURE THAT A) NEITHER IT NOR ITS PRINCIPALS ARE PRESENTLY DEBARRED, SUSPENDED, PROPOSED FOR DEBARMENT, DECLARED INELIGIBLE OR VOLUNTARILY EXCLUDED FROM PARTICIPATION IN THIS TRANSACTION BY ANY FEDERAL DEPARTMENT OR AGENCY, AND B) REGISTRATION IS ACTIVE IN THE CENTRAL CONTRACTORS REGISTRATION (CCR)

Software ID:
Software Version:
EIN: 31-1584621
Name: DONALD DANFORTH PLANT SCIENCE CENTER

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WASHINGTON UNIVERSITYONE BROOKINGS DRIVE CAMPUS BOX 1054 ST LOUIS,MO 63130	14-0653611	501(C)(3)	475,926				RESEARCH
UNIVERSITY OF CALIFORNIA - DAVIS1850 RESEARCH PARK SUITE 300 DAVIS,CA 95618	94-6036494	U OF CA - DAVIS	9,199				RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF FLORIDA219 GRINTER HALL GAINESVILLE, FL 32601	59-6002052	UNIV OF FL	10,480				RESEARCH
WASHINGTON STATE UNIVERSITY423 NEILL HALL PO 643140 PULLMAN, WA 99164	91-6001108	WA STATE UNIV	395,302				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF NEBRASKA312 N 14TH STREET - ALEX WEST LINCOLN,NE 68588	47-0049123	UNIV OF NE	376,054				RESEARCH
UNIVERSITY OF PUERTO RICOALL BOX 9000 MAYAGUEZ, PR 00681	66-0433761	UNIV OF PR	186,162				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE REGENTS OF THE UNIVERSITY OF CALIFORNIA11000 KINROSS BUILDING SUITE 102 LOS ANGELES, CA 90095	95-6006143	UNIV OF CA-LA	350,292				RESEARCH
MICHIGAN STATE UNIVERSITY301 ADMINISTRATION BUILDING EAST LANSING, MI 48824	38-6005984	MI STATE UNIV	428,215				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RESEARCH FOUNDATION OF CUNY ON BEHALF OF BROOKLYN230 W 41ST ST 7TH FLOOR NEW YORK, NY 10036	13-1988190	501(c)(3)	291,079				RESEARCH
ALBEMARLE DBA CATILIN2073 ROY J CARVER CO-LAB IOWA STATE UNIVERSITY AMES,IA 50011	20-8875141		282,717				RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOARD OF GOVERNORS - COLORADO STATE UNIVERSITY COLORADO STATE UNIVERSITY - SPONSOR 2002 CAMPUS DELIVERY FORT COLLINS, CO 80523	84-6000545	CO STATE UNIV	280,321				RESEARCH
DIVERSIFIED ENERGY - SUB NC 2020 W GUADALUPE RD SUITE 5 GILBERT, AZ 85233	02-0765334		147,697				RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ELDORADO BIOFUELS7 AVENIDA VISTA GRANDE 454 SANTA FE, NM 87508	26-2299091		98,767				RESEARCH
GENIFUEL CORPORATION1873 CARRIGAN CIR SALT LAKE CITY, UT 84109	20-5607273		33,270				RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CELLANA DBA HR BIOPETROLEUMPO BOX 240548 HONOLULU, HI 96824	65- 1290232		305,876				RESEARCH
INVENTURE CHEMICAL INCPO BOX 530 TACOMA, WA 98335	26- 0266328		88,491				RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KAI BIOENERGY CORP73-4100 LAPAAU PLACE KAILUAKONA, HI 96740	26-2326267		51,414				RESEARCH
THE REGENTS OF NEW MEXICO STATE UNIVERSITY CORNER OF ESPINA ST AND STEWART ST ANDERSON HALL E-1200 P0 BOX 3000 LAS CRUCES, NM 88003	85-6000401	NM STATE UNIV	933,739				RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PALMER LABS LLC 700 WEST MAIN STREET SUITE 108 DURHAM, NC 27701	26-2554963		25,590				RESEARCH
SOLIX BIOSYSTEMS INC 4308 NORTH COLLEGE AVENUE FORT COLLINS, CO 80524	51-0552480		25,600				RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEXAS AGRILIFE RESEARCH2147 TAMU COLLEGE STATION, TX 77843	74-6000541	TEXAS A&M UNIV	2,136,982				RESEARCH
TARGETED GROWTH INC 2815 EASTLAKE AVE EAST SEATTLE, WA 98102	91-1911739		182,350				RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TERRABON INC 20329 STATE HIGHWAY 249 SUITE 350 HOUSTON, TX 77070	27- 0754359		212,674				RESEARCH
ARIZONA BOARD OF REGENTS UNIVERSITY OF AZ PO BOX 3308 TUCSON, AZ 85722	74- 2652689	UNIV OF AZ	696,658				RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA 3451 WALNUT STREET ROOM P221 FRANKLIN BUILDING PHILADELPHIA, PA 231352685	23-1352685	UNIV OF PA	96,081				RESEARCH
UNIVERSITY OF WASHINGTON4333 BROOKLYN AVE NE BOX 359472 SEATTLE, WA 98195	91-6001537	UNIV OF WA	333,166				RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UOP LLC25 EAST ALGONQUIN ROAD DES PLAINES, IL 60017	22-2640650		110,411				RESEARCH
USDA-ARS1815 N UNIVERSITY AVENUE PEORIA, IL 61604		USDA	185,549				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF GEORGIA616 BOYD GSRC ATHENS,GA 30602	58-6001998	UNIV OF GA	34,236				RESEARCH
UNIVERSITY OF MISSOURI - ST LOUISONE UNIVERSITY BOULEVARD ST LOUIS,MO 63121	43-6003859	UNIV OF MO-STL	256,142				RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PENNSYLVANIA STATE UNIVERSITY 110 TECHNOLOGY CENTER UNIVERSITY PARK, PA 16802	24-6000376	PENN ST UNIV	87,133				RESEARCH
NEW MEXICO CONSORTIUM 4200 WEST JEMEZ ROAD SUITE 301 LOS ALAMOS, NM 87544	26-0370262	501(c)(3)	247,886				RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VANDERBILT UNIVERSITY DIVISION OF SPONSORED RESEARCH PMB 2301 VANDERBILT PLACE NASHVILLE, TN 372407749	62-0476822	VANDERBILT UNIV	19,034				RESEARCH
IOWA STATE UNIVERSITY OFFICE OF SPONSORED PROGRAMS ADMINI 1138 PEARSON HALL AMES, IA 500112207	42-6004224	IOWA ST UNIV	35,617				RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SRS ENERGY LLC 7455 NEWMAN BLVD DEXTER, MI 48130	26-1909279		59,939				RESEARCH
PIONEER HI-BRED A DUPONT BUSINESS7100 NW 62ND AVENUE PO BOX 1000 JOHNSTON, IA 501311000	51-0014090		346,314				RESEARCH

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2011

Open to Public Inspection

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

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

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization DONALD DANFORTH PLANT SCIENCE CENTER	Employer identification number 31-1584621
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Part I

Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		
	<input type="checkbox"/> First-class or charter travel		
	<input checked="" type="checkbox"/> Housing allowance or residence for personal use		
	<input type="checkbox"/> Travel for companions		
	<input type="checkbox"/> Payments for business use of personal residence		
	<input type="checkbox"/> Tax idemnification and gross-up payments		
	<input type="checkbox"/> Health or social club dues or initiation fees		
	<input type="checkbox"/> Discretionary spending account		
	<input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	1b	Yes
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply		
	<input checked="" type="checkbox"/> Compensation committee		
	<input checked="" type="checkbox"/> Written employment contract		
	<input type="checkbox"/> Independent compensation consultant		
	<input checked="" type="checkbox"/> Compensation survey or study		
	<input type="checkbox"/> Form 990 of other organizations		
	<input checked="" type="checkbox"/> 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 organization or a related organization		
a	Receive a severance payment or change-of-control payment?	4a	No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.		
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		
a	The organization?	5a	No
b	Any related organization?	5b	No
	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 contingent on the net earnings of		
a	The organization?	6a	No
b	Any related organization?	6b	No
	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	No
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8	No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9	

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

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

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) DR ROGER BEACHY	(i)	509,339	0	0	19,600	16,021	544,960	0
	(ii)	0	0	0	0	0	0	0
(2) MR SALVATORE FIORELLO	(i)	314,360	0	0	19,600	26,051	360,011	0
	(ii)	0	0	0	0	0	0	0
(3) MR JAN JAWORSKI	(i)	227,230	0	0	17,640	4,432	249,302	0
	(ii)	0	0	0	0	0	0	0
(4) MR CLAUDE FAUQUET	(i)	217,687	0	0	17,300	14,952	249,939	0
	(ii)	0	0	0	0	0	0	0
(5) MR THOMAS SMITH	(i)	208,475	0	0	16,536	1,378	226,389	0
	(ii)	0	0	0	0	0	0	0
(6) MR HAROLD DAVIES	(i)	196,686	0	0	16,000	18,979	231,665	0
	(ii)	0	0	0	0	0	0	0
(7) MS LAURA CHAUVIN	(i)	179,874	0	0	15,200	24,709	219,783	0
	(ii)	0	0	0	0	0	0	0
(8) MR PAUL ANDERSON	(i)	197,892	0	0	15,880	15,786	229,558	0
	(ii)	0	0	0	0	0	0	0
(9) DR RICHARD SAYRE	(i)	170,967	0	0	13,110	12,889	196,966	0
	(ii)	0	0	0	0	0	0	0
(10) DR JAMES C CARRINGTON	(i)	377,899	0	28,500	19,600	19,673	445,672	0
	(ii)	0	0	0	0	0	0	0
(11) DR TONI KUTCHAN	(i)	175,054	0	0	14,007	7,422	196,483	0
	(ii)	0	0	0	0	0	0	0
(12) DR JAMES UMEN	(i)	173,469	0	0	5,000	6,873	185,342	0
	(ii)	0	0	0	0	0	0	0
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part IIISupplemental Information

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

Identifier	Return Reference	Explanation
TEMPORARY HOUSING	PART I, LINE 1A	THE COST OF TEMPORARY HOUSING IN ST LOUIS, MO WAS PAID FOR JAMES CARRINGTON, PRESIDENT, FOR A PERIOD OF THREE (3) MONTHS IN 2011 PRIOR TO HIS PERMANENT RELOCATION FROM SAN DIEGO, CA

<div>Schedule K (Form 990)</div> <div>Department of the Treasury Internal Revenue Service</div>	<div>Supplemental Information on Tax Exempt Bonds</div> <div>▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990). ▶ Attach to Form 990. ▶ See separate instructions.</div>										OMB No 1545-0047	
											2011	
	Name of the organization DONALD DANFORTH PLANT SCIENCE CENTER										Employer identification number 31-1584621	

Part I Bond Issues											
(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased		(h) On Behalf of Issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A MISSOURI DEVELOPMENT FINANCE BOARD	43-1387649		12-01-2011	2,500,000	FINANCE CONTRUCTION OF GREENHOUSE		X		X		X

Part II		Proceeds							
		A		B		C		D	
1	Amount of bonds retired	0							
2	Amount of bonds defeased	0							
3	Total proceeds of issue	2,500,000							
4	Gross proceeds in reserve funds	0							
5	Capitalized interest from proceeds	0							
6	Proceeds in refunding escrow	0							
7	Issuance costs from proceeds	0							
8	Credit enhancement from proceeds	0							
9	Working capital expenditures from proceeds	0							
10	Capital expenditures from proceeds	0							
11	Other spent proceeds	0							
12	Other unspent proceeds	2,500,000							
13	Year of substantial completion								
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?		X						
15	Were the bonds issued as part of an advance refunding issue?		X						
16	Has the final allocation of proceeds been made?		X						
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?								

Part III Private Business Use									
		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X						
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X						

Part III

Private Business Use (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use?		X						
b	If 'Yes' to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c	Are there any research agreements that may result in private business use of bond-financed property?		X						
d	If 'Yes' to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government	0 %							
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government	0 %							
6	Total of lines 4 and 5	0 %							
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	X							

Part IV

Arbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X						
2	Is the bond issue a variable rate issue?		X						
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?		X						
b	Name of provider	0							
c	Term of hedge								
d	Was the hedge superintegrated?								
e	Was a hedge terminated?								
4a	Were gross proceeds invested in a GIC?		X						
b	Name of provider	0							
c	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5	Were any gross proceeds invested beyond an available temporary period?		X						
6	Did the bond issue qualify for an exception to rebate?	X							

Part V

Procedures To Undertake Corrective Action

Check the box if the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations ☐ Yes ☒ No

Part VI

Supplemental Information

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

Identifier	Return Reference	Explanation
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Schedule L
(Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
DONALD DANFORTH PLANT SCIENCE CENTER

Employer identification number

31-1584621

Part I

Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

2

Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958

\$

3

Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

\$

Part II

Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c)Original principal amount	(d)Balance due	(e) In default?		(f) Approved by board or committee?		(g)Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
Total										

Part III

Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b)Relationship between interested person and the organization	(c)Amount of grant or type of assistance

Part IV

Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) DAVID KEMPER	BOARD MEMBER	4,236	BANK INTEREST & INVEST INCOME		No
(2) DAVID KEMPER	BOARD MEMBER	8,590	CREDIT CARD REBATES RECEIVED		No
(3) DAVID KEMPER	BOARD MEMBER	21,245	BANK FEES PAID		No
(4) DAVID KEMPER	BOARD MEMBER	96,637	LEASE PAYMENTS		No
(5) DAVID KEMPER	BOARD MEMBER	22,619	LOAN FEES		No
(6) DAVID KEMPER	BOARD MEMBER	2,500,000	LOAN		No

Part V

Supplemental Information

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

Identifier	Return Reference	Explanation
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SCHEDULE M
(Form 990)

NonCash Contributions

OMB No 1545-0047

2011

Open to Public Inspection

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

Name of the organization
DONALD DANFORTH PLANT SCIENCE CENTER

Employer identification number
31-1584621

Part I

Types of Property

	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	28	13,203,153	STOCK MARKET PRICE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
EQUIPMENT - GROWTH				
25 Other ► (CHAMBERS)	X	1	38,400	FAIR MARKET VALUE
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				

29

Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

0

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		No
b If "Yes," describe the arrangement in Part II		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?		No
b If "Yes," describe in Part II		
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II		

Part III

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

Identifier	Return Reference	Explanation
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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization DONALD DANFORTH PLANT SCIENCE CENTER	Employer identification number 31-1584621
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Identifier	Return Reference	Explanation
FORM 990 REVIEW PROCESS	PART VI LINE 9b	RETURN IS PREPARED BY AN INDEPENDENT CPA FIRM IT IS THEN REVIEWED BY MANAGEMENT THE FORM 990 IS THEN REVIEWED BY THE AUDIT COMMITTEE CHAIR AND THE CHAIRMAN OF THE BOARD THE RETURN IS THEN PROVIDED TO ALL MEMBERS OF THE BOARD OF DIRECTORS PRIOR TO THE FILING OF THE RETURN

Identifier	Return Reference	Explanation
CONFLICT OF INTEREST POLICY	PART VI LINE 12c	THE CENTER HAS HAD A CONFLICT OF INTEREST POLICY SINCE INCEPTION OF THE ORGANIZATION. A SUBCOMMITTEE OF THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES IS RESPONSIBLE FOR ASSESSING THE ADEQUACY OF THE CENTER'S CONFLICT OF INTEREST POLICIES AND MONITORING COMPLIANCE WITH THE POLICIES AND PROCEDURES. THE SUBCOMMITTEE ALSO HAS RESPONSIBILITY FOR OVERSIGHT AND MANAGEMENT OF POTENTIAL CONFLICTS OF INTEREST FOR BOARD MEMBERS AND OFFICERS. THE SUBCOMMITTEE REPORTS TO THE BOARD REGARDING CONFLICTS OF INTEREST ON AN ANNUAL BASIS, OR MORE FREQUENTLY IF CONSIDERED NECESSARY. UNDER THE CENTER'S CURRENT POLICIES, TRUSTEES, OFFICERS AND KEY EMPLOYEES ARE REQUIRED TO DISCLOSE POTENTIAL CONFLICTS OF INTEREST UPON HIRE OR APPOINTMENT, WHEN NEW POTENTIAL CONFLICTS ARISE AND ON AN ANNUAL BASIS THEREAFTER. IT IS MANAGEMENT'S RESPONSIBILITY TO DEVELOP AND IMPLEMENT A SPECIFIC PLAN OF ACTION TO CONTROL OR ELIMINATE EACH CONFLICT OF INTEREST AND TO MONITOR COMPLIANCE THE AGREED UPON PLAN. ALL POTENTIAL CONFLICTS ARE PRESENTED TO THE CONFLICT OF INTEREST SUBCOMMITTEE OF THE AUDIT COMMITTEE AT AN ANNUAL MEETING HELD IN MARCH. THE SUBCOMMITTEE REVIEWS AND APPROVES ALL POTENTIAL CONFLICTS OF INTEREST AND MANAGEMENT'S PLANNED COURSE OF ACTION TO CONTROL OR ELIMINATE EACH POTENTIAL CONFLICT OF INTEREST. THE CHAIRMAN OF THE CONFLICT OF INTEREST SUBCOMMITTEE IS INFORMED OF POTENTIAL CONFLICTS WHEN THEY ARE IDENTIFIED OUTSIDE OF THE FORMAL ANNUAL DISCLOSURE PROCESS AND DETERMINES WHETHER IMMEDIATE ATTENTION OF THE FULL SUBCOMMITTEE IS REQUIRED PRIOR TO THE ANNUAL MEETING IN MARCH.

Identifier	Return Reference	Explanation
PROCESS FOR DETERMINING COMPENSATION	PART VI LINE 15b	UPON INITIAL HIRE OF A NEW PRESIDENT OR CHIEF OPERATING OFFICER, AN INDEPENDENT FIRM IS HIRED TO PERFORM A COMPENSATION STUDY THE COMPENSATION STUDY IS USED AS THE BASIS FOR SETTING COMPENSATION AND BENEFITS FOR THE NEW HIRE. ON AN ANNUAL BASIS, THE HUMAN RESOURCE DEPARTMENT OBTAINS COMPARABLE SALARY DATA FROM MULTIPLE INDEPENDENT SOURCES, A COMPENSATION SURVEY FROM THE ASSOCIATION OF INDEPENDENT RESEARCH INSTITUTIONS (AIRI) AND A SURVEY OF LOCAL INSTITUTIONS. SALARY RANGES BY POSITION ARE DEVELOPED FROM THE SURVEY DATA AND COMPENSATION LEVELS FOR THE DANFORTH CENTER ARE ESTABLISHED WITHIN THE RANGES. THE COMPENSATION COMMITTEE OF THE BOARD OF TRUSTEES REVIEWS AND APPROVES THE SURVEY RESULTS AND RECOMMENDED COMPENSATION LEVELS. THE RESULTS ARE PRESENTED AND APPROVED AT THE NOVEMBER BOARD OF TRUSTEES MEETING.

Identifier	Return Reference	Explanation
ORGANIZATION DOCUMENTS PROVIDED TO PUBLIC	990 PART VI LINE 4	THE FINANCIAL STATEMENTS, ARTICLES OF INCORPORATION, AND BYLAWS ARE AVAILABLE TO THE PUBLIC UPON REQUEST

Identifier	Return Reference	Explanation
OTHER CHANGE IN NET ASSETS	FORM 990, PART XI, LINE 5	THE OTHER CHANGE IN NET ASSETS CONSISTS OF THE FOLLOWING UNREALIZED LOSS \$(10,973,101) FOREIGN CURRENCY TRANSLATION \$1,365 ----- TOTAL OTHER CHANGE \$(10,971,736)

Identifier	Return Reference	Explanation
FAMILY RELATIONSHIP	FORM 990, PART VI, SECTION A, LINE 2	WILLIAM H DANFORTH, CHRISTOPHER BORDERS DANFORTH, AND MARY DANFORTH STILLMAN HAVE A FAMILY RELATIONSHIP

Identifier	Return Reference	Explanation
INTERIM PRESIDENT AND HIRING OF NEW PRESIDENT	FORM 990, PART VII	EFFECTIVE OCTOBER 5, 2009 DR ROGER BEACHY , FOUNING PRESIDENT OF THE CENTER, WAS APPOINTED THE FIRST DIRECTOR OF THE NATIONAL INSTITUTE OF FOOD AND AGRICULTURE (NIFA) AT THE U S DEPARTMENT OF AGRICULTURE UNDER A FORMAL AGREEMENT WITH NIFA, BEACHY WAS "ON LOAN" TO NIFA FROM THE CENTER ON ASSUMING THE NEW POSITION, HE TOOK THE POSITION OF VICE CHAIRMAN ON THE CENTER'S BOARD OF TRUSTEES WHEN DR BEACHY ASSUMED HIS POSITION AT NIFA, PHILIP NEEDLEMAN, PH D , MEMBER OF THE CENTER'S BOARD OF TRUSTEES WAS APPOINTED INTERIM PRESIDENT, AND HE SERVED IN THAT ROLE AS A PAID EMPLOYEE FROM OCTOBER 2009 THROUGH APRIL 2011 DR BEACHY RESIGNED HIS POSITION AT NIFA EFFECTIVE MAY 20, 2011 AND RETURNED TO THE CENTER AS A PRINCIPAL INVESTIGATOR AND VICE CHAIRMAN ON THE CENTER'S BOARD OF TRUSTEES AT THE END OF 2010, THE CENTER ANNOUNCED THAT DR JAMES C CARRINGTON WOULD BE HIRED AS THE CENTER'S NEW PRESIDENT EFFECTIVE MAY 1, 2011 BEFORE JOINING THE DANFORTH CENTER, CARRINGTON SERVED AS DIRECTOR OF THE CENTER FOR GENOME RESEARCH, THE STEWART PROFESSOR FOR GENE RESEARCH, AND DISTINGUISHED PROFESSOR OF BOTANY AND PLANT PATHOLOGY AT OREGON STATE UNIVERSITY IN CORVALLIS, OREGON CARRINGTON IS THE RECIPIENT OF NUMEROUS AWARDS, INCLUDING THE PRESIDENTIAL YOUNG INVESTIGATOR AWARD FROM THE NATIONAL SCIENCE FOUNDATION, THE RUTH ALLEN AWARD FROM THE AMERICAN SOCIETY FOR PHYTOPATHOLOGY AND THE HUMBOLDT RESEARCH AWARD FROM THE ALEXANDER VON HUMBOLDT FOUNDATION HE IS A MEMBER OF THE NATIONAL ACADEMY OF SCIENCES AND A FELLOW OF THE AMERICAN ACADEMY OF MICROBIOLOGY, THE AMERICAN PHYTOPATHOLOGICAL SOCIETY , AND THE AMERICAN ASSOCIATION FOR THE ADVANCEMENT OF SCIENCE FROM JANUARY THROUGH APRIL OF 2011, DR CARRINGTON WAS PAID CONSULTING FEES OF \$28,500 WHILE PROVIDING MANAGEMENT SERVICES TO THE CENTER ON A CONTRACT BASIS PRIOR TO HIS HIRE DATE

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
DONALD DANFORTH PLANT SCIENCE CENTER

Employer identification number
31-1584621

Part I

Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) DANFORTH PLANT SCIENCE TRUST 3 MELROSE BLVD THIRD FLOOR JOHANNESBURG SF	RESEARCH	SF	0	375	DDPSC

Part II

Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization	
						Yes	No

Part III

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

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

Part IV

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

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

Part V

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

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

1

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

a

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

b

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

c

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

d

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

e

Loans or loan guarantees by related organization(s)

f

Sale of assets to related organization(s)

g

Purchase of assets from related organization(s)

h

Exchange of assets with related organization(s)

i

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

j

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

k

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

l

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

m

Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

n

Sharing of paid employees with related organization(s)

o

Reimbursement paid to related organization(s) for expenses

p

Reimbursement paid by related organization(s) for expenses

q

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

r

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

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

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

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

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

[illegible]

Part VII

Supplemental Information

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

Identifier	Return Reference	Explanation	
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Additional Data

Software ID:

Software Version:

EIN: 31-1584621

Name: DONALD DANFORTH PLANT SCIENCE CENTER

Form 990, Special Condition Description:

Special Condition Description

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
DR WILLIAM H DANFORTH CHAIRMAN	6 0	X		X				0	0	0
DR ALEX MCCALLA TRUSTEE	1 0	X						0	0	0
DR P ROY VAGELOS TRUSTEE	2 0	X						0	0	0
DR MARK S WRIGHTON TRUSTEE	1 0	X						0	0	0
DR USHA BARWALE ZEHR TRUSTEE	1 0	X						0	0	0
MR JOHN F MCDONNELL VICE CHAIRMAN OF BOARD	1 0	X						0	0	0
MR DAVID KEMPER TRUSTEE	1 0	X						0	0	0
DR BRADY J DEATON TRUSTEE	1 0	X						0	0	0
MR HUGH GRANT TRUSTEE	1 0	X						0	0	0
DR PHILIP NEEDLEMAN INTERIM PRESIDENT/TRUSTEE	24 0	X		X				66,667	0	0
DR ROBERT L VIRGIL TRUSTEE	1 0	X						0	0	0
MR DANIEL BURKHARDT TRUSTEE	1 0	X						0	0	0
MR ALFONSO ROMO-GARZA TRUSTEE	1 0	X						0	0	0
DR ROGER BEACHY VICE CHAIRMAN OF BOARD	40 0	X		X				509,339	0	35,621
MR ARNOLD W DONALD TRUSTEE	1 0	X						0	0	0
DR ROBERT A EASTER TRUSTEE	1 0	X						0	0	0
DR PETER WYSE JACKSON TRUSTEE	1 0	X						0	0	0
MR CHRISTOPHER S BOND TRUSTEE	1 0	X						0	0	0
MR BRETT A CAMPBELL TRUSTEE	1 0	X						0	0	0
MR CHRISTOPHER BORDERS DANFORTH TRUSTEE	1 0	X						0	0	0
MR TODD R SCHNUCK TRUSTEE	1 0	X						0	0	0
MS MARY DANFORTH STILLMAN TRUSTEE	1 0	X						0	0	0
DR ERIC R WARD TRUSTEE	1 0	X						0	0	0
DR PHYLLIS M WISE TRUSTEE	1 0	X						0	0	0
MR WALTER METCALFE JR SECRETARY	1 0			X				0	0	0

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MR SALVATORE FIORELLO CHIEF OPERATING OFFICER	40 0			X				314,360	0	45,651
MR HAROLD DAVIES CHIEF FINANCIAL OFFICER	40 0			X				196,686	0	34,979
DR JAMES C CARRINGTON PRESIDENT	40 0			X				406,399	0	39,273
MS DIANE M MOLESKI ASSISTANT SECRETARY	40 0			X				54,847	0	15,077
MR JAN JAWORSKI MEMBER/PRINCIPAL INVESTIGATOR	40 0				X			227,230	0	22,072
MS LAURA CHAUVIN MEMBER/PRINCIPAL INVESTIGATOR	40 0				X			179,874	0	39,909
DR TONI KUTCHAN MEMBER/PRINCIPAL INVESTIGATOR	40 0				X			175,054	0	21,429
MR CLAUDE FAUQUET DIRECTOR ILTAB	40 0					X		217,687	0	32,252
MR THOMAS SMITH MEMBER/PRINCIPAL INVESTIGATOR	40 0					X		208,475	0	17,914
MR PAUL ANDERSON MEMBER/PRINCIPAL INVESTIGATOR	40 0					X		197,892	0	31,666
DR RICHARD SAYRE DIRECTOR ENTERPRISE INSTITUTE	40 0					X		170,967	0	25,998
DR JAMES UMEN MEMBER/PRINCIPAL INVESTIGATOR	40 0					X		173,469	0	11,873