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Part III

Statement of Program Service Accomplishments

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

☐ Yes ☒ No

1

Briefly describe the organization's mission

WE DISCOVER PRECISE GENOMIC SOLUTIONS FOR DISEASE AND EMPOWER THE GLOBAL BIOMEDICAL COMMUNITY IN THE SHARED QUEST TO IMPROVE HUMAN HEALTH

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 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 \$ 98,534,564 including grants of \$) (Revenue \$ 158,899,432)
	DEVELOP AND PROVIDE GENETIC RESOURCES - PLEASE SEE SCHEDULE O FOR DETAIL
4b	(Code) (Expenses \$ 71,261,553 including grants of \$) (Revenue \$ 450,851)
	BIOMEDICAL RESEARCH - PLEASE SEE SCHEDULE O FOR DETAIL
4c	(Code) (Expenses \$ 2,583,927 including grants of \$) (Revenue \$ 480,288)
	EDUCATION AND TRAINING - PLEASE SEE SCHEDULE O FOR DETAIL
4d	Other program services (Describe in Schedule O)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 172,380,044

Part IV Checklist of Required Schedules

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

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <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 lines 24b through 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	Yes	
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, highest 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 employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <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	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <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		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If "Yes" to line 35a, 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		
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 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

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

☐

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	166	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	2a	1,661
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	Yes
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	3b	Yes
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, securities account, or other financial account)?	4a	No
b	If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
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 as charitable contributions?	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 8822?	7c	No
d	If "Yes," indicate the number of Forms 8822 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. See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b	
c	Enter the 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	22	
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent	1b	20	
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 this 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		No
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		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	CA , CT , FL , ME , MA , NY , PA
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 checked="" type="checkbox"/> Own website <input checked="" type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O)	
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 during the tax year	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	LINDA A JENSEN 600 MAIN STREET BAR HARBOR, ME (207) 288-6108

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 all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

• List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

* List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

[illegible]

Part VII

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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			
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)							4,562,481	0	933,687	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization▶115

		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
COLUMBUS IT PARTNERS , 750 WASHINGTON BOULEVARD 5TH FLOOR STAMFORD CT 06901	IT CONSULTING	1,419,445
VELOCITY TECHNOLOGY SOLUTIONS INC , 850 THIRD AVENUE NEW YORK NY 10022	IT CONSULTING	655,781
CENTERBROOK ARCH AND PLANNERS LLP , 67 MAIN STREET CENTERBROOK CT 06409	ARCH/CONTR MGMT	3,960,962
BVH INTEGRATED SERVICES INC , 50 GRIFFIN ROAD S BLOOMFIELD CT 06002	ARCH ENGINEERING	1,590,259
HURON CONSULTING , 550 W VAN BUREN STREET CHICAGO IL 60607	IT CONSULTING	928,983

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 ►21

Part VIII

Statement of Revenue

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

				(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	172,222			
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	57,810,755			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	9,288,136			
	g	Noncash contributions included in lines 1a-1f \$		163,086			
	h	Total. Add lines 1a-1f		67,271,113			
Program Service Revenue	2a	GENETIC RESOURCES	Business Code 541710	158,899,432	158,899,432		
	b	TRAINING & EDUCATION	541710	480,288	480,288		
	c	RESEARCH	541710	450,851	450,851		
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		159,830,571			
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		1,809,695		3,588
4		Income from investment of tax-exempt bond proceeds . . .		0			
5		Royalties		1,082,097			1,082,097
6a		(i) Real					
		(ii) Personal					
b		Less rental expenses					
c		Rental income or (loss)		0	0		
d		Net rental income or (loss)		0			
7a		(i) Securities					
		(ii) Other					
b		Less cost or other basis and sales expenses					
c		Gain or (loss)		968,486	18,531		
d		Net gain or (loss)		987,017			987,017
8a		Gross income from fundraising events (not including \$ 172,222 of contributions reported on line 1c) See Part IV, line 18					
		a	6,888				
		b	126,078				
c		Net income or (loss) from fundraising events . . .		-119,190			-119,190
9a		Gross income from gaming activities See Part IV, line 19					
	a						
	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						
c	Net income or (loss) from sales of inventory . . .		0				
Miscellaneous Revenue		Business Code					
11a	OTHER REVENUE		900099	218,678	218,678		
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d		218,678				
12	Total revenue. See Instructions		231,079,981	160,049,249	3,588	3,756,031	

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).

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

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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.	0			
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.	0			
4	Benefits paid to or for members.	0			
5	Compensation of current officers, directors, trustees, and key employees.	4,464,193	445,606	4,018,587	
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.	80,595,983	67,585,995	11,841,782	1,168,206
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	6,387,713	5,811,292	475,444	100,977
9	Other employee benefits.	14,460,966	12,823,631	1,411,728	225,607
10	Payroll taxes.	6,026,440	5,070,120	868,684	87,636
11	Fees for services (non-employees):				
a	Management.	0			
b	Legal.	1,274,979	743,755	530,713	511
c	Accounting.	343,044	70,000	273,044	
d	Lobbying.	56,165		56,165	
e	Professional fundraising services. See Part IV, line 17.	0			
f	Investment management fees.	200,000		200,000	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	5,123,310	2,837,244	2,038,293	247,773
12	Advertising and promotion.	696,848	639,774	57,074	
13	Office expenses.	2,163,817	1,725,776	343,496	94,545
14	Information technology.	3,060,618	2,520,973	497,323	42,322
15	Royalties.	95,642	85,642	10,000	
16	Occupancy.	10,795,207	9,471,700	1,291,266	32,241
17	Travel.	4,264,883	3,421,932	579,434	263,517
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.	0			
19	Conferences, conventions, and meetings.	406,379	332,801	69,534	4,044
20	Interest.	3,361,259	3,342,313	18,946	
21	Payments to affiliates.	0			
22	Depreciation, depletion, and amortization.	19,335,692	17,485,490	1,770,315	79,887
23	Insurance.	1,347,178	1,226,634	115,339	5,205
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O):				
a	OTHER SERVICES	1,327,369	1,144,375	179,109	3,885
b	STIPENDS	518,010	517,610	400	
c	SUPPLIES	31,580,509	30,140,328	1,401,979	38,202
d	EQUIPMENT RENTAL	274,664	208,594	58,615	7,455
e	All other expenses	4,791,318	4,728,459	61,919	940
25	Total functional expenses. Add lines 1 through 24e.	202,952,186	172,380,044	28,169,189	2,402,953
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X

Balance Sheet

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

				(A)		(B)	
				Beginning of year		End of year	
Assets	1	Cash—non-interest-bearing		25,000	1	25,000	
	2	Savings and temporary cash investments		112,670,128	2	127,411,597	
	3	Pledges and grants receivable, net		7,585,709	3	7,608,605	
	4	Accounts receivable, net		15,116,879	4	16,269,357	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		0	5	0	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		0	6	0	
	7	Notes and loans receivable, net		1,400,000	7	1,400,000	
	8	Inventories for sale or use		1,781,697	8	2,113,025	
	9	Prepaid expenses and deferred charges		2,944,913	9	3,745,110	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	446,277,712			
	b	Less accumulated depreciation	10b	200,693,511	216,643,844	10c	245,584,201
	11	Investments—publicly traded securities		43,862,800	11	50,547,308	
	12	Investments—other securities See Part IV, line 11		36,978,265	12	40,207,968	
	13	Investments—program-related See Part IV, line 11		0	13	0	
	14	Intangible assets		0	14	0	
	Liabilities	15	Other assets See Part IV, line 11		6,412,541	15	32,126,107
16		Total assets. Add lines 1 through 15 (must equal line 34)		445,421,776	16	527,038,278	
17		Accounts payable and accrued expenses		25,314,041	17	35,361,286	
18		Grants payable		0	18	0	
19		Deferred revenue		6,367,013	19	8,529,837	
20		Tax-exempt bond liabilities		77,905,017	20	109,371,484	
21		Escrow or custodial account liability Complete Part IV of Schedule D		0	21	0	
22		Loans and other 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	5,262,000	
24		Unsecured notes and loans payable to unrelated third parties		0	24	0	
Net Assets or Fund Balances	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		18,456,318	25	17,493,153	
	26	Total liabilities. Add lines 17 through 25		128,042,389	26	176,017,760	
	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets		277,744,544	27	310,202,312	
	28	Temporarily restricted net assets		31,242,332	28	32,170,686	
	29	Permanently restricted net assets		8,392,511	29	8,647,520	
	Organizations that do not follow SFAS 117 (ASC 958), 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		317,379,387	33	351,020,518		
34	Total liabilities and net assets/fund balances		445,421,776	34	527,038,278		

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	231,079,981
2	Total expenses (must equal Part IX, column (A), line 25)	2	202,952,186
3	Revenue less expenses Subtract line 2 from line 1	3	28,127,795
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	317,379,387
5	Net unrealized gains (losses) on investments	5	7,481,727
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-1,968,391
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	351,020,518

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? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed 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 separate basis	Yes	
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited 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 separate basis	Yes	
2c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
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	
3b	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	

Additional Data

Software ID:

Software Version:

EIN: 01-0211513

Name: THE JACKSON LABORATORY

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 (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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			
EDISON T LIU MD CHIEF EXECUTIVE OFFICER	40 0	X		X				786,307	0	122,116
CHARLES E HEWETT PHD Executive VP & COO	40 0	X		X				655,809	0	250,209
DAVID R CABOT TRUSTEE	1 0	X						0	0	0
KATHLEEN A CORBET TRUSTEE	1 0	X						0	0	0
LOUIS J D'AMBROSIO TRUSTEE	1 0	X						0	0	0
ROSS E DWORMAN TRUSTEE	1 0	X						0	0	0
DAVID D ELLIMAN TRUSTEE	1 0	X						0	0	0
JAMES J GALLOGLY TREASURER	1 0	X		X				0	0	0
RICHARD S GURIN TRUSTEE	1 0	X						0	0	0
LEO A HOLT TRUSTEE	1 0	X						0	0	0
WESLIE R JANEWAY TRUSTEE	1 0	X						0	0	0
RICHARD S LANNAMANN TRUSTEE	1 0	X						0	0	0
SAM R LITTLE TRUSTEE	1 0	X						0	0	0
DAVID J ROUX TRUSTEE	1 0	X						0	0	0
TOM S VOLPE TRUSTEE	1 0	X						0	0	0
PETER GERRITY SECRETARY	1 0	X		X				0	0	0
EDWARD L SAMEK TREASURER	1 0	X		X				0	0	0
DAVID BALTIMORE PHD TRUSTEE	1 0	X						0	0	0
JEFFREY M DUNN MD TRUSTEE	1 0	X						0	0	0
ANTHONY B EVNIN PHD TRUSTEE	1 0	X						0	0	0
WILLIAM S HARWOOD ESQ TRUSTEE	1 0	X						0	0	0
TOM P MANIATIS PHD TRUSTEE	1 0	X						0	0	0
NEAL B MILCH JD TRUSTEE	1 0	X						0	0	0
CHARLES M RICE PHD TRUSTEE	1 0	X						0	0	0
SHIRLEY M TILGHMAN PHD TRUSTEE	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 (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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			
DAVID VALLE TRUSTEE	1 0	X						0	0	0
JANA ROBINSON ASSISTANT SECRETARY	40 0			X				50,224	0	29,800
JOSEPH VETELINO ASSISTANT TREASURER	40 0			X				104,861	0	34,862
MICHAEL HYDE VP EXT AFFAIRS & STRAT PSHIPS	40 0			X				313,339	0	62,513
LINDA A JENSEN MS CHIEF FINANCIAL OFFICER	40 0			X				312,181	0	57,280
KATHY L VANDEGRIFT ASSOC GEN MGR JMS	40 0				X			267,166	0	45,172
LEAH RAE B DONAHUE PHD DIR GENETIC RESOURCE SCIENCE	40 0				X			218,305	0	47,352
AUROBINDO NAIR PHD GM SCIENTIFIC RESEARCH SVCS	40 0				X			312,870	0	55,288
ROBERT BRAUN PHD VP RESEARCH	40 0				X			334,531	0	36,110
MICHAEL WATERS SR DIR OPPORTUNITY DVLPMT	40 0					X		212,115	0	49,493
LINDA WATERMAN DVM SR DIR LAB ANIMAL HEALTH	40 0					X		236,243	0	25,763
JANAN T EPPIG PHD PROFESSOR	40 0					X		226,593	0	41,490
GARY A CHURCHILL PHD PROFESSOR	40 0					X		210,903	0	50,535
JOANNE RUH CHIEF INFORMATION OFFICER	40 0					X		321,034	0	25,704

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

2012

Open to Public Inspection

Name of the organization THE JACKSON LABORATORY	Employer identification number 01-0211513
----------------------------------------------------	----------------------------------------------

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 described in **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 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 33¹/₃% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33¹/₃% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10

☐

An organization organized and operated exclusively to test for public safety See **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 - Non-functionally integrated
- 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 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 monetary support |
|------------------------------------|----------|----------------------------------------------------------------------------------------------|------------------------------------------------------------------------|----|-----------------------------------------------------------------|----|------------------------------------------------------------|----|----------------------------------|
| | | | Yes | No | Yes | No | Yes | No | |
| | | | | | | | | | |
| | | | | | | | | | |
| Total | | | | | | | | | |
- For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990EZ.

Cat No 11285F

Schedule A (Form 990 or 990-EZ) 2012

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	66,396,577	69,040,663	73,823,292	41,644,804	67,271,113	318,176,449
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 Total. Add lines 1 through 3	66,396,577	69,040,663	73,823,292	41,644,804	67,271,113	318,176,449
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)						0
6 Public support. Subtract line 5 from line 4						318,176,449

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	66,396,577	69,040,663	73,823,292	41,644,804	67,271,113	318,176,449
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4,253,688	3,370,975	2,954,194	2,311,932	2,888,204	15,778,993
9 Net income from unrelated business activities, whether or not the business is regularly carried on	0	21,308	48,973	33,525	3,588	107,394
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						0
11 Total support (Add lines 7 through 10)						334,062,836
12 Gross receipts from related activities, etc. (see instructions)					12	622,923,873
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 2012 (line 6, column (f) divided by line 11, column (f))	14	95.244 %
15 Public support percentage for 2011 Schedule A, Part II, line 14	15	94.740 %
16a 33 1/3% support test—2012. 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—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		
17a 10%-facts-and-circumstances test—2012. 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—2011. 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 IIISupport Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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 2012 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2012. 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—2011. 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.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and 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

2012

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, Part V, line 35c (Proxy Tax), then

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

Name of the organization THE JACKSON LABORATORY	Employer identification number 01-0211513
----------------------------------------------------	--------------------------------------------------

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 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?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4a	Was a correction made?	<input type="checkbox"/> Yes <input type="checkbox"/> 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 function 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?	<input type="checkbox"/> Yes <input type="checkbox"/> 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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable 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)).

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.		(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			38,698
	h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No		
	i Other activities?				
j	Total Add lines 1c through 1i			38,698	
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 carry over 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) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1	Dues, assessments and similar amounts from members.	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	2a	
a	Current year.		
b	Carryover from last year.		
c	Total.		
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, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1. Also, complete this part for any additional information.

Identifier	Return Reference	Explanation
LOBBYING ACTIVITY BY NON-ELECTING 501(C)(3) ORGANIZATION	PART II-B, LINE 1G	ADVOCACY ACTIVITIES IN MAINE AND CONNECTICUT ARE UNDERTAKEN BY THE JACKSON LABORATORY. MAINE ACTIVITIES ARE UNDERTAKEN BY THE DIRECTOR, OFFICE OF GOVERNMENTAL RELATIONS AT THE JACKSON LABORATORY, AND CONNECTICUT ACTIVITIES ARE UNDERTAKEN BY THE VICE PRESIDENT OF EXTERNAL AFFAIRS. THE TOTAL LOBBYING EXPENSE FOR THE YEAR ENDED DECEMBER 31, 2012 WAS \$38,698, WHICH WAS AN ALLOCATION OF EMPLOYEE COMPENSATION FOR LOBBYING ACTIVITIES. THERE WERE NO OUTSIDE LOBBYING FIRMS OR GROUPS ENGAGED DURING THIS PERIOD.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
THE JACKSON LABORATORY

Employer identification number

01-0211513

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 can 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 education) ☐ Preservation of an historically important land area

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

☐ Preservation of open space

2

Complete lines 2a through 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, and not on a historic structure listed in the National Register

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 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 section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9

In Part XIII, 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 (ASC 958), 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 XIII, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116 (ASC 958), 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 (ASC 958) relating to these items

a

Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

b

Assets included in Form 990, Part X

▶ \$ _____

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

Cat No 52283D

Schedule D (Form 990) 2012

Part III

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

- 3

Using the organization's acquisition, 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 XIII
- 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 XIII and complete the following table

	Amount
1c	
1d	
1e	
1f	
- 2a

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

☐ Yes

☐ No
- b

If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

☐

Part V

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

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance	80,841,065	87,452,850	74,765,000	58,922,000	80,042,000
b Contributions	1,280,959	74,725	2,345,649	6,051,000	76,000
c Net investment earnings, gains, and losses	9,091,700	-5,827,854	10,790,669	10,277,000	-20,682,000
d Grants or scholarships					
e Other expenditures for facilities and programs	458,448	858,656	448,468	485,000	514,000
f Administrative expenses					
g End of year balance	90,755,276	80,841,065	87,452,850	74,765,000	58,922,000

- 2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment ▶ 60 000 %

b

Permanent endowment ▶ 9 000 %

c

Temporarily restricted endowment ▶ 31 000 %

The percentages in lines 2a, 2b, and 2c should equal 100%
- 3a

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

(i) unrelated organizations

3a(i)

☐ Yes

☐ No

(ii) related organizations

3a(ii)

☐ Yes

☐ No
- b

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

3b
- 4

Describe in Part XIII 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	0	5,642,031		5,642,031
b Buildings	0	313,744,347	135,618,343	178,126,004
c Leasehold improvements				
d Equipment	0	97,886,772	65,075,168	32,811,604
e Other	0	29,004,562	0	29,004,562
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) ▶				245,584,201

Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	236,467,262
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	2e	
a	Net unrealized gains on investments	2a	7,481,727
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	-1,968,391
e	Add lines 2a through 2d	2e	5,513,336
3	Subtract line 2e from line 1	3	230,953,926
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	4c	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	252,133
b	Other (Describe in Part XIII)	4b	-126,078
c	Add lines 4a and 4b	4c	126,055
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	231,079,981

Part XII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	202,826,131
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	2e	
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	126,078
e	Add lines 2a through 2d	2e	126,078
3	Subtract line 2e from line 1	3	202,700,053
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	4c	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	252,133
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	252,133
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	202,952,186

Part XIII

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, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
ENDOWMENT FUNDS	PART V, LINE 4	THE INVESTMENT AND SPENDING POLICIES FOR THE ENDOWMENT ASSETS HAVE BEEN ESTABLISHED TO PROVIDE A PREDICTABLE STREAM OF FUNDING FOR THE PROGRAMS SUPPORTED BY ENDOWMENT INCOME, WHILE SEEKING TO MAINTAIN THE PURCHASING POWER OF THE ENDOWMENT ASSETS. IN ADDITION, WHEN CONSIDERING THE AMOUNT OF INCOME TO APPROPRIATE FROM BOARD-DESIGNATED ASSETS, THE TRUSTEES CONSIDER THE NEED TO MAINTAIN UNRESTRICTED ASSETS TO MEET LIQUIDITY COVENANTS RELATED TO OUTSTANDING BONDS. ACCORDINGLY, THE BOARD OF TRUSTEES HAS SET THE INVESTMENT ALLOCATION TO ACHIEVE A NOMINAL RATE OF RETURN THAT WILL AT LEAST COVER INFLATION AND THE SPEND RATE WITH A PRUDENT LEVEL OF RISK. THE INVESTMENT ALLOCATION FOR THE BOARD-DESIGNATED PORTION OF THE ENDOWMENT IS SET TO ACHIEVE GREATER STABILITY IN THE VALUE OF INVESTMENTS. THE BOARD ALLOCATED 4% OF THE THREE YEAR AVERAGE VALUE OF DONOR-DESIGNATED ENDOWMENT BALANCES TO SUPPORT THE DESIGNATED PROGRAMS. ALL EARNINGS ON DONOR ENDOWMENTS ESTABLISHED TO PROVIDE GENERAL SUPPORT FOR THE LABORATORY AS APPROVED BY THE BOARD OF TRUSTEES WERE RETAINED IN THE ENDOWMENT. THE BOARD OF TRUSTEES WISHES TO INCREASE THE AMOUNT OF ENDOWMENT SUPPORT AVAILABLE IN THE FUTURE.
LIABILITY FOR UNCERTAIN TAX POSITIONS UNDER FIN 48 (ASC 740)	PART X, LINE 2	THE LABORATORY IS A NOT-FOR-PROFIT ORGANIZATION AS DESCRIBED IN SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (THE CODE), AS AMENDED, AND IS GENERALLY EXEMPT FROM INCOME TAXES PURSUANT TO THE CODE. IN ACCORDANCE WITH GAAP, THE LABORATORY ASSESSES WHETHER THERE ARE UNCERTAIN TAX POSITIONS AND DETERMINED THERE WERE NO UNCERTAIN TAX POSITIONS THAT WOULD HAVE A MATERIAL EFFECT ON THE FINANCIAL STATEMENTS.
OTHER REVENUE ON FINANCIAL STATEMENTS NOT ON RETURN	PART XI, LINE 4B	RECLASS OF FUNDRAISING EXPENSES (126,078)
OTHER EXPENSES INCLUDED IN FINANCIAL STATEMENT NOT ON RETURN	PART XII, LINE 2D	RECLASS OF FUNDRAISING EXPENSES 126,078
OTHER LOSS ON FINANCIAL STATEMENTS NOT ON RETURN	PART XI, LINE 2D	UNREALIZED GAINS ON INTEREST RATE SWAPS 231,042 CHANGES IN ACTUARIAL ASSUMPTIONS 638,693 FAIR MARKET VALUE ADJUSTMENT ON LOANS 3,642,843 LOSS ON BOND REFUND (6,480,969) TOTAL (1,968,391)

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. Part II can be duplicated if additional space is needed.

[illegible]

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 ►

3 Enter total number of other organizations or entities ►

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, Return by a U.S. Transferor of Property to a Foreign Corporation (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, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (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 required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

[illegible]

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Form 990-EZ filers are not required to complete this part.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public
Inspection

Name of the organization
THE JACKSON LABORATORY

Employer identification number
01-0211513

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a ☒ Mail solicitations

b ☒ Internet and email solicitations

c ☒ Phone solicitations

d ☒ In-person solicitations

e ☒ Solicitation of non-government grants

f ☒ Solicitation of government grants

g ☒ Special fundraising events
- 2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☒ **Yes** ☐ **No**

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
CHRISTINA RUSSELL 206 BURWELL AVENUE HENDERSON, NC 27536	FDN GRANT CONSULTING		No		28,803	
Total ▶					28,803	

- 3** List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

CA, CT, FL, ME, MA, NY, PA

.....

.....

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

Revenue			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
			<u>DISC DAY</u>	<u>DISC LUNCH</u>	<u>2</u>	(add col (a) through	
			(event type)	(event type)	(total number)	col (c))	
1	Gross receipts	. . .	97,645	61,815	19,650	179,110	
2	Less Contributions	. .	94,345	58,227	19,650	172,222	
3	Gross income (line 1 minus line 2)	. . .	3,300	3,588		6,888	
Direct Expenses	4	Cash prizes	. . .				
	5	Noncash prizes	. .				
	6	Rent/facility costs	. .				
	7	Food and beverages	.				
	8	Entertainment	. . .				
	9	Other direct expenses	.	79,575	35,127	11,376	126,078
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶					(126,078)
	11	Net income summary Combine line 3, column (d), and line 10 ▶					-119,190

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<div><input type="checkbox"/> Yes..... <input type="checkbox"/> No</div>	<div><input type="checkbox"/> Yes..... <input type="checkbox"/> No</div>	<div><input type="checkbox"/> Yes..... <input type="checkbox"/> No</div>	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary Combine lines 1 and 7 in column (d) ▶				

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states?

☐ Yes ☐ No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

☐ Yes ☐ No

b If "Yes," explain _____

Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity operated in

a The organization's facility	13a	
b An outside facility	13b	

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____

c If "Yes," enter name and address of the third party

Name ▶

Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Identifier	Return Reference	Explanation
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Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
THE JACKSON LABORATORY

Employer identification number
01-0211513

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			
	<div><input type="checkbox"/> First-class or charter travel</div> <div><input type="checkbox"/> Travel for companions</div> <div><input checked="" type="checkbox"/> Tax idemnification and gross-up payments</div> <div><input type="checkbox"/> Discretionary spending account</div>	<div><input type="checkbox"/> Housing allowance or residence for personal use</div> <div><input type="checkbox"/> Payments for business use of personal residence</div> <div><input type="checkbox"/> Health or social club dues or initiation fees</div> <div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div>		
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 of 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 filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	<div><input checked="" type="checkbox"/> Compensation committee</div> <div><input checked="" type="checkbox"/> Independent compensation consultant</div> <div><input checked="" type="checkbox"/> Form 990 of other organizations</div>	<div><input type="checkbox"/> Written employment contract</div> <div><input checked="" type="checkbox"/> Compensation survey or study</div> <div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div>		
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	Yes	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes	
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	Yes	
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		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 duplicate copies if additional space is needed.

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

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

(A) Name and Title		(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 as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
See Additional Data Table								

Part III **Supplemental Information**

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
BENEFITS	PART I, LINE 1A	TAX INDEMNIFICATION AND GROSS-UP PAYMENTS. THE JACKSON LABORATORY GROSSES UP THE AMOUNT ADDED TO WAGES FOR IMPUTED INSURANCE PREMIUMS FOR THE SENIOR MANAGEMENT GROUP TO COVER TAXES. THE LABORATORY ALSO GROSSES UP WAGES TO COVER THE TAX IMPACT OF GIFT CARDS AND OTHER AWARDS OR PRIZES TO EMPLOYEES SO THAT THE RECIPIENTS RECEIVE THE FULL VALUE OF THE GIFT OR AWARD.
SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN	PART I, LINE 4B	THE LABORATORY MAINTAINS A DEFERRED COMPENSATION PLAN UNDER SECTION 457(F). THE PRESIDENT/CEO AND EXECUTIVE VICE PRESIDENT/COO PARTICIPATE IN A NON-QUALIFIED SUPPLEMENTAL RETIREMENT PLAN THAT PROVIDES FOR A PORTION OF THEIR COMPENSATION TO BE DEFERRED UNDER A SECTION 457 (F) PLAN. THE AMOUNT TAXABLE TO THE EXECUTIVE VICE PRESIDENT/COO UNDER THE PLAN DURING THE YEAR IS \$86,710.
NON-FIXED PAYMENTS	PART I, LINE 7	THE TOTAL COMPENSATION PACKAGE OF CERTAIN OFFICERS, KEY EMPLOYEES, AND OTHER EMPLOYEES INCLUDES VARIABLE COMPENSATION AWARDED BASED ON PERFORMANCE.
SEVERANCE PAYMENT	PART I, LINE 4A	THE JACKSON LABORATORY PAID SEVERANCE OF \$20,790 TO THE CHIEF INFORMATION OFFICER DURING THE YEAR.

Software ID:
Software Version:
EIN: 01-0211513
Name: THE JACKSON LABORATORY

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) 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 compensation				
EDISON T LIU MD	(i) (ii)	716,254 0	0 0	70,053 0	98,173 0	23,943 0	908,423 0	0 0
CHARLES E HEWETT PHD	(i) (ii)	514,721 0	29,166 0	111,922 0	227,602 0	22,607 0	906,018 0	99,500 0
MICHAEL HYDE	(i) (ii)	251,111 0	20,417 0	41,811 0	25,000 0	37,513 0	375,852 0	0 0
LINDA A JENSEN MS	(i) (ii)	262,171 0	35,000 0	15,010 0	25,000 0	32,280 0	369,461 0	0 0
KATHY L VANDEGRIFT	(i) (ii)	227,734 0	33,201 0	6,231 0	21,886 0	23,286 0	312,338 0	0 0
LEAH RAE B DONAHUE PHD	(i) (ii)	182,427 0	17,500 0	18,378 0	18,850 0	28,502 0	265,657 0	0 0
AUROBINDO NAIR PHD	(i) (ii)	262,496 0	38,117 0	12,257 0	25,000 0	30,288 0	368,158 0	0 0
ROBERT BRAUN PHD	(i) (ii)	302,118 0	5,833 0	26,580 0	25,000 0	11,110 0	370,641 0	0 0
MICHAEL WATERS	(i) (ii)	170,373 0	33,550 0	8,192 0	19,315 0	30,178 0	261,608 0	0 0
LINDA WATERMAN DVM	(i) (ii)	191,434 0	38,000 0	6,809 0	16,722 0	9,041 0	262,006 0	0 0
JANAN T EPPIG PHD	(i) (ii)	226,593 0	0 0	0 0	22,744 0	18,746 0	268,083 0	0 0
GARY A CHURCHILL PHD	(i) (ii)	207,274 0	0 0	3,629 0	21,223 0	29,312 0	261,438 0	0 0
JOANNE RUH	(i) (ii)	268,050 0	47,000 0	5,984 0	24,468 0	1,236 0	346,738 0	0 0

Schedule K
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
THE JACKSON LABORATORY

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Employer identification number
01-0211513

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	ABAG FINANCE AUTHORITY FOR NONPROFIT CORPORATIONS	94-3130123	00037CLX6	09-12-2007	35,075,000	FINANCE CONSTRUCTION & REFUND	X			X		X
B	FINANCE AUTHORITY OF MAINE	04-2456011		08-31-2012	42,460,000	REFUND		X		X		X
C	ABAG FINANCE AUTHORITY FOR NONPROFIT CORPORATIONS	94-3130123	00037CTH3	10-24-2012	66,355,769	FINANCE CONSTRUCTION & REFUND		X		X		X

Part II Proceeds

		A		B		C		D	
1	Amount of bonds retired	1,200,000		0		0			
2	Amount of bonds legally defeased	33,025,000		0		0			
3	Total proceeds of issue	35,075,000		42,460,000		66,355,769			
4	Gross proceeds in reserve funds	0		0		0			
5	Capitalized interest from proceeds	1,004,292		0		0			
6	Proceeds in refunding escrows	0		42,460,000		39,067,111			
7	Issuance costs from proceeds	456,682		0		623,401			
8	Credit enhancement from proceeds	0		0		0			
9	Working capital expenditures from proceeds	0		0		0			
10	Capital expenditures from proceeds	31,597,588		0		26,665,257			
11	Other spent proceeds	2,016,438		0		0			
12	Other unspent proceeds	0		0		0			
13	Year of substantial completion	2009		2002		2013			
14	Were the bonds issued as part of a current refunding issue?	Yes	No	Yes	No	Yes	No	Yes	No
		X		X			X		
15	Were the bonds issued as part of an advance refunding issue?		X		X	X			
16	Has the final allocation of proceeds been made?	X		X			X		
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X			

Part III Private Business Use

		A		B		C		D	
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?	Yes	No	Yes	No	Yes	No	Yes	No
			X		X		X		
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X		X		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 of bond-financed property?	X			X	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?	X			X	X			
c	Are there any research agreements that may result in private business use of bond-financed property?	X		X		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?	X		X		X			
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%		0%		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	%		%		%		%	
6	Total of lines 4 and 5	0%		0%		0%		%	
7	Does the bond issue meet the private security or payment test?		X		X		X		
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X		X		X		
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of	%		%		%		%	
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?		X		X		X		
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?		X		X		X		

Part IV

Arbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T?		X		X		X		
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?		X		X	X			
b	Exception to rebate?		X		X		X		
c	No rebate due?	X		X			X		
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?		X	X			X		
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X		X		
b	Name of provider	0		0		0			
c	Term of hedge								
d	Was the hedge superintegrated?								
e	Was a hedge terminated?								

Part IV

Arbitrage (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X		X		
b	Name of provider	0		0		0			
c	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		X		X		X		
7	Has the organization established written procedures to monitor the requirements of section 148?		X		X		X		

Part V

Procedures To Undertake Corrective Action

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has 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?	X		X		X			

Part VI

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

Identifier	Return Reference	Explanation
PART IV, LINE 2(C)	0	BOND ISSUE A - NO REBATE DUE, ARBITRAGE CALCULATION PERFORMED 9/11/12 BY AMTEC BOND ISSUE B - NO REBATE DUE, ARBITRAGE CALCULATION PERFORMED 6/30/12 BY AMTEC

Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons
▶ Complete if the organization answered
"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047
2012
Open to Public Inspection

Name of the organization
THE JACKSON LABORATORY

Employer identification number

01-0211513

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) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No

2 Enter the amount of tax incurred by 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-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?	(i) Written agreement?	
			To	From			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 assistance	(d) Type of assistance	(e) Purpose 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) MADELEINE BRAUN	KEY EMPLOYEE-ROBERT BRAUN	140,946	EMPLOYMENT - FAMILY MEMBER		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)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
THE JACKSON LABORATORY

Employer identification number
01-0211513

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash 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	15	161,444	FMV
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				
IN-KIND				
25 Other ► (CONTRIBUTIONS)	X	6	1,642	FMV
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

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?

30a

Yes

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?

31

Yes

32a

Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

32a

No

b

If "Yes," describe in Part II

33

If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

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

Cat No 51227J

Schedule M (Form 990) (2012)

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. 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

2012**Open to Public
Inspection**Name of the organization
THE JACKSON LABORATORY**Employer identification number**

01-0211513

Identifier	Return Reference	Explanation
ORGANIZATION'S MISSION	FORM 990, PART III, LINE 1	THE MISSION OF THE LABORATORY IS TO DISCOVER PRECISE GENOMIC SOLUTIONS FOR DISEASE AND EMPOWER THE GLOBAL BIOMEDICAL COMMUNITY IN THE SHARED QUEST TO IMPROVE HUMAN HEALTH TO ACCOMPLISH THIS MISSION THE LABORATORY 1) CONDUCTS BASIC BIOMEDICAL RESEARCH TO INCREASE THE KNOWLEDGE OF DEVELOPMENT, GROWTH, REPRODUCTION, PHYSIOLOGICAL, AND GENETICALLY DETERMINED AILMENTS THROUGH RESEARCH WITH GENETICALLY DEFINED EXPERIMENTAL ANIMALS, 2) CONDUCTS TRANSLATIONAL BIOMEDICAL RESEARCH TO IDENTIFY THE GENOMIC BASIS FOR HUMAN DISEASE, PROMOTE THE ESTABLISHMENT OF MORE PRECISE, TARGETED THERAPIES, AND OFFER CUTTING EDGE GENOMIC DIAGNOSTICS TO THE MEDICAL COMMUNITY, 3) TRAINS AND EDUCATES SCIENTISTS, PHYSICIANS, AND OTHER PROFESSIONALS IN THESE AREAS, AND 4) PROMOTES SCIENTIFIC DISCOVERY THROUGH THE PROVISION OF MOUSE MODELS OF HUMAN DISEASE AND THE PROVISION OF RESEARCH AND CLINICAL SERVICES TO THE GLOBAL SCIENTIFIC AND MEDICAL COMMUNITY IN 2012, THE LABORATORY ESTABLISHED JAX GENOMIC MEDICINE IN FARMINGTON, CT TO ACCELERATE THE TRANSLATION OF DISCOVERIES MADE IN BASIC RESEARCH TO TREATMENTS FOR HUMAN DISEASE

Identifier	Return Reference	Explanation
PROGRAM SERVICES	FORM 990, PART III, LINE 4A-4C	<p>4A GENETIC RESOURCES THE JACKSON LABORATORY GENERATES AND MAINTAINS AN OPEN-SOURCE MOUSE GENOME DATABASE, THE WORLD'S LARGEST PUBLICALLY ACCESSIBLE INFORMATION SOURCE ABOUT THE LABORATORY MOUSE. IT IS AVAILABLE TO THE WORLDWIDE RESEARCH COMMUNITY, DRIVING DISCOVERY IN CANCER, DIABETES, OSTEOPOROSIS, ALZHEIMER'S DISEASE AND MANY OTHER AREAS CRITICAL TO HUMAN HEALTH. THIS DATABASE EXPERIENCES CLOSE TO 9 MILLION "HITS" PER WEEK. THE LABORATORY'S MOUSE REPOSITORY OFFERED A PORTFOLIO OF OVER 7,400 MOUSE LINES INCLUDING INBRED STRAINS, PANELS OF MICE FOR GENETIC MAPPING, MOLECULAR TOOL STRAINS, AND GENETICALLY ENGINEERED STRAINS. THESE INCLUDED A WIDE SELECTION OF STRAINS GENETICALLY ENGINEERED AS MOUSE MODELS OF HUMAN DISEASES, AMONG THEM CANCER, HEART DISEASE, ALZHEIMER'S DISEASE, ALS, DIABETES, PARKINSON'S DISEASE, SPINAL MUSCULAR ATROPHY, HUNTINGTON'S DISEASE AND VARIOUS AUTOIMMUNE DISEASES. THE JACKSON LABORATORY IS COLLABORATING WITH A COMPONENT OF THE NATIONAL CANCER INSTITUTE, THE UC DAVIS CANCER CENTER, AND OTHER CANCER CENTERS, TO IMPROVE THE SUCCESS RATE OF NEW CANCER DRUGS IN HUMAN CLINICAL TRIALS. UNDER THE COLLABORATION, A RANGE OF GENETICALLY ENGINEERED AND HUMAN TRANSPLANT MOUSE MODEL STUDIES WILL BE INTEGRATED WITH PATIENT TREATMENT CLINICAL TRIAL STUDIES UNDER A UNIFORM AND CONTROLLED TESTING MECHANISM. DATA RESULTING FROM THIS COMBINED APPROACH WILL HELP IDENTIFY MOLECULES (BIOMARKERS) THAT COULD PREDICT CONDITIONS UNDER WHICH CANDIDATE DRUGS WILL BE MOST EFFECTIVE. THE JACKSON LABORATORY HAS A NEW RARE AND ORPHAN DISEASE CENTER TO ADDRESS CONDITIONS THAT, WHILE INDIVIDUALLY RARE, COLLECTIVELY AFFECT ABOUT ONE IN 10 AMERICANS, ACCORDING TO THE NATIONAL ASSOCIATION FOR RARE DISORDERS. ABOUT 80 PERCENT OF RARE DISEASES ARE GENETIC IN ORIGIN, ABOUT HALF AFFECT CHILDREN, MANY ARE FATAL, AND VERY FEW HAVE CURES. RARE CONDITIONS ARE OFTEN DESCRIBED AS "ORPHAN" BECAUSE THEY RECEIVE RELATIVELY LITTLE ATTENTION AND INVESTMENT FROM PHARMACEUTICAL COMPANIES. TREATMENTS FOR RARE DISEASES OFFER LOWER POTENTIAL FINANCIAL RETURN ON INVESTMENT COMPARED TO DRUGS FOR MORE COMMON, HIGH-VISIBILITY CONDITIONS SUCH AS CANCER AND DIABETES. TO ADDRESS THIS MAJOR HEALTH ISSUE, THE NONPROFIT JACKSON LABORATORY LAUNCHED THE NEW RARE AND ORPHAN DISEASE CENTER TO CONSOLIDATE ITS RESEARCH INTO THE GENETIC BASIS OF SOME OF THESE CONDITIONS AND TO APPLY ITS SPECIALIZED RESEARCH RESOURCES TO HELP SCIENTISTS AROUND THE WORLD IN THEIR SEARCH FOR NEW TREATMENTS FOR UNCOMMON CONDITIONS.</p> <p>4B RESEARCH JACKSON LABORATORY RESEARCHERS LED BY ASSOCIATE PROFESSOR ZHONG-WEI ZHANG, PH.D., PROVIDED DIRECT EVIDENCE THAT A SPECIFIC NEUROTRANSMITTER RECEPTOR IS VITAL TO THE PROCESS OF PRUNING SYNAPSES IN THE BRAINS OF NEWBORN MAMMALS. FAULTY PRUNING AT THIS EARLY DEVELOPMENTAL STAGE IS IMPLICATED IN AUTISM-SPECTRUM DISORDERS AND SCHIZOPHRENIA. JACKSON LABORATORY RESEARCHERS FOUND A GENE THAT CONTROLS MULTIPLE PROCESSES ESSENTIAL TO BUILDING A VIABLE MAMMALIAN EGG, MAKING IT A MASTER REGULATOR OF EGG DEVELOPMENT. THE RESEARCH TEAM, LED BY PROFESSOR JOHN EPPIG, PH.D., SHOWED THAT A GENE THEY NAMED MARF1 IN MICE DIRECTS KEY PROCESSES NEEDED TO PRODUCE EGGS CAPABLE OF BEING FERTILIZED AND DEVELOPING INTO HEALTHY BABIES. DEFECTS IN THE GENE RESULTED IN A CASCADE OF ABNORMALITIES, RESULTING IN DEFECTIVE EGG PRODUCTION AND FEMALE INFERTILITY. JACKSON LABORATORY RESEARCHERS DEMONSTRATED THAT A SINGLE, TARGETED X-RAY TREATMENT OF AN INDIVIDUAL EYE IN YOUNG, GLAUCOMA-PRONE MICE PROVIDED THAT EYE WITH APPARENTLY LIFE-LONG AND TYPICALLY COMPLETE PROTECTION FROM GLAUCOMA. IN RESEARCH PUBLISHED IN THE JOURNAL OF CLINICAL INVESTIGATION, GARETH HOWELL, PH.D., SIMON JOHN, PH.D., (PROFESSOR AND HOWARD HUGHES MEDICAL INVESTIGATOR) AND COLLEAGUES ALSO USED SOPHISTICATED GENOMICS METHODS TO UNCOVER SOME OF THE VERY FIRST PATHWAYS TO CHANGE DURING GLAUCOMA IN THESE MICE. THE FIRST PATHWAY THEY DETECTED TO CHANGE SUGGESTS A CRITICAL MECHANISM THAT COULD BE RESPONSIBLE FOR THE EARLIEST DAMAGE THAT GLAUCOMA INFLECTS ON THE OPTIC NERVE. A JACKSON LABORATORY RESEARCH TEAM LED BY PROFESSOR AND HOWARD HUGHES MEDICAL INVESTIGATOR SUSAN ACKERMAN, PH.D., DISCOVERED A DEFECT IN THE RNA SPLICING PROCESS IN NEURONS THAT MAY CONTRIBUTE TO NEUROLOGICAL DISEASE. THE RESEARCHERS FOUND THAT A MUTATION IN JUST ONE OF THE MANY COPIES OF A GENE KNOWN AS U2 SNRNAs, WHICH IS INVOLVED IN THE INTRICATE PROCESSING OF PROTEIN-ENCODING RNAs, CAUSES NEURODEGENERATION. MANY SO-CALLED NON-CODING RNAs-THOSE THAT DON'T DIRECTLY ENCODE PROTEINS-ARE FOUND IN MULTIPLE COPIES IN THE GENOME. FOR THE FIRST TIME, IT WAS SHOWN THAT A MUTATION IN ONE COPY CAN LEAD TO DISEASE. THE JACKSON LABORATORY CREATED A NEW INSTITUTE FOR GENOMICS-BASED PERSONALIZED MEDICINE IN CONNECTICUT. JAX GENOMIC MEDICINE, LOCATED ON THE CAMPUS OF THE UNIVERSITY OF CONNECTICUT HEALTH CENTER, WILL FOCUS ON MEDICAL APPLICATIONS OF GENOMICS AND PERSONALIZED MEDICINE WITH ACADEMIC AND CLINICAL PARTNERS IN CONNECTICUT AND AROUND THE WORLD.</p>

Identifier	Return Reference	Explanation
PROGRAM SERVICES	FORM 990, PART III, LINE 4A-4C	ORLD 4C TRAINING THE JACKSON LABORATORY PROVIDED 20 COURSES, CONFERENCES, SEMINARS AND WORKSHOP EVENTS THESE UNIQUE EDUCATIONAL OPPORTUNITIES ATTRACTED 595 PARTICIPANTS FROM THE NATIONAL AND INTERNATIONAL RESEARCH COMMUNITIES, AFFORDING THEM WITH OPPORTUNITIES TO TRADE INSIGHTS WITH 308 FACULTY MEMBERS THE JACKSON LABORATORY HAS OFFERED SCHOOL-YEAR INTERNSHIPS TO HIGH SCHOOL STUDENTS FROM REGIONAL HIGH SCHOOLS SINCE 1993 THIS PROGRAM ATTRACTED EIGHT STUDENTS A HANDS-ON PROGRAM FOR SCIENCE TEACHERS ATTRACTED FIVE PARTICIPANTS THIS INNOVATIVE TEACHER SABBATICAL INTERNSHIP PROGRAM PROVIDES MATHEMATICS AND SCIENCE TEACHERS IN MAINE PUBLIC SECONDARY SCHOOLS HANDS-ON RESEARCH EXPERIENCE DURING A SEMESTER AT THE JACKSON LABORATORY THE JACKSON LABORATORY'S HISTORIC SUMMER STUDENT PROGRAM HAD 39 TALENTED PARTICIPANTS THE NATIONALLY RENOWNED PROGRAM PROVIDES HIGH SCHOOL AND COLLEGE STUDENTS WITH AN OPPORTUNITY TO CONDUCT INDEPENDENT RESEARCH UNDER THE GUIDANCE OF STAFF SCIENTISTS MORE THAN 2,200 STUDENTS, INCLUDING THREE NOBEL LAUREATES, HAVE PARTICIPATED IN THE PROGRAM MOST ALUMNI GO ON TO CAREERS IN MEDICINE OR RESEARCH

Identifier	Return Reference	Explanation
FORM 990 REVIEW PROCESS	FORM 990, PART VI, SECTION B, QUESTION 11A	THE AUDIT COMMITTEE OF THE JACKSON LABORATORY'S BOARD OF TRUSTEES REVIEWS A DRAFT COPY OF THE IRS FORM 990 BEFORE IT IS PROVIDED TO THE BOARD OF TRUSTEES AFTER REVIEW, THE IRS FORM 990 IS FINALIZED AND FILED

Identifier	Return Reference	Explanation
CONFLICT OF INTEREST POLICY	FORM 990, PART VI, SECTION B, QUESTION 12C	THE JACKSON LABORATORY PROVIDES ALL OFFICERS, BOARD MEMBERS AND KEY EMPLOYEES WITH A CONFLICT OF INTEREST, CODE OF ETHICS AND DISCLOSURE FORMS AS WELL AS THE DISTRIBUTION OF ALL POLICIES REGARDING THE CONFLICT OF INTERESTS AND CODE OF ETHICS, THIS PROCESS IS DONE ANNUALLY THE DISCLOSURE AND COMPLIANCE ATTESTATIONS ARE RETURNED TO THE OFFICE OF TRUSTEE RELATIONS, WHERE THEY ARE RECORDED AND TALLIED FOR COMPLETENESS DISCLOSURES, AS WELL AS ANY FOLLOW UP QUESTIONS, ARE ROUTED THROUGH THE IN-HOUSE COUNSEL, AND IF NECESSARY THE AUDIT COMMITTEE

Identifier	Return Reference	Explanation
COMPENSATION POLICY	FORM 990, PART VI, SECTION B, QUESTION 15B	<p>THE COMPENSATION AND HUMAN RESOURCES COMMITTEE OF THE BOARD OF TRUSTEES SETS COMPENSATION AND BENEFITS FOR THE CHIEF EXECUTIVE OFFICER, EXECUTIVE VICE PRESIDENT AND CHIEF OPERATING OFFICER, THE VICE PRESIDENT OF RESEARCH, THE VICE PRESIDENT OF EXTERNAL AFFAIRS AND STRATEGIC PARTNERSHIPS, THE CHIEF FINANCIAL OFFICER AND EQUIVALENT POSITIONS AS WELL AS ANY OTHER EMPLOYEES OF THE LABORATORY WHO WOULD BE CONSIDERED 'INSIDERS' OR 'DISQUALIFIED PERSONS' WITHIN THE MEANING OF THE INTERMEDIATE SANCTIONS RULES UNDER THE INTERNAL REVENUE CODE. MEMBERS OF THE COMMITTEE ARE INDEPENDENT TRUSTEES SELECTED BY THE CHAIR OF THE BOARD OF TRUSTEES. THE COMMITTEE IS GUIDED BY MARKET DATA OF COMPENSATION PACKAGES FOR SIMILAR POSITIONS IN COMPARABLE ORGANIZATIONS. MARKET DATA IS PREPARED FOR THE COMMITTEE BY AN EXTERNAL EXECUTIVE COMPENSATION FIRM WHICH CONSIDERS COMPENSATION INFORMATION REPORTED IN FORM 990'S OF COMPARABLE ORGANIZATIONS AND THE RESULTS OF RECOGNIZED COMPENSATION SURVEYS. THE SENIOR DIRECTOR OF HUMAN RESOURCES IS AVAILABLE TO THE COMMITTEE TO PROVIDE ANY OTHER DATA NEEDED. THE CEO MEETS WITH THE COMMITTEE AT LEAST ANNUALLY TO PROVIDE THE COMMITTEE MEMBERS WITH ANNUAL PERFORMANCE REVIEWS OF HIS REPORTS. THE COMMITTEE'S REVIEW PROCESS AND RESULTS ARE DOCUMENTED IN MINUTES OF THE MEETINGS.</p>

Identifier	Return Reference	Explanation
PUBLIC DISCLOSURE	FORM 990, PART VI, SECTION C, QUESTION 19	THE ORGANIZATION'S FORM 990 IS AVAILABLE ON WWW GUIDESTAR.ORG AND ON THE ORGANIZATION'S PUBLIC WEBSITE JAX.ORG

Identifier	Return Reference	Explanation
OTHER CHANGES IN NET ASSETS	FORM 990, PART XI, LINE 9	UNREALIZED GAINS ON INTEREST RATE SWAPS 231,042 CHANGES IN ACTUARIAL ASSUMPTIONS 638,693 FAIR MARKET VALUE ADJUSTMENT ON LOANS 3,642,843 LOSS ON BOND REFUND (6,480,969) TOTAL (1,968,391)

Identifier	Return Reference	Explanation
SECURED MORTGAGES AND NOTES PAYABLE	FORM 990, PART X, LINE 23	REPAYMENT TERMS THE CT INNOVATIONS LOANS WILL BE FORGIVEN IF AND WHEN THE LABORATORY MEETS AN EMPLOYMENT GOAL OF AT LEAST 300 EMPLOYEES LOCATED IN CONNECTICUT FOR A PERIOD OF SIX MONTHS, INCLUDING A MINIMUM OF 90 SENIOR SCIENTISTS IN ADDITION, THE AVERAGE WAGE FOR SUCH EMPLOYEES MUST EXCEED A MINIMUM TARGET LEVEL