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Form 990

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public
▶ Information about Form 990 and its instructions is at www IRS gov/form990

OMB No 1545-0047

2015

Open to Public Inspection

A For the 2015 calendar year, or tax year beginning 01-01-2015 , and ending 12-31-2015

B Check if applicable
☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization
THE TRANSLATIONAL GENOMICS RESEARCH INSTITUTE

% KEVIN GROFF

Doing business as

Number and street (or P O box if mail is not delivered to street address) Room/suite
445 N 5TH STREET Suite 600

City or town, state or province, country, and ZIP or foreign postal code
PHOENIX, AZ 85004

D Employer identification number
75-3065445

E Telephone number
(602) 343-8400

G Gross receipts $ 40,945,133

F Name and address of principal officer
JEFFREY M TRENT PHD
445 N 5TH STREET600
Phoenix,AZ 85004

H(a) Is this a group return for subordinates? ☐ Yes ☑ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW TGEN ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 2002 **M** State of legal domicile AZ

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
SEE SCHEDULE O

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	10
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	9
5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	345
6	Total number of volunteers (estimate if necessary)	6	70
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	792,877
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	15,937,701	21,230,401
	9	Program service revenue (Part VIII, line 2g)	17,307,268	16,538,667
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	49,382,196	172,192
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,618,401	2,308,719
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	84,245,566	40,249,979
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	0	0
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	25,596,001	22,715,867
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶0		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	30,799,882	27,602,138
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	56,395,883	50,318,005
	19	Revenue less expenses Subtract line 18 from line 12	27,849,683	-10,068,026

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	78,134,333	42,113,953
	21	Total liabilities (Part X, line 26)	19,850,175	18,084,710
	22	Net assets or fund balances Subtract line 21 from line 20	58,284,158	24,029,243

Part II Signature Block

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

Sign Here

Signature of officer — Date 2016-11-14

Teresa Burleson COO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
BRENDA GRIESEMER	BRENDA GRIESEMER			P00264669

Firm's name ▶ ERNST & YOUNG US LLP — Firm's EIN ▶

Firm's address ▶ TWO NORTH CENTRAL AVENUE STE 2300
PHOENIX, AZ 85004 — Phone no (602) 322-3000

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

Part III **Statement of Program Service Accomplishments**

Check if Schedule O contains a response or note to any line in this Part III . . . . ☑

1 Briefly describe the organization's mission

SEE SCHEDULE O

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 $ 9,786,680 including grants of $ 0) (Revenue $ 569,627)

GENOTYPING TECHNOLOGY CENTER - SEE SCHEDULE O

4b (Code) (Expenses $ 8,629,700 including grants of $ 0) (Revenue $ 1,004,079)

NEUROGENOMICS DIVISION - SEE SCHEDULE O

4c (Code) (Expenses $ 8,150,188 including grants of $ 0) (Revenue $ 3,384,640)

INTEGRATED CANCER GENOMICS DIVISION - SEE SCHEDULE O

4d Other program services (Describe in Schedule O)

(Expenses $ 3,711,313 including grants of $ 0) (Revenue $ 13,096,163)

4e **Total program service expenses ▶** 30,277,881

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		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a		No
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	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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 other assistance to or for any foreign organization? *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 other assistance to or for foreign individuals? *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		No
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		No
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20a	Did the organization operate one or more 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 or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21		No
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	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? *If "Yes," complete Schedule J*	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a*	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? *If "Yes," complete Schedule L, Part II*	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c	Yes	
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
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)? *If "Yes," complete Schedule R, Part V, line 2*	35b	Yes	
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		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? *If "Yes," complete Schedule R, Part VI*	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 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 or note to any line in this Part V . . . . ☐

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . .	1a	32			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	345			
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" to line 3b, 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 FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)					
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		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . .			7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h		
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			8		
9a	Did the sponsoring organization make any taxable distributions under section 4966? . . .			9a		
b	Did the sponsoring 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 or note to any line 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 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	1a	10			
b	Enter the number of voting members included in line 1a, above, who are independent	1b	9			
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	Yes	
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	Yes	

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed▶ AZ

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

☐ Own website ☐ Another's website ☑ Upon request ☐ 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, address, and telephone number of the person who possesses the organization's books and records
▶KEVIN GROFF 445 N 5th Street Suite 600 PHOENIX, AZ 85004 (602) 343-8478

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

Check if Schedule O contains a response or note to any line in this Part VII . . . . ☑

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees, if any See instructions for definition of "key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, 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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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
(1) Jeffrey M Trent PhD BOARD MEMBER/PRES/SCIENCE DIR	39 0 1 0	X		X				999,967	0	220,796
(2) William J Post Board Member/Chairman	1 0 1 0	X		X				0	0	0
(3) Cindy Parseghian Board Member/Treasurer	1 0 0 0	X		X				0	0	0
(4) Bennett Dorrance Board Member /Secretary	1 0 1 0	X		X				0	0	0
(5) Richard L Boals Board Member	1 0 0 0	X						0	0	0
(6) Governor Jan Brewer Board Member (THRU 1/9/15)	1 0 0 0	X						0	0	0
(7) Robert Bulla Board Member	1 0 0 0	X						0	0	0
(8) Bert A Getz Board Member (THRU 10/13/15)	1 0 0 0	X						0	0	0
(9) David J Gullen MD Board Member	1 0 0 0	X						0	0	0
(10) Jeffrey Moorad Board Member	1 0 0 0	X						0	0	0
(11) Richard Silverman Board Member	1 0 0 0	X						0	0	0
(12) The Honorable Greg Stanton Board Member	1 0 0 0	X						0	0	0
(13) Teresa Burleson CHIEF OPERATING OFFICER	39 0 1 0			X				547,980	0	55,384
(14) Michael Berens Deputy Director of Research	40 0 0 0				X			345,423	0	19,851

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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
(15) John Carpten Deputy Director of Sciences	40 0 0 0				X			680,856	0	21,100
(16) David Craig Deputy Director of Informatics	40 0 0 0				X			574,701	0	20,531
(17) James Lowey Vice President, Technology	40 0 0 0				X			199,488	0	9,475
(18) Daniel Von Hoff Executive Vice President	40 0 0 0				X			817,646	0	17,297
(19) Patrick Smith VP, Corporate Development	40 0 0 0					X		641,343	0	244,600
(20) Manuel Estrada Vice President, Finance	40 0 0 0					X		232,636	0	16,367
(21) David Duggan Associate Professor	40 0 0 0					X		225,575	0	22,475
(22) Michael Bittner Professor	40 0 0 0					X		225,431	0	16,465
(23) James Harris VP, Business Development	40 0 0 0					X		218,448	0	11,161
(24) CHARLES K COLESON CHIEF FINANCIAL OFFICER	29 0 1 0						X	157,822	0	1,974

		(D)	(E)	(F)
1b	Sub-Total ▶			
c	Total from continuation sheets to Part VII, Section A ▶			
d	Total (add lines 1b and 1c) ▶	5,867,316	0	677,476

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 ▶ 51

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3	Yes	
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? *If "Yes," complete Schedule J for such individual*	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? *If "Yes," complete Schedule J for such person*	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
FirstStrategic, 300 W Clarendon Ave Suite 460 Phoenix, AZ 85013	Consulting Services	216,000
Cancer Research and Biostatistics, 1730 Minor Ave Suite 1900 Seattle, WA 98101	Research Services	203,839
Tech66 LLC, 4557 E Via Los Caballos Phoenix, AZ 85028	Consulting Services	115,950

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 ▶ 3

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII . . . . ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . . 1a					
	b	Membership dues 1b					
	c	Fundraising events 1c	0				
	d	Related organizations . . . 1d	6,881,065				
	e	Government grants (contributions) 1e	7,398,685				
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	6,950,651				
	g	Noncash contributions included in lines 1a-1f $	304,546				
	h	**Total.** Add lines 1a-1f . . . . ▶		21,230,401			
Program Service Revenue			Business Code				
	2a	Research Contracts	541711	16,538,667	16,538,667	0	0
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	**Total.** Add lines 2a–2f . . . . ▶		16,538,667			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) . . . . ▶		138,143			138,143
	4	Income from investment of tax-exempt bond proceeds . . ▶		0			
	5	Royalties . . . . ▶		0			
			(i) Real / (ii) Personal				
	6a	Gross rents					
	b	Less rental expenses					
	c	Rental income or (loss)	0 / 0				
	d	Net rental income or (loss) . . . . ▶		0			
			(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory	/ 729,203				
	b	Less cost or other basis and sales expenses	/ 695,154				
	c	Gain or (loss)	/ 34,049				
	d	Net gain or (loss) . . . . ▶		34,049			34,049
	8a	Gross income from fundraising events (not including $ ______ of contributions reported on line 1c) See Part IV, line 18 . . a					
	b	Less direct expenses . . . b					
	c	Net income or (loss) from fundraising events . . ▶		0			
	9a	Gross income from gaming activities See Part IV, line 19 . . . a					
	b	Less direct expenses . . . b					
	c	Net income or (loss) from gaming activities . . . ▶		0			
	10a	Gross sales of inventory, less returns and allowances . a					
	b	Less cost of goods sold . . b					
	c	Net income or (loss) from sales of inventory . . ▶		0			
		Miscellaneous Revenue	Business Code				
	11a	JOINT VENTURE SHARED SERVICES	900099	396,073	0	396,073	0
	b	K-1 PARTNERSHIP REVENUE	900099	396,804	0	396,804	0
	c	ALL OTHER REVENUE	900099	1,515,842	1,515,842	0	0
	d	All other revenue					
	e	**Total.** Add lines 11a–11d . . . . ▶		2,308,719			
	12	**Total revenue.** See Instructions . . . . . . ▶		40,249,979	18,054,509	792,877	172,192

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 or note to any line in this Part IX . . . . ☑

	Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	0	0		
2	Grants and other assistance to domestic individuals See Part IV, line 22	0	0		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	0	0		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	4,780,495	1,816,588	2,963,907	0
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	159,796		159,796	0
7	Other salaries and wages	14,535,740	7,415,522	7,120,218	0
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	545,411	261,797	283,614	0
9	Other employee benefits	1,426,938	684,930	742,008	0
10	Payroll taxes	1,267,487	608,394	659,093	0
11	Fees for services (non-employees)				
a	Management	0	0	0	0
b	Legal	280,062	0	280,062	0
c	Accounting	371,861	0	371,861	0
d	Lobbying	129,600	129,600	0	0
e	Professional fundraising services See Part IV, line 17	0			0
f	Investment management fees	0	0	0	0
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	6,966,053	5,572,843	1,393,210	
12	Advertising and promotion	51,523	0	51,523	0
13	Office expenses	7,674,629	5,755,971	1,918,658	0
14	Information technology	1,739,383	869,692	869,691	0
15	Royalties . .	0	0	0	0
16	Occupancy	5,932,661	4,449,496	1,483,165	0
17	Travel	391,263	156,505	234,758	0
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings	315,461	126,184	189,277	0
20	Interest	9,000	0	9,000	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	2,963,029	2,222,272	740,757	0
23	Insurance	342,938	34,294	308,644	0
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	DUES & SUBSCRIPTIONS	81,291	32,517	48,774	0
b	SEMINARS & TRAINING	64,031	25,536	38,495	0
c	RECRUITMENT	59,253	23,701	35,552	0
d	RELOCATION	29,319	11,727	17,592	0
e	All other expenses	200,781	80,312	120,469	
25	**Total functional expenses.** Add lines 1 through 24e	50,318,005	30,277,881	20,040,124	0
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 ▶ ☐ if following SOP 98-2 (ASC 958-720)	0			

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X . . . . ☐

			(A) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing	24,631,525	1	14,016,750
	2	Savings and temporary cash investments	7,600,747	2	6,132,307
	3	Pledges and grants receivable, net	3,525,069	3	2,728,066
	4	Accounts receivable, net	1,037,099	4	1,197,948
	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	0	7	0
	8	Inventories for sale or use	0	8	0
	9	Prepaid expenses and deferred charges	2,029,667	9	1,913,864
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D — 10a: 30,182,697			
	b	Less accumulated depreciation — 10b: 23,388,501	8,228,671	10c	6,794,196
	11	Investments—publicly traded securities	0	11	0
	12	Investments—other securities See Part IV, line 11	0	12	0
	13	Investments—program-related See Part IV, line 11	24,849,594	13	1,753,446
	14	Intangible assets	0	14	0
	15	Other assets See Part IV, line 11	6,231,961	15	7,577,376
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	78,134,333	16	42,113,953
Liabilities	17	Accounts payable and accrued expenses	5,949,564	17	2,486,497
	18	Grants payable	0	18	0
	19	Deferred revenue	10,380,601	19	11,119,454
	20	Tax-exempt bond liabilities	0	20	0
	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	1,767,395	23	3,453,462
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	1,752,615	25	1,025,297
	26	**Total liabilities.** Add lines 17 through 25	19,850,175	26	18,084,710
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	49,744,801	27	16,211,722
	28	Temporarily restricted net assets	8,539,357	28	7,817,521
	29	Permanently restricted net assets	0	29	0
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ 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	58,284,158	33	24,029,243
	34	Total liabilities and net assets/fund balances	78,134,333	34	42,113,953

Part XI Reconcilliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI . . . . ☑

1	Total revenue (must equal Part VIII, column (A), line 12)	1	40,249,979
2	Total expenses (must equal Part IX, column (A), line 25)	2	50,318,005
3	Revenue less expenses Subtract line 2 from line 1	3	-10,068,026
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	58,284,158
5	Net unrealized gains (losses) on investments	5	-23,572,018
6	Donated services and use of facilities	6	0
7	Investment expenses	7	0
8	Prior period adjustments	8	-218,067
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-396,804
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	24,029,243

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII . . . . ☑

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other ____________ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
	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 ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
	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 ☐ Separate basis ☑ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
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?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	Yes	

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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.
▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at ***www.irs.gov/form990*****.**

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
THE TRANSLATIONAL GENOMICS RESEARCH INSTITUTE

Employer identification number
75-3065445

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 (Form 990 or 990-EZ))

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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization

f Enter the number of supported organizations . . . . ________

g Provide the following information about the supported organization(s)

(i) Name of supported organization	**(ii)**EIN	**(iii)** Type of organization (described on lines 1- 9 above (see instructions))	**(iv)** Is the organization listed in your governing document?		**(v)** Amount of monetary support (see instructions)	**(vi)** Amount of other support (see instructions)
			Yes	**No**		
Total						

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990EZ. Cat No 11285F

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) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any unusual grants)	27,781,232	2,315,103	25,261,567	15,937,701	21,230,401	92,526,004
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf				0		0
3 The value of services or facilities furnished by a governmental unit to the organization without charge				0		0
4 **Total.** Add lines 1 through 3	27,781,232	2,315,103	25,261,567	15,937,701	21,230,401	92,526,004
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)						25,313,359
6 **Public support.** Subtract line 5 from line 4						67,212,645

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7 Amounts from line 4	27,781,232	2,315,103	25,261,567	15,937,701	21,230,401	92,526,004
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	20,014	1,668	175,334	154,921	138,143	490,080
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						0
11 **Total support.** Add lines 7 through 10						93,016,084

12 Gross receipts from related activities, etc (see instructions) | 12 | 83,902,909

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) | 14 | 72 259 %

15 Public support percentage for 2014 Schedule A, Part II, line 14 | 15 | 78 975 %

16a **33 1/3% support test—2015.** 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—2014.** 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—2015.** 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 VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

b **10%-facts-and-circumstances test—2014.** 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 VI 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 III **Support Schedule for Organizations Described in Section 509(a)(2)**
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(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)2011	(b)2012	(c)2013	(d)2014	(e)2015	(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 VI)						
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 section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2014 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2015** (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from **2014** Schedule A, Part III, line 17	18	

19a **33 1/3% support tests—2015.** 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—2014.** 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 **Supporting Organizations**

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V)

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in* ***Part VI*** *how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain*	**1**		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in* ***Part VI*** *how the organization determined that the supported organization was described in section 509(a)(1) or (2)*	**2**		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below*	**3a**		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in* ***Part VI*** *when and how the organization made the determination*	**3b**		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in* ***Part VI*** *what controls the organization put in place to ensure such use*	**3c**		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below*	**4a**		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations*	**4b**		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes*	**4c**		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)*	**5a**		
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	**5b**		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	**5c**		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* ***Part VI.***	**6**		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990)*	**7**		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part II of Schedule L (Form 990)*	**8**		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? *If "Yes," provide detail in* ***Part VI.***	**9a**		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in* ***Part VI.***	**9b**		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in* ***Part VI.***	**9c**		
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer b below*	**10a**		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)*	**10b**		
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	**11a**		
b	A family member of a person described in (a) above?	**11b**		
c	A 35% controlled entity of a person described in (a) or (b) above? *If "Yes" to a, b, or c, provide detail in Part VI*	**11c**		

Part IV Supporting Organizations (continued)

Section B. Type I Supporting Organizations

			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "No," describe in* ***Part VI*** *how the supported organization(s) effectively operated, supervised, or controlled the organization's activities If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year*	**1**		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in* ***Part VI*** *how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization*	**2**		

Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in* ***Part VI*** *how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)*	**1**		

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	**1**		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in* ***Part VI*** *how the organization maintained a close and continuous working relationship with the supported organization(s)*	**2**		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in* ***Part VI*** *the role the organization's supported organizations played in this regard*	**3**		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year **(see instructions)**

- **a** ☐ The organization satisfied the Activities Test Complete **line 2** below
- **b** ☐ The organization is the parent of each of its supported organizations Complete **line 3** below
- **c** ☐ The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instructions)

			Yes	No
2	Activities Test **Answer (a) and (b) below.**			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in* ***Part VI identify those supported organizations and explain*** *how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities*	**2a**		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* ***Part VI*** *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement*	**2b**		
3	Parent of Supported Organizations **Answer (a) and (b) below.**			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in Part VI*	**3a**		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard*	**3b**		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E ☐

	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	**Adjusted Net Income** (subtract lines 5, 6 and 7 from line 4)	8		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	**Total** (add lines 1a, 1b, and 1c)	1d		
e	**Discount** claimed for blockage or other factors (explain in detail in Part VI) ____________			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	**Minimum Asset Amount** (add line 7 to line 6)	8		

	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	**Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions) ☐

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 **Total annual distributions.** Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2015 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2015			
a			
b			
c			
d From 2013. . . . . ______			
e From 2014. . . . . ______			
f **Total** of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7 $ ______			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 **Excess distributions carryover to 2016.** Add lines 3j and 4c			
8 Breakdown of line 7			
a			
b			
c Excess from 2013. . . . . ______			
d From 2014. . . . . ______			
e From 2015. . . . . ______			

Part VI **Supplemental Information.**
Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation
SCHEDULE A, PART II, COLUMN (B)	THE AMOUNTS INCLUDED IN PART II, COLUMN(B) ARE FOR A SHORT PERIOD, 12/01/2012 - 12/31/2012

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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.

▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.

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If the organization answered "Yes" on 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" on 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" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

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

Name of the organization	Employer identification number
THE TRANSLATIONAL GENOMICS RESEARCH INSTITUTE	75-3065445

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? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ $

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt 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? ☐ Yes ☐ No

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

(a) Name	**(b)** Address	**(c)** EIN	**(d)** Amount paid from filing organization's funds If none, enter -0-	**(e)** Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
2				
3				
4				
5				
6				

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		

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

		(a)	(b)
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? ☐ **Yes** ☐ **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 separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period

	Calendar year (or fiscal year beginning in)	**(a)**2012	**(b)**2013	**(c)**2014	**(d)**2015	**(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 on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity		(a) Yes	(a) No	(b) 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)?		No	
c	Media advertisements?		No	0
d	Mailings to members, legislators, or the public?		No	0
e	Publications, or published or broadcast statements?		No	0
f	Grants to other organizations for lobbying purposes?		No	0
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		No	0
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	0
i	Other activities?	Yes		129,600
j	Total Add lines 1c through 1i			129,600
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).**		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV **Supplemental Information**

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, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

Return Reference	Explanation
PART II-B, LINE 1I	THE TRANSLATIONAL GENOMICS RESEARCH INSTITUTE (TGEN) USES A THIRD PARTY COMMUNICATIONS AND PUBLIC AFFAIRS FIRM TO COORDINATE LOBBYING EFFORTS ON BEHALF OF TGEN THROUGH COMMUNICATIONS TO LOCAL GOVERNMENT, LEGISLATIVE AND FEDERAL OFFICIALS AND COMMUNITY LEADERS ON TGEN ACTIVITIES

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SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
Information about Schedule D (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization	Employer identification number
THE TRANSLATIONAL GENOMICS RESEARCH INSTITUTE	75-3065445

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of 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? ☐ Yes ☐ No

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? ☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" on 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	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

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, handling of violations, and enforcing conservation easements during the year
▶______________

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, 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" on 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) Revenue included on 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 Revenue included on Form 990, Part VIII, line 1 ▶ $ ______________

b Assets included in Form 990, Part X ▶ $ ______________

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" on 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
c	Beginning balance	1c	
d	Additions during the year	1d	
e	Distributions during the year	1e	
f	Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ 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	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	6,063,382	6,491,947	6,571,997	6,553,530	6,331,923
b	Contributions					
c	Net investment earnings, gains, and losses	-210,006	94,127	456,554	53,629	643,547
d	Grants or scholarships					
e	Other expenditures for facilities and programs	530,486	522,692	536,604	35,162	421,940
f	Administrative expenses					
g	End of year balance	5,322,890	6,063,382	6,491,947	6,571,997	6,553,530

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

a Board designated or quasi-endowment ▶

b Permanent endowment ▶

c Temporarily restricted endowment ▶ 100 000 %

The percentages on 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

			Yes	No
	(i) unrelated organizations	3a(i)		No
	(ii) related organizations	3a(ii)		No
b	If "Yes" on 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.**
Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a.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
b Buildings				
c Leasehold improvements	0	5,343,943	2,265,804	2,778,139
d Equipment	0	22,498,449	18,548,533	3,949,916
e Other	0	2,340,305	2,274,164	66,141
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c))* ▶				6,794,196

Part VII Investments—Other Securities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12)* ▶		

Part VIII Investments—Program Related. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13)* ▶		

Part IX Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1) DUE FROM TGEN FOUNDATION	5,532,671
(2) INVESTMENT IN 457(B) PLAN	1,025,296
(3) IN-KIND DONATED ASSETS	1,019,409
Total. *(Column (b) must equal Form 990, Part X, col (B) line 15)* . . . . ▶	7,577,376

Part X Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
Federal income taxes	0
DUE TO EMPLOYEE 457(B) PLAN	1,025,297
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	1,025,297

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☑

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total revenue Add lines **3** and **4c.**(This must equal Form 990, Part I, line 12)			5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

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

Part XIII Supplemental Information

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

Return Reference	Explanation
SCHEDULE D, PART V, LINE 4	TGEN'S POLICY FOR APPROPRIATING THE DISTRIBUTION OF ITS SUMMER INTERNSHIP PROGRAM ENDOWMENT HAS BEEN DESIGNED TO SUPPORT A SPECIFIC NUMBER OF SUMMER INTERNS EACH YEAR FOR 25 YEARS THE INSTITUTE CONSIDERED THE LONG-TERM EXPECTED RETURN ON ITS ENDOWMENT SCHEDULE D, PART X, LINE 2 MANAGEMENT IS OF THE OPINION THAT SUBSTANTIALLY ALL OF TGEN'S AND THE FOUNDATION'S ACTIVITIES ARE RELATED TO THEIR EXEMPT PURPOSES, AND NO MATERIAL UNCERTAIN TAX POSITIONS HAVE BEEN IDENTIFIED OR RECORDED IN THE ACCOMPANYING CONSOLIDATED FINANCIAL STATEMENTS AT DECEMBER 31, 2015 OR 2014 TGEN AND THE FOUNDATION FILE FORMS 990 IN THE U S FEDERAL JURISDICTION AND COMPARABLE FORMS IN THE STATE OF ARIZONA TAX FILINGS FOR 2012 THROUGH 2015 ARE SUBJECT TO EXAMINATION, HOWEVER, THE INSTITUTE HAS NOT BEEN NOTIFIED OF ANY SUCH EXAMINATIONS

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.
▶ Attach to Form 990.
▶ Information about Schedule F (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
THE TRANSLATIONAL GENOMICS RESEARCH INSTITUTE

Employer identification number
75-3065445

Part I General Information on Activities Outside the United States.

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

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

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States

3 Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	**(b)** Number of offices in the region	**(c)** Number of employees, agents, and independent contractors in region	**(d)** Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	**(e)** If activity listed in (d) is a program service, describe specific type of service(s) in region	**(f)** Total expenditures for and investments in region
(1) See Add'l Data					
(2)					
(3)					
(4)					
(5)					
3a Sub-total					434,875
b Total from continuation sheets to Part I					
c **Totals** (add lines 3a and 3b)					434,875

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.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)								

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 III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

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, do not file with Form 990)*	☐ 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, Information 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, do not file with Form 990)*	☐ Yes	☑ No

Part V **Supplemental Information**

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).

990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PART I, LINE 3, COLUMN (F)	THE AMOUNTS REPORTED IN COLUMN (F) ARE DETERMINED BASED ON THE ACCRUAL METHOD OF ACCOUNTING

Additional Data

Software ID:
Software Version:
EIN: 75-3065445
Name: THE TRANSLATIONAL GENOMICS RESEARCH INSTITUTE

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
East Asia and the Pacific			Program services	RESEARCH SERVICES	59,077
East Asia and the Pacific			Program services	SOFTWARE SERVICES	3,780
Europe (Including Iceland and Greenland)			Program services	RESEARCH SERVICES	115,963

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
North America			Program services	RESEARCH SERVICES	51,758
North America			Program services	SOFTWARE SERVICES	10,000
South Asia			Program services	SOFTWARE SERVICES	194,297

Schedule J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
▶ Attach to Form 990.
▶ Information about Schedule J (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
THE TRANSLATIONAL GENOMICS RESEARCH INSTITUTE

Employer identification number
75-3065445

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☑ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all 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 directors, trustees, officers, including 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 ☑ Compensation committee ☐ Written employment contract ☑ Independent compensation consultant ☑ Compensation survey or study ☐ Form 990 of other organizations ☑ Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
c	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	**4c**		No
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on 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? If "Yes," on line 5a or 5b, describe in Part III	**5b**		No
6	For persons listed on 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? If "Yes," on line 6a or 6b, describe in Part III	**6b**		No
7	For persons listed on 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 on Form 990, Part VII, paid or accured 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" on 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 on 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 in column(B) reported as deferred on prior Form 990
	(i) Base compensation	**(ii)** Bonus & incentive compensation	**(iii)** Other reportable compensation				
See Additional Data Table							

Part III Supplemental Information

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

Return Reference	Explanation
SCHEDULE J, PART I, LINE 1A	FIRST CLASS TRAVEL IS PERMITTED BY EXECUTIVE STAFF ONLY AND MUST, PER TGEN POLICY, BE PRE-APPROVED BY THE CHIEF OPERATING OFFICER THESE EXPENSES WERE NOT CONSIDERED AS TAXABLE COMPENSATION TO THE RECIPIENT SINCE THEY WERE REIMBURSEMENTS FOR BUSINESS USE UNDER AN ACCOUNTABLE PLAN
SCHEDULE J, PART I, LINE 7	SOME OF THE PERSONS LISTED IN FORM 990, PART VII WERE PAID BONUSES WHICH WERE BASED ON ACCOMPLISHMENTS OF SPECIFIC MILESTONES AND/OR PERFORMANCE BASES, AS APPROVED BY THE TGEN BOARD OF DIRECTORS
Schedule J, Part II	Charles Coleson received $108,000 in compensation for consulting services provided to TGEN in his capacity as an independent contractor This amount HAs BEEN REPORTED IN SCHEDULE J, PART II, COLUMN (b)(i) as base compensation Patrick Smith is eligible to receive $235,658 on 1/29/16 based on reaching strategic objective outlined by management this amount HAs BEEN REPORTED IN SCHEDULE J, PART II, COLUMN (C) AS DEFERRED COMPENSATION DEFERRED COMPENSATION INCLUDES RETENTION AGREEMENTS FOR DR JEFFREY TRENT AND TERESA BURLESON DR TRENT IS ELIGIBLE TO RECEIVE $400,000 ON 03/12/2017 AND TERESA BURLESON IS ELIGIBLE TO RECEIVE $250,000 ON 03/31/2020 PAYABLE BY TGEN AMOUNTS ACCRUED BY TGEN DURING CALENDAR YEAR 2015 UNDER THESE AGREEMENTS HAVE BEEN REPORTED IN SCHEDULE J, PART II, COLUMN (C) AS DEFERRED COMPENSATION AS FOLLOWS JEFFERY M TRENT, PH D $200,000 TERESA BURLESON $37,500 DANIEL VON HOFF, JOHN CARPTEN AND DAVID CRAIG'S RETENTION AGREEMENTS VESTED ON 11/30/2015 DANIEL VON HOFF RECEIVED $150,000 AND JOHN CARPTEN AND DAVID CRAIG RECEIVED $192,000 TERESA BURLESON RECEIVED $116,667 FROM A RETENTION AGREEMENT IN WHICH SHE VESTED 3/31/2015

Additional Data

Software ID:
Software Version:
EIN: 75-3065445
Name: THE TRANSLATIONAL GENOMICS RESEARCH INSTITUTE

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

(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 in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 Jeffrey M Trent PhD BOARD MEMBER/PRES/SCIENCE DIR	(i)	965,834	0	34,133	210,600	10,196	1,220,763	0
	(ii)	0	0	0	0	- 0	- 0	0
1 Teresa Burleson CHIEF OPERATING OFFICER	(i)	430,331	116,667	982	48,100	7,284	603,364	100,000
	(ii)	0	0	0	0	- 0	- 0	0
2 Michael Berens Deputy Director of Research	(i)	322,496	0	22,927	10,600	9,251	365,274	0
	(ii)	0	0	0	0	- 0	- 0	0
3 John Carpten Deputy Director of Sciences	(i)	330,907	348,967	982	10,600	10,500	701,956	103,526
	(ii)	0	0	0	0	- 0	- 0	0
4 David Craig Deputy Director of Informatics	(i)	285,763	288,283	655	10,600	9,931	595,232	103,526
	(ii)	0	0	0	0	- 0	- 0	0
5 James Lowey Vice President, Technology	(i)	198,763	0	725	7,957	1,518	208,963	0
	(ii)	0	0	0	0	- 0	- 0	0
6 Daniel Von Hoff Executive Vice President	(i)	659,337	150,000	8,309	10,600	6,697	834,943	100,000
	(ii)	0	0	0	0	- 0	- 0	0
7 Patrick Smith VP, Corporate Development	(i)	290,140	350,221	982	235,658	8,942	885,943	0
	(ii)	0	0	0	0	- 0	- 0	0
8 Manuel Estrada Vice President, Finance	(i)	231,741	0	895	7,212	9,155	249,003	0
	(ii)	0	0	0	0	- 0	- 0	0
9 David Duggan Associate Professor	(i)	224,819	0	756	9,440	13,035	248,050	0
	(ii)	0	0	0	0	- 0	- 0	0
10 Michael BittnerProfessor	(i)	218,385	0	7,046	8,657	7,808	241,896	0
	(ii)	0	0	0	0	- 0	- 0	0
11 James Harris VP, Business Development	(i)	173,251	5,000	40,197	7,308	3,853	229,609	0
	(ii)	0	0	0	0	- 0	- 0	0
12 CHARLES K COLESON CHIEF FINANCIAL OFFICER	(i)	141,107	15,000	1,715	1,924	50	159,796	0
	(ii)	0	0	0	0	- 0	- 0	0

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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.
▶Information about Schedule L (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization	Employer identification number
THE TRANSLATIONAL GENOMICS RESEARCH INSTITUTE	75-3065445

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) 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	Yes	No
Total		▶ $										

Part III Grants or Assistance Benefiting 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) TECH66 LLC WILLIAM BURLESON	SPOUSE OF OFFICER	115,950	CONSULTING SERVICES		No

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference	Explanation

SCHEDULE M (Form 990)

Noncash Contributions

OMB No 1545-0047

2015

Open to Public Inspection

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

▶ Attach to Form 990.

▶Information about Schedule M (Form 990) and its instructions is at *www.irs.gov/form990*

Department of the Treasury
Internal Revenue Service

Name of the organization
THE TRANSLATIONAL GENOMICS RESEARCH INSTITUTE

Employer identification number
75-3065445

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				
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				
25 Other ▶ (COMPUTER EQUIP)	X	1	304,546	FMV
26 Other ▶ ( )				
27 Other ▶ ( )				
28 Other ▶ ( )				

	Line	Answer
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	29	

		Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 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		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			

Part II Supplemental Information.

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.

Return Reference	Explanation
SCHEDULE M, PART I, COLUMN (B)	THE ORGANIZATION IS REPORTING IN PART I, COLUMN (B) THE NUMBER OF CONTRIBUTIONS RECEIVED

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization	Employer identification number
THE TRANSLATIONAL GENOMICS RESEARCH INSTITUTE	75-3065445

Return Reference	Explanation
FORM 990, PART I, LINE 1 AND PART III, LINE 1	THE TRANSLATIONAL GENOMICS RESEARCH INSTITUTE (TGEN) IS A NONPROFIT BIOMEDICAL RESEARCH INSTITUTE FOCUSED ON DEVELOPING EARLIER DIAGNOSTICS AND SMARTER TREATMENTS BY EMPLOYING INNOVATIVE ADVANCES ARISING FROM THE HUMAN GENOME PROJECT AND APPLYING THEM TO THE DEVELOPMENT OF DIAGNOSTICS, PROGNOSTICS AND THERAPIES FOR CANCER, NEUROLOGICAL DISORDERS, DIABETES AND OTHER COMPLEX DISEASES

Return Reference	Explanation
FORM 990, PART III, LINE 4A	TGEN'S GENOTYPING TECHNOLOGY CENTER ANALYZES BITS OF DNA CALLED SINGLE NUCLEOTIDE POLYMORPHISMS (SNPS) WHICH GIVE RESEARCHERS THE POWER TO IDENTIFY DISEASE-CAUSING GENES, ASSOCIATIONS, AND DNA SIGNATURES, ALL OF WHICH HAVE PROFOUND IMPLICATIONS FOR DETECTION, PROGNOSIS AND THERAPEUTIC INTERVENTION THE SNPS GENOTYPING CENTER OFFERS INNOVATIVE SOLUTIONS THAT ADDRESS THE REQUIREMENTS FOR FLEXIBILITY, SIMPLICITY, THROUGHPUT, ECONOMY AND ACCURACY

Return Reference	Explanation
FORM 990, PART III, LINE 4B	THE NEUROGENOMICS DIVISION HAS TWO GOALS, BOTH OF WHICH DERIVE FROM THE OVERARCHING MISSION OF THE TRANSLATIONAL GENOMICS RESEARCH INSTITUTE (TGEN) IT IS COMMON KNOWLEDGE THAT EARLY INTERVENTION AND TREATMENT SAVES LIVES WHEN IT COMES TO NEUROLOGICAL DISEASES THEREFORE, OUR FIRST GOAL IS TO IMPROVE THE ABILITY TO DIAGNOSE NEUROLOGICAL DISEASE BEFORE IT STRIKES BECAUSE THESE DISEASES IMPACT SO MANY LIVES AROUND THE WORLD EITHER DIRECTLY (BY HAVING A DISEASE), OR INDIRECTLY (BY CARING FOR A LOVED ONE WITH A DISEASE), THE SECOND GOAL CENTERS ON THE DEVELOPMENT OF NEW 'SMART-DRUG' THERAPIES THERE ARE FIVE LABS WITHIN THE DIVISION, ENCOMPASSING THE ENTIRE BREADTH OF NEUROLOGICAL DISEASE

Return Reference	Explanation
FORM 990, PART III, LINE 4C	TGEN'S INTEGRATED CANCER GENOMICS DIVISION BRINGS TOGETHER BIOINFORMATICS, CUTTING-EDGE TECHNOLOGIES AND BASIC RESEARCH TO CREATE A COMPREHENSIVE ATTACK ON CANCER WITH THE ULTIMATE GOAL OF DEVELOPING NEW DIAGNOSTICS AND TREATMENTS SPECIFIC AREAS OF FOCUS INCLUDE PROSTATE CANCER, MELANOMA, FAMILIAL BREAST CANCER, COLON CANCER, MULTIPLE MYELOMA AND RENAL TUMOR RESEARCH KEEPING IN LINE WITH TGEN'S MISSION OF DEVELOPING EARLIER DIAGNOSTICS AND SMARTER TREATMENTS, WE HOPE THIS INTEGRATED APPROACH TO CANCER GENOME RESEARCH WILL HELP TO UNCOVER IMPORTANT INHERITED AND TUMOR DERIVED ALTERATIONS, WHICH ARE ASSOCIATED WITH CANCER SUSCEPTIBILITY AND IMPORTANT TUMOR CHARACTERISTICS SUCH AS PROGRESSION AND RESPONSE TO THERAPY

Return Reference	Explanation
FORM 990, PART III, LINE 4D	INTRODUCTION TGEN CONTINUES TO BE AT THE FOREFRONT OF SCIENTIFIC INNOVATION AND DISCOVERY, USING OUR TECHNOLOGICAL EXPERTISE TO PROVIDE PATIENTS AND THEIR PHYSICIANS WITH THE BEST POSSIBLE INFORMATION TO HELP DIAGNOSE AND TREAT DISEASE IN 2015, EARLY DETECTION OF DISEASE WAS A MAIN FOCUS OF TGEN INITIATIVES WE MADE SIGNIFICANT PROGRESS IN THIS AREA OF RESEARCH BY NEARLY ALL MEASURES ESPECIALLY NOTABLE IS A STUDY THAT ALIGNS OUR MASTERY OF GENE SEQUENCING WITH EFFORTS TO CREATE METHODS OF EARLY DETECTION OF CANCER, AND IN THIS CASE POTENTIALLY THROUGH THE USE OF A SIMPLE BLOOD TEST, OR LIQUID BIOPSY THE RESULTS OF THIS STUDY, PUBLISHED IN CLINICAL EPIGENETICS, DETAILED THE IDENTIFICATION OF 21 DNA HYPER METHYLATION HOTSPOTS - GENE LOCATIONS ALONG THE 3 BILLION CHEMICAL BASES OF DNA - WITH INCREASED LEVELS OF METHYLATION THAT COULD INDICATE THE EXISTENCE OF METASTATIC BREAST CANCER THESE FINDINGS COULD LEAD TO A HIGHLY SENSITIVE BLOOD-BASED TEST PANEL (A TYPE OF LIQUID BIOPSY), WHICH COULD HELP IMPROVE THE CARE OF WOMEN WITH BREAST CANCER THE TEST WOULD LOOK FOR BIOMARKERS DERIVED FROM CELL-FREE STRANDS OF DNA (CFDNA) CIRCULATING IN THE BLOOD THIS BREAKTHROUGH HAS SIGNIFICANT IMPLICATIONS FOR ALL BREAST CANCER PATIENTS IN THE FUTURE, SINCE ALL SUBTYPES OF BREAST CANCER IN VARYING DEGREES CAN REOCCUR AND METASTASIZE THIS TEST COULD PROVIDE PHYSICIANS WITH CRITICAL INFORMATION ABOUT THERAPIES, ESPECIALLY FOLLOWING SURGERY OR SESSIONS OF CHEMOTHERAPY ANOTHER TGEN-LED PROJECT, FUNDED BY THE SEENA MAGOWITZ FOUNDATION AND STAND UP TO CANCER (SU2C), IS ADVANCING TREATMENT OF LATE-STAGE PANCREATIC CANCER PATIENTS THROUGH OUR CLINICAL PARTNERSHIP AT HONORHEALTH (FORMERLY SCOTTSDALE HEALTHCARE) ONE PATIENT WHO ARRIVED AT THE CLINIC LAST APRIL WITH STAGE 4 PANCREATIC CANCER NOW HAS NO DETECTABLE TUMORS, THANKS TO A CLINICAL TRIAL THAT BUILT ON OUR SUCCESS IN TESTING - AND GAINING FDA APPROVAL - OF THE GEMCITABINE/ABRAXANE COMBINATION AS THE NEW STANDARD OF CARE FOR THESE PATIENTS THE AMERICAN SOCIETY OF CLINICAL ONCOLOGY (ASC0) RECOGNIZED THE GROUNDBREAKING WORK AT TGEN BY INCLUDING AN OVARIAN CANCER STUDY LED BY TGEN PRESIDENT DR JEFFREY TRENT IN ITS ANNUAL CLINICAL CANCER ADVANCES REPORT, PUBLISHED JAN 20, IDENTIFYING THE STUDY AS ONE OF THE YEARS TOP RESEARCH PAPERS, WHICH WAS PUBLISHED IN NATURE GENETICS TGEN WAS ABLE TO IDENTIFY THE LIVELY GENETIC DRIVER OF THIS PARTICULARLY AGGRESSIVE TYPE OF OVARIAN CANCER THAT MOSTLY STRIKES YOUNG WOMEN AND GIRLS FACULTY WITHIN OUR PATHOGEN GENOMICS DIVISION, TGEN NORTH, PARTICIPATED IN THE DESIGN OF NEW GENOMICS-BASED METHODS FOR ACCURATELY DIAGNOSING VALLEY FEVER AND LYME DISEASE CREATING A DEFINITIVE, LOW-COST AND ACCURATE DIAGNOSTIC TOOL FOR BOTH DISEASES GREATLY BENEFITS PATIENT HEALTH SINCE SYMPTOMS IN BOTH DISEASES ARE SIMILAR TO OTHER AILMENTS, AND THE CURRENT TESTS ARE SO UNRELIABLE THEY HAVE BEEN COMPARED TO COIN FLIPS AS A RESULT, BOTH VALLEY FEVER AND LYME DISEASE ARE OFTEN MISDIAGNOSED AND MISTREATED TGEN NORTHS NEW TESTS WILL CHANGE THAT A COLLABORATION WITH BAYLOR RESEARCH INSTITUTE (BRI), DALLAS, FOCUSES ON ACCELERATING EARLY DETECTION AND TREATMENTS FOR PATIENTS WITH A BROAD RANGE OF CANCERS THIS AGREEMENT ALIGNS THE BEST SCIENCE FROM BOTH INSTITUTIONS, LEADING TO NEW CLINICAL TRIALS AND ACCESS TO TECHNOLOGY TO DRIVE THE DEVELOPMENT OF NEW THERAPIES, STARTING AT BAYLOR SCOTT & WHITE HEALTH'S 49 HOSPITALS THROUGHOUT TEXAS AS A MEASURE OF OUR IMPACT IN THE COMMUNITY, TGEN DISTINGUISHED PROFESSOR AND PHYSICIAN-IN-CHIEF, DR DANIEL VON HOFF, RECEIVED THE 2015 WALLACE A REED M D AWARD BY THE ARIZONA MEDICAL ASSOCIATION, RECOGNIZING HIS MANY INNOVATIVE CONTRIBUTIONS TO THE ADVANCEMENT OF CANCER CARE, ESPECIALLY IN THE REALM OF PANCREATIC CANCER, ONE OF THE MOST DIFFICULT TO TREAT OF ALL CANCER TYPES BUILDING ON OUR EXPERTISE WITH HELIOS EDUCATION FOUNDATION IN TRAINING THE NEXT GENERATION OF PHYSICIANS AND RESEARCH SCIENTISTS, WE CONDUCTED A PILOT PROGRAM WITH THE SCOTTSDALE UNIFIED SCHOOL DISTRICT THAT PROVIDES TEACHERS WITH STRONG FLUENCY IN BIOMEDICAL RESEARCH THE EXCELLENCE IN BIOSCIENCE TEACHER INITIATIVE CONSISTED OF AN INTENSIVE, THREE-DAY SERIES OF PRESENTATIONS, INTERACTIVE DISCUSSIONS AND PRACTICAL EXPERIENCES LED BY TGEN BIO-MEDICAL EXPERTS IN OCTOBER, THE FOOD AND DRUG ADMINISTRATION (FDA) APPROVED A DRUG, ONIVYDE, FOR ADVANCED PANCREATIC CANCER, BASED ON TGEN-LED RESEARCH AND CLINICAL TRIALS, PROVIDING PATIENTS NEW TREATMENT OPTIONS BRAIN CANCER RESEARCH, FUNDED BY THE BEN & CATHERINE IVY FOUNDATION, PRODUCED SEVERAL NOTABLE ADVANCEMENTS ONE TGEN STUDY SHOWED THAT A DRUG, PROPENTOFYLLINE, PREVIOUSLY DEVELOPED FOR DEMENTIA, KNOCKS DOWN A PROTEIN THAT PROMOTES THE SPREAD OF THE BRAIN CANCER GLIOBLASTOMA, INCREASES SENSITIVITY TO A STANDARD CHEMOTHERAPY DRUG, AND INHIBITS GLIOBLASTOMA CELL INVASION THIS NOW BECOMES A TARGET OF TREATMENT-FOCUSED RESEARCH NEUROGENOMICS FACULTY ALSO COMPLETED A THIRD SEASON OF A CONCUSSION/BRAIN INJURY STUDY WITH RIDDELL, THE ARIZONA STATE UNIVERSITYS FOOTBALL TEAM - ALONG WITH BARROW NEUROLOGICAL INSTITUTE, AND A T STILL UNIVERSITY - TO DISCOVER BIOMARKERS THAT MIGHT INDICATE WHEN AN ATHLETE IS TOO HURT TO PLAY ADDITIONALLY, THE FOLLOWING SUMMARY PROVIDES A SNAPSHOT OF PROGRESS IN CLINICAL RESEARCH AND CLINICAL TRIALS, SCIENTIFIC PUBLICATIONS, GRANTS, CONTRACTS, PHILANTHROPY, EDUCATION AND OUTREACH, MEDIA AND COMMUNITY RECOGNITION

Return Reference	Explanation
CLINICAL RESEARCH AND CLINICAL TRIALS	IN 2015, TGEN ADVANCED A SERIES OF INNOVATIVE RESEARCH INITIATIVES THAT YIELDED NUMEROUS SCIENTIFIC DISCOVERIES (ALL WITH THE POTENTIAL FOR CLINICAL APPLICATION), ESTABLISHED NATIONAL AND INTERNATIONAL COLLABORATIONS, AND LED NEW AND EXCITING CLINICAL TRIALS WITH PROMISING RESULTS NOTABLE ARE - IN EARLY MAY, WE ANNOUNCED A COLLABORATION WITH DALLAS, TEXAS-BASED BAYLOR HEALTHCARE AND RESEARCH INSTITUTE FOCUSED ON ACCELERATING EARLY DETECTION AND TREATMENTS FOR PATIENTS WITH A BROAD RANGE OF CANCERS THIS AGREEMENT FORGES THE BEST SCIENCE OF BOTH INSTITUTIONS, LEADING TO NEW CLINICAL TRIALS AND ACCESS TO TECHNOLOGY TO DRIVE THE DEVELOPMENT OF NEW THERAPIES, STARTING AT BAYLOR SCOTT & WHITE HEALTH'S 49 HOSPITALS THROUGHOUT TEXAS - THE WEEK PRIOR TO THE TGEN-BAYLOR ANNOUNCEMENT, PREVIOUS COLLABORATIVE WORK BETWEEN OUR INSTITUTIONS LED THE AMERICAN ASSOCIATION FOR CANCER RESEARCH (AACR) TO ANNOUNCE THAT A SCIENTIFIC PAPER DESCRIBING POTENTIAL DRUG TARGETS FOLLOWING THE UNPRECEDENTED GENOMIC SEQUENCING OF 14 METASTATIC TRIPLE-NEGATIVE BREAST CANCER PATIENTS WAS THE MOST CITED STUDY IN 2013 OF ANY PUBLISHED THAT YEAR BY AACR'S JOURNAL MOLECULAR CANCER THERAPEUTICS - IN EARLY NOVEMBER, STAND UP TO CANCER (SU2C) SELECTED DR VON HOFF AND HIS TEAM TO LEAD ANOTHER PANCREATIC CANCER DREAM TEAM, DR VON HOFFS SECOND SUCH TEAM (HIS FIRST ACCRUED MORE CANCER PATIENTS ONTO CLINICAL TRIALS THAN ANY DREAM TEAM TO DATE) THIS SELECTION VALIDATES THE SUCCESS THAT DR VON HOFF AND HIS COLLEAGUES HAVE MADE, AND SIGNIFIES SU2CS BELIEF THAT HIS TEAM OFFERS THE MOST PROMISING NEW APPROACHES TO TREAT PANCREATIC CANCER THE OVERARCHING AIM FOR THE RESEARCH GRANT IS TO DEVELOP THERAPIES THAT GREATLY IMPROVE A PERSONS SURVIVAL OVER AND ABOVE WHAT DR VON HOFF AND HIS TEAM HAVE ALREADY ACHIEVED STAND UP TO CANCER TEAM SCIENCE AWARDS (ALL EXCEEDING 6 MILLION DOLLARS) ARE THE MOST DIFFICULT PEER-REVIEWED SUPPORT TO SECURE IN MEDICAL RESEARCH DR JEFFREY TRENT SERVES AS CO-LEADER OF THE MELANOMA DREAM TEAM (JOINTLY SPONSORED BY STAND UP TO CANCER AND THE MELANOMA RESEARCH ALLIANCE) FOR A RESEARCH INSTITUTION TO HAVE TWO OF THE 11 TEAM SCIENCE AWARDS IS A GREAT COMPLIMENT TO THE EXCELLENCE OF TGEN SCIENCE - THE AVERAGE AGE OF DIAGNOSIS OF OVARIAN CANCER (THE MOST DEADLY FORM OF CANCER IN WOMAN) IS 64 YEARS BUILDING CLINICALLY ON RESEARCH LED BY TGEN FACULTY, TGEN DEVELOPED A CLINICAL TRIAL FOR PATIENTS FROM AROUND THE WORLD WHO SUFFER FROM THE MOST DEADLY SUB-TYPE OF OVARIAN CANCER, CALLED SMALL CELL CARCINOMA OF THE OVARY (SCCOHT) THIS PARTICULARLY AGGRESSIVE TYPE OF CANCER IS DIAGNOSED AT AN AVERAGE AGE OF 24 YEARS, WITH GIRLS AS YOUNG AS 14 MONTHS DIAGNOSED WITH THIS DISEASE - ALSO IN A LANDMARK TRIAL, THE SU2C MELANOMA DREAM TEAM DISCUSSED ABOVE (CO-LED BY YALES UNIVERSITIES DR PAT LORUSSO) ENROLLED ITS FIRST PATIENTS, WITH UP TO ONE HUNDRED MORE PATIENTS WITH THE MOST DEADLY SUB-TYPE OF THIS MELANOMA EXPECTED TO ENROLL OVER THE 18 MONTHS - WORK SUPPORTED BY THE BEN & CATHERINE IVY FOUNDATION LED TO THREE PROJECTS FOCUSED ON GLIOBLASTOMA THE FIRST, A SIGNIFICANT AND INNOVATIVE TRIAL WITH COLLEAGUES AT BARROW NEUROLOGICAL INSTITUTE WILL TEST NEW DRUGS IN A PHASE ZERO CLINICAL TRIAL TO DETERMINE IF THEY CAN PENETRATE THE BLOOD-BRAIN BARRIER AND BE EFFECTIVE AGAINST THE TUMOR ANOTHER DESCRIBED OUR STUDY PUBLISHED IN THE OXFORD UNIVERSITY PRESS JOURNAL NEURO-ONCOLOGY, REVIEWING THE STATE-OF-THE-ART TREATMENTS FOR GLIOBLASTOMA, AND A RELATED CLINICAL TRIAL AT UC SAN FRANCISCO AND THE THIRD, WORK WITH THE ALLEN BRAIN INSTITUTE IN SEATTLE, WASHINGTON, TO UPDATE THE IVY GLIOBLASTOMA ATLAS PROJECT - TECHNOLOGY ADVANCEMENTS IN RECENT YEARS NOW ALLOW TGEN AND OTHER SCIENTISTS TO LOOK DEEPER INTO THE HUMAN GENOME THAN EVER BEFORE, WHICH HAS FURTHERED THE RESEARCH OF SEVERAL FACULTY MEMBERS INTO SO-CALLED LIQUID BIOPSIES - MORE OR LESS AN ADVANCED BLOOD TEST - FOR DETECTING THE SMALLEST OF CANCER CELLS (OR THE CONTENT OF THOSE CANCER CELLS) SWIMMING IN A PERSONS BLOOD, LOOKING FOR A SPOT TO TAKE ROOT AND BECOME A FULL-BLOWN TUMOR - FINALLY, A HOST OF OUR SCIENTISTS INCLUDING DRS CRAIG AND HUENTLEMAN, JOIN OUR CLINIC LEADER (DR NARAYANAN) IN THEIR FOCUS ON CHILDREN WITH RARE OR UNDIAGNOSED DISORDERS TO PROVIDE HOPE AND ANSWERS TO PARENTS WHO ENDURE DIAGNOSTIC ODYSSEYS THAT AT TIMES SPAN MULTIPLE YEARS

Return Reference	Explanation
PEER REVIEWED LABORATORY RESEARCH PUBLICATIONS AND PRESENTATIONS	SINCE DAY ONE, THE FOCUS OF OUR TRANSLATIONAL RESEARCH HAS CONSTANTLY REMAINED THE PATIENT, THOSE INDIVIDUALS WITH CANCER, ALZHEIMERS AND OTHER NEUROLOGICAL DISORDERS, AND A HOST OF RARE DISEASES THAT ALL TOO OFTEN GO MIS- OR UNDIAGNOSED IN JANUARY, DURING HIS STATE-OF-THE-UNION ADDRESS, PRESIDENT OBAMA SAID THAT PERSONALIZED MEDICINE "GIVES US ONE OF THE GREATEST OPPORTUNITIES FOR NEW MEDICAL BREAKTHROUGHS THAT WE HAVE EVER SEEN " WHILE MANY INSTITUTES AND HEALTHCARE NETWORKS HAVE TAKEN UP THE CHARGE OF LATE, TGEN HAS PUSHED THE BOUNDARIES OF THIS SPACE FOR THE PAST DECADE MUCH OF WHAT WE LEARN IS PUBLISHED IN LEADING SCIENTIFIC AND MEDICAL JOURNALS, WHICH INCREASES THE KNOWLEDGE BASE OF ALL THOSE IN THE BIOMEDICAL RESEARCH AND MEDICAL SPACE OUR ANNUAL SCIENTIFIC RETREAT IN OCTOBER BROUGHT TOGETHER NEARLY 240 REGISTRANTS INCLUDING TGEN FACULTY, STAFF, STUDENTS AND 45 COLLABORATORS TGEN SCIENTISTS PRESENTED OVER 60 SCIENTIFIC POSTERS, EIGHT UNIQUE BREAKOUT PANELS AND FOUR COMPETITIVELY SELECTED "HOT TOPICS" PRESENTATIONS THE PURPOSE OF THE EVENT WAS TO SUMMARIZE THE INSTITUTES SCIENTIFIC YEAR AND CREATE AN ENVIRONMENT IN WHICH NEW PROFESSIONAL RELATIONSHIPS AND COLLABORATIONS, BOTH INTERNAL AND EXTERNAL, COULD DEVELOP IN 2015, TGEN RESEARCHERS PUBLISHED THEIR RESEARCH RESULTS EXTENSIVELY IN NUMEROUS SCHOLARLY PEER-REVIEWED ACADEMIC JOURNALS AND THROUGH PRESENTATIONS AT LEADING NATIONAL AND INTERNATIONAL CONFERENCES THESE INCLUDE PUBLICATION IN LEADING SCIENTIFIC JOURNALS SUCH AS SCIENCE ADVANCES, PROCEEDING OF THE NATIONAL ACADEMY OF SCIENCES, USA, CELL, NATURE COMMUNICATIONS, MOLECULAR CANCER THERAPEUTICS, NERO ONCOLOGY, PLOS ONE, GENOME RESEARCH, JOURNAL OF THE AMERICAN MEDICAL ASSOCIATION, NEUROLOGY, AND A HOST OF OTHER DISEASE-ASSOCIATED PUBLICATIONS 2015 HIGHLIGHTS A) DESMOPLASIA IN PRIMARY TUMORS AND METASTATIC LESIONS OF PANCREATIC CANCER CLIFFORD J WHATCOTT, CAROLINE H DIEP, PING JIANG, APRILL WATANABE, JANINE LOBELLO, CHAO SIMA, GALEN HOSTETTER, H MICHAEL SHEPARD, DANIEL D VON HOFF, AND HAIYONG HAN FEBRUARY 18, 2015 B) REVIEW OF X-LINKED SYNDROMES WITH ARTHROGRYPOSIS OR EARLY CONTRACTURES-AID TO DIAGNOSIS AND PATHWAY IDENTIFICATION HUNTER JM1, KIEFER J, BALAK CD, JOOMA S, AHEARN ME, HALL JG, BAUMBACH-REARDON L AM J MED GENET A 2015 MAY, 167 (5) 931-73 EPUB 2015 MAR 19 C) NOVEL PATHOGENIC VARIANTS AND GENES FOR MYOPATHIES IDENTIFIED BY WHOLE EXOME SEQUENCING HUNTER JM, AHEARN ME, BALAK CD, LIANG WS, KURDOGLU A, CORNEVEAUX JJ, RUSSELL M, HUENTELMAN MJ, CRAIG DW, CARPTEN JD, COONS SW, DEMELLO DE, HALL JG, BERNES SN AND BAUMBACH-REARDON L MOLECULAR GENETICS & GENOMIC MEDICINE VOLUME 3, ISSUE 4, PAGES 283301 ARTICLE FIRST PUBLISHED ONLINE APRIL 8, 2015 D) TOWARDS PRECISION MEDICINE IN GLIOBLASTOMA THE PROMISE AND THE CHALLENGES MICHAEL D PRADOS, SARA A BYRON, NHAN L TRAN, JOANNA J PHILLIPS, ANNETTE M MOLINARO, KEITH L LIGON, PATRICK Y WEN, JOHN G KUHN, INGO K MELLINGHOFF, JOHN F DE GROOT, HOWARD COLMAN, TIMOTHY F CLOUGHESY, SUSAN M CHANG, TIMOTHY C RYKEN, WAIBHAV D TEMBE, JEFFREY A KIEFER, MICHAEL E BERENS, DAVID W CRAIG, JOHN D CARPTEN AND JEFFREY M TRENT NEURO ONCOL (2015) DOI 10 1093/NEUONC/NOV031 FIRST PUBLISHED ONLINE MAY 1, 2015 E) STAPHYLOCOCCUS AUREUS AND THE ECOLOGY OF THE NASAL MICROBIOME CINDY M LIU, LANCE B PRICE, BRUCE A HUNGATE, ALISON G ABRAHAM, LISBETH A LARSEN, KAARE CHRISTENSEN, MARC STEGGER, ROBERT SKOV, PAAL SKYTT ANDERSEN SCIENCE ADVANCES 05 JUN 2015, VOL 1, NO 5 F) PHYLOGENETICALLY TYPING BACTERIAL STRAINS FROM PARTIAL SNP GENOTYPES OBSERVED FROM DIRECT SEQUENCING OF CLINICAL SPECIMEN METAGENOMIC DATA SAHL JW, SCHUPP JM, RASKO DA, COLMAN RE, FOSTER JT, KEIM P GENOME MED 2015 JUN 9,7(1) 52 G) ORCHESTRATING THE TUMOR MICROENVIRONMENT TO IMPROVE SURVIVAL FOR PATIENTS WITH PANCREATIC CANCER NORMALIZATION, NOT DESTRUCTION WHATCOTT CJ, HAN H, VON HOFF DD CANCER J 2015 JUL-AUG, 21(4) 299-306 H) PILOT TRIAL OF SELECTING MOLECULARLY GUIDED THERAPY FOR PATIENTS WITH NON-V600 BRAF-MUTANT METASTATIC MELANOMA EXPERIENCE OF THE SU2C/MRA MELANOMA DREAM TEAM LORUSSO PM, BOERNER SA, PILAT MJ, FORMAN KM, ZUCCARO CY, KIEFER JA, LIANG WS, HUNSBERGER S, REDMAN BG, MARKOVIC SN, SEKULIC A, BRYCE AH, JOSEPH RW, COWEY CL, FECHER LA, SOSMAN JA, CHAPMAN PB, SCHWARTZ GK, CRAIG DW, CARPTEN JD, TRENT JM MOL CANCER THER 2015 AUG, 14(8) 1962-71 EPUB 2015 JUN 10 I) WHOLE-GENOME BISULFITE SEQUENCING OF CELL-FREE DNA IDENTIFIES SIGNATURE ASSOCIATED WITH METASTATIC BREAST CANCER LEGENDRE C, GOODEN GC, JOHNSON, MARTINEZ RA, LIANG WS AND SALHIA B CLINICAL EPIGENETICS 2015, 7 100 SEPTEMBER 16, 2015 J) BRINGING RNA-SEQ CLOSER TO THE CLINIC VAN KEUREN-JENSEN K, KEATS JJ, CRAIG DW NAT BIOTECHNOL 2014 SEP; 32(9) 884-5 K) MULTIFOCAL CLONAL EVOLUTION CHARACTERIZED USING CIRCULATING TUMOR DNA IN A CASE OF METASTATIC BREAST CANCER MUHAMMED MURTAZA, SARAH-JANE DAWSON, KATHERINE POGREBNIAK, OSCAR M RUEDA, ELENA PROVENZANO, JOHN GRANT, SUET-FEUNG CHIN, DANA W Y TSUI, FRANCESCO MARASS, DAVINA GALE, H RAZA ALI, PANKTI SHAH, TANIA CONTENTE-CUOMO, HOSSEIN FARAHANI, KAREY SHUMANSKY, ZOYA KINGSBURY, SEAN HUMPHRAY, DAVID BENTLEY, SOHRAB P SHAH, MATTHEW WALLIS, NITZAN ROSENFELD & CARLOS CALDAS NATURE COMMUNICATIONS 6, ARTICLE NUMBER 8760 L) RARE VARIANTS IN CARDIOMYOPATHY GENES ASSOCIATED WITH STRESS-INDUCED CARDIOMYOPATHY KALANI MY, SINIARD AL, CORNEVEAUX JJ, BRUHNS R, RICHHOLT R, FORSETH J, ZABRAMSKI JM, NAKAJI P, SPETZLER RF, HUENTELMAN MJ NEUROSURGERY 2015 NOV 24

Return Reference	Explanation
GRANT SUPPORT	IN ADDITION TO PHILANTHROPIC DONATIONS AND RESEARCH CONTRACTS, GRANT FUNDING IS AN IMPORTANT FUNDING SOURCE FOR RESEARCH TO DATE IN 2015, TGEN INVESTIGATORS SUBMITTED 97 GRANTS TOTALING $84M TO DATE IN 2015, TGEN WAS AWARDED 20 GRANTS, TOTALING $5 7M, WITH AN ADDITIONAL 12 GRANTS PENDING AWARD TOTALING $3 6M AND 54 GRANTS UNDER REVIEW TOTALING $35M TGENS SUCCESS RATE HAS CONSISTENTLY MET OR EXCEEDED THE NATIONAL AVERAGE AS CALCULATED BY THE NIH IN 2015, TGENS CUMULATIVE SUCCESS RATE OF 22%, WAS SLIGHTLY HIGHER THAN THE NATIONAL AVERAGE 2015 highlights A SELECTION OF AWARDS INCLUDE A) THREE-YEAR STAND UP TO CANCER GRANT TOTALING $12M TO DR VON HOFF TO DEVELOP THERAPIES THAT IMPROVE SURVIVAL OF PATIENTS WITH PANCREATIC CANCER B) FIVE-YEAR GRANT FROM THE NATIONAL INSTITUTES OF HEALTH TOTALING $1,665,818 TO DR MATT HUENTELMAN TO STUDY NEURAL SYSTEM DYNAMICS AND GENE EXPRESSION SUPPORTING SUCCESSFUL COGNITIVE AGING C) FIVE-YEAR GRANT FROM NIH TOTALING $778,502 TO DR MATT HUENTELMAN TO STUDY EPIGENETIC, NEUROIMAGING AND BEHAVIORAL EFFECTS OF HYPERTENSION IN THE AGING BRAIN D) TWO-YEAR GRANT FROM THE NATIONAL INSTITUTES OF HEALTH TOTALING $735,851 TO DR PATRICK PIRROTTE TO STUDY PRESERVATION OF DRIED PLASMA SPOTS FOR DOWNSTREAM PROTEOMIC APPLICATIONS E) FOUR-YEAR GRANT FROM NIH TOTALING $471,542 TO DR MATT HUENTELMAN TO STUDY A CELL ACTIVITY TAGGING TOOLBOX, ALSO KNOW AS CATT, TO BETTER UNDERSTAND DEVELOPMENT AND APPLICATION OF NEURONAL CELL ACTIVITY F) ONE-YEAR GRANT FROM THE CENTERS FOR DISEASE CONTROL AND PREVENTION TOTALING $339,997 TO DR PAUL KEIM TO STUDY DNA SEQUENCING AND BIOINFORMATICS ANALYSIS OF PATHOGENS WITH IMP G) ONE-YEAR GRANT FROM THE ARIZONA BIOMEDICAL RESEARCH COMMISSION TOTALING $225,000 TO DR JESSE HUNTER TO STUDY IDENTIFICATION AND FUNCTIONAL CHARACTERIZATION OF NOVEL NEUROMUSCULAR DISEASE CAUSING VARIANTS IN ARIZONA INFANTS AND CHILDREN H) TWO-YEAR GRANT FROM THE AVON FOUNDATION TOTALING $200,006 TO DR BODOUR SALHIA TO STUDY THE DEVELOPMENT OF NOVEL TARGETED THERAPEUTIC APPROACHES FOR BREAST CANCER METASTASIS TO THE BRAIN I) TWO-YEAR GRANT FROM SCIENCE FOUNDATION ARIZONA TOTALING $200,000 TO DR JEFFREY TRENT ON BEHALF OF DR MUHAMMAD MURTAZA TO STUDY THE FUTURE OF TRANSLATIONAL RESEARCH J) TWO-YEAR GRANT FROM THE NATIONAL INSTITUTES OF HEALTH TOTALING $176,403 TO DR DAVID CRAIG TO STUDY SOMATIC MUTATIONS IN THE BRAIN DURING ALZHEIMERS DISEASE K) TWO-YEAR GRANT FROM THE DEPARTMENT OF DEFENSE TOTALING $73,654 TO DR KENDALL VAN-KEUREN JENSEN TO STUDY EXOSOME-MEDIATED TRANSMISSION OF NEURODEGENERATION IN AMYOTROPHIC LATERAL SCLEROSIS (ALS) L) TWO-YEAR GRANT FROM THE NATIONAL FOUNDATION FOR CANCER RESEARCH TOTALING $300,002 TO DRS DANIEL VON HOFF AND HAIYONG HAN TO STUDY A NOVEL APPROACH TO TARGETING CANCER CELLS THROUGH MODULATING GLOBAL GENE TRANSCRIPTION USING SUPER-ENHANCER (SE) INHIBITORS M) ONE-YEAR GRANT FROM THE ARIZONA ALZHEIMERS RESEARCH CONSORTIUM TOTALING $205,000 TO DR MATT HUENTELMAN FOR FOUR PROJECTS INVOLVING "EXCEPTIONAL" PHENOTYPES, THE DYRK1A GENE, VALIDATION OF RNA TARGETS IN SERUM AND CSF AND CHARACTERIZATION OF MITOCHONDRIAL PSEUDOGENES IN ALZHEIMERS DISEASE N) THREE-YEAR GRANT FROM THE NATIONAL INSTITUTES OF HEALTH (NIH) TOTALING $2,062,360 TO DR KENDALL VAN KEUREN-JENSEN AND DR MATT HUENTELMAN FOR A STUDY OF BIOMARKERS THAT COULD PREDICT PATIENT OUTCOMES, FOLLOWING INJURIES THAT RESULT IN BLEEDING IN THE BRAIN O) FIVE-YEAR GRANT FROM NIH TOTALING $1,033,331 TO DR NHAN TRAN TO STUDY THE NOVEL ROLE OF TROY-EGFR GENE COMPLEX IN GLIOBLASTOMA BRAIN TUMOR INVASION AND RESISTANCE P) TWO-YEAR GRANT FROM THE NIH TOTALING $487,540 TO DR MATT HUENTELMAN FOR A STUDY IDENTIFYING PATHOGENIC MECHANISMS IMPORTANT IN MULTIPLE SYSTEM ATROPHY (MSA), FOR WHICH THERE CURRENTLY ARE NO DISEASE PREVENTING OR MODIFYING TREATMENTS Q) TWO-YEAR GRANT FROM NIH/NATIONAL CANCER INSTITUTE TOTALING $445,005 TO DR HAIYONG HAN FOR A STUDY TARGETING THE PHD2 GENE IN PANCREATIC CANCER R) ONE-YEAR GRANT FROM THE CENTERS FOR DISEASE CONTROL TOTALING $347,043 TO DR PAUL KEIM FOR DNA SEQUENCING AND BIOINFORMATICS ANALYSIS OF PATHOGENS, INCLUDING EMERGENCY RESPONSE AS NEEDED FOR DISEASE OUTBREAK

Return Reference	Explanation
ENTERPRISE EFFORTS, COLLABORATION, SPIN-OFFS AND JOB CREATION	THE TECHNOLOGY TRANSFER OFFICE (TTO) FACILITATES AND ACCELERATES THE COMMERCIALIZATION OF TGEN'S SCIENTIFIC DISCOVERIES FOR THE BENEFIT OF HUMAN HEALTH BY, - IDENTIFYING, PATENTING AND LICENSING NEW TECHNOLOGY, - FACILITATING ACCESS AND EXCHANGE OF RESEARCH MATERIALS, TECHNOLOGIES, AND DATA VIA MATERIAL TRANSFER AGREEMENTS (MTAS) OR CONFIDENTIAL DISCLOSURE AGREEMENTS (CDAS), - NEGOTIATING COLLABORATIVE RESEARCH AGREEMENTS, AND - ASSISTING IN THE FORMATION OF START-UP COMPANIES WHEN APPROPRIATE DURING 2015, TGEN CONTINUED COLLABORATIONS WITHIN THE STATE OF ARIZONA, INCLUDING NEW JOINT FACULTY WITH MAYO CLINIC Invention disclosures TGEN RECEIVED 18 INVENTION DISCLOSURES BASED ON DISCOVERIES STEMMING FROM TGEN-LED RESEARCH, AND FILED 19 PROVISIONAL PATENT APPLICATIONS Contracts and collaborations TGEN SIGNED A TOTAL OF 358 CONTRACTS/AMENDMENTS IN 2015, BROKEN DOWN AS FOLLOWS A) 65 CDAS B) 66 MTAS C) 18 RESEARCH COLLABORATIONS D) 15 MASTER RESEARCH/SERVICES AGREEMENTS E) 44 RESEARCH PLANS AND SOWS F) 23 CONSULTING AGREEMENTS G) 62 PROFESSIONAL SERVICE AGREEMENTS H) 02 COMMERCIALIZATION LICENSES I) 63 AGREEMENTS COVERING MISCELLANEOUS ACTIVITIES A LISTING OF A NUMBER OF THE MAJOR RESEARCH COLLABORATORS INCLUDE ALLINA HEALTH/JNNI, BAYLOR RESEARCH INSTITUTE, BROAD INSTITUTE, COLORADO STATE UNIVERSITY, DIGNITY, FLORIDA INSTITUTE FOR HUMAN & MACHINE COGNITION, GEORGE MASON UNIVERSITY, HONORHEALTH, MAYO CLINIC, MIDWESTERN UNIVERSITY, NATIONAL CENTER FOR ADVANCING TRANSLATION SCIENCES, OHIO STATE UNIVERSITY, ST ANNES UNIVERSITY HOSPITAL Job creation IN 2015, 21 NEW FULL-TIME EQUIVALENT POSITIONS WERE CREATED WITH SALARIES AND BENEFITS TOTALING $1,205,184 SALARIES FOR TEMPORARY POSITIONS (THOSE POSITIONS CREATED FOR A FINITE PERIOD OF TIME) TOTALED $99,120, WHICH INCLUDES TEMPORARY TGEN STAFF AND TEMPORARY SERVICE FEES STUDENT SALARIES WERE JUST OVER $460,000, BRINGING THE OVERALL 2015 TOTAL TO $1,665,184 IN TERMS OF EDUCATION LEVEL, EIGHTY-SIX PERCENT OF FULL-TIME TGEN STAFF HOLDS A COLLEGE DEGREE AND FIFTY PERCENT HOLDS AN ADVANCED DEGREE 2015 FULL-TIME POSITIONS FILLED (NEW AND REPLACEMENTS) INCLUDED - ASSOCIATE BIOINFORMATICIAN - ASSISTANT PROFESSOR - BIOINFORMATICIAN - CLINICAL RESEARCH COORDINATOR - FINANCIAL ANALYST II - CONTRACTS MANAGER - FACILITIES TECHNICIAN - POST-DOC FELLOW - RESEARCH ASSISTANT PROFESSOR - RESEARCH ASSOCIATE - RESEARCH ASSOCIATE II - RESEARCH TECHNICIAN - SR GRANTS ADMINISTRATOR - SR STAFF SCIENTIST - SR VICE PRESIDENT, EMERGING OPPORTUNITIES

Return Reference	Explanation
EDUCATION	TGEN DESIGNED ITS SCIENCE EDUCATION AND COMMUNITY OUTREACH INITIATIVES TO ASSIST IN THE GROWTH OF THE BIOSCIENCE WORKFORCE IN ARIZONA, INCREASE PUBLIC FLUENCY IN TRANSLATIONAL MEDICINE, AND BUILD AN ACCESSIBLE COMMUNITY PRESENCE 2015 HIGHLIGHTS INCLUDE NEARLY 600 ARIZONA STUDENTS APPLIED TO THE 2015 HELIOS SCHOLARS AT TGEN PROGRAM, WITH 45 SELECTED TO WORK FULL-TIME ALONGSIDE A TGEN MENTOR TO DEVELOP AND ENHANCE THEIR SKILLS BY CONTRIBUTING TO AN AUTHENTIC BIOMEDICAL RESEARCH PROJECT IN TERMS OF 2015 COHORT DEMOGRAPHICS, 69 PERCENT ATTEND COLLEGES OR UNIVERSITIES IN ARIZONA, 27 PERCENT SELF-IDENTIFY AS RACES/ETHNICITIES UNDERREPRESENTED IN THE BIOSCIENCES, 11 PERCENT ATTEND HIGH SCHOOL, 87 PERCENT ARE WORKING TOWARD AN UNDERGRADUATE DEGREE AND 2 PERCENT ATTEND GRADUATE OR MEDICAL SCHOOL TGEN ENGAGED OVER 60 HELIOS SCHOLARS ALUMNI FOR THE FOURTH ANNUAL ALUMNI NETWORKING RECEPTION ALUMNI PROVIDED GUIDANCE TO THIS SUMMERS INTERN CLASS VIA A PANEL DISCUSSION AND PARTICIPATED IN THE SELECTION PROCESS NETWORKING OPPORTUNITIES ENSURE THE PROGRAM CONTINUES TO DELIVER ON THE MISSION TO GROW THE BIOSCIENCE WORKFORCE IN ARIZONA THE 2015-2016 IVY NEUROLOGICAL SCIENCES INTERNSHIP PROGRAM BEGAN IN JUNE TWO HIGH SCHOOL STUDENTS COMPLETED BRAIN TUMOR AND NEUROLOGICAL DISEASE RESEARCH INTERNSHIPS IN JULY TWO UNDERGRADUATES AND ONE MEDICAL SCHOOL STUDENT WILL BEGIN IN SEPTEMBER AT THE CONCLUSION OF THIS YEARS PROGRAM, 22 ARIZONA STUDENTS WILL HAVE COMPLETED PROFESSIONAL DEVELOPMENT AND INTENSIVE RESEARCH TRAINING IN BRAIN TUMORS AND NEUROLOGICAL DISEASE THE PROGRAM CONTINUES TO BE A HIGH-CALIBER SUCCESS IN WORKFORCE DEVELOPMENT AND PRODUCTIVE RESEARCH, RESULTING FROM THE GENEROSITY OF THE BEN AND CATHERINE IVY FOUNDATION IN ADDITION TO ITS ANNUAL HELIOS SCHOLARS AND IVY PROGRAMS, TGEN BROADENED THE SCOPE OF DIVERSITY IN STUDENT INTERN EXPERIENCES BY HOSTING A STUDENT INTERN FROM A PUBLIC AND HISTORICALLY BLACK UNIVERSITY, NORTH CAROLINA CENTRAL UNIVERSITY, PART OF THE UNIVERSITY OF NORTH CAROLINA SYSTEM ADDITIONALLY, TGEN RESEARCHERS MENTORED TWO BASIS SCHOOLS STUDENTS, AND HOSTED THREE ACADEMIC YEAR INTERNS SUPPORTED BY ARIZONA COMMUNITY FOUNDATION FUNDING WITH AN AWARD OF $25,000 FROM THE SCOTTSDALE UNIFIED SCHOOL DISTRICT FOUNDATION, TGEN CONDUCTED A TEACHER TRAINING PILOT PROGRAM IN JULY WITH SAGUARO HIGH SCHOOL, A MAGNET MATH AND SCIENCE ACADEMY IN THE SCOTTSDALE UNIFIED SCHOOL DISTRICT THE PURPOSE OF THE THREE-DAY, FIVE-TEACHER PROGRAM WAS TO INCREASE THE TEACHERS CONTENT KNOWLEDGE, DEPTH OF UNDERSTANDING AND INSIGHT INTO BIOMEDICAL RESEARCH, BENEFITTING AN EXPONENTIAL NUMBER OF ARIZONA STUDENTS OVER TIME AN INTENSIVE AGENDA IMMERSED TEACHERS IN A SERIES OF PRESENTATIONS, INTERACTIVE DISCUSSIONS AND PRACTICAL EXPERIENCES LED BY TGEN FACULTY AND STAFF THE PROGRAM PROVIDED PROOF-OF-CONCEPT FOR THE POSSIBILITY OF A FUTURE STATEWIDE TEACHER PROFESSIONAL DEVELOPMENT INITIATIVE THAT WILL ENHANCE TGENS REPUTATION AS A COMMITTED EDUCATION STAKEHOLDER IN ARIZONA PROGRAM FEEDBACK WAS OVERWHELMINGLY POSITIVE TGEN ASSISTED THE FLINN FOUNDATION WITH PILOTING A NEW INTERNSHIP PROGRAM AS PART OF ITS WORKFORCE DEVELOPMENT INITIATIVE, THE FLINN SCHOLARS PROGRAM AN ARIZONA STATE UNIVERSITY FLINN SCHOLAR FOCUSED ON THE BUSINESS OF SCIENCE WORKING ALONGSIDE TGENS BUSINESS DEVELOPMENT TEAM TGEN STAFF TRAVELED TO PITTSBURGH TO VOLUNTEER AND COLLECT DATA AT THE 2015 INTEL ISEF, THE INTERNATIONAL HIGH SCHOOL SCIENCE FAIR, WHICH IS THE LARGEST IN THE WORLD THE INTEL ISEF WILL RETURN TO PHOENIX IN 2016 AND 2019 TGEN STAFF PARTICIPATES ON THE LOCAL ARRANGEMENTS COMMITTEE AND JUDGE RECRUITMENT COMMITTEE TO ENSURE THE THOUSANDS OF INDIVIDUALS ATTENDING THE FAIR FROM NEARLY 70 COUNTRIES EXPERIENCE PHOENIX AND TGEN IN A POSITIVE WAY LASTLY, TGEN STAFF PARTICIPATED IN AN UPDATE OF THE BIOSCIENCE STANDARDS FOR THE ARIZONA DEPARTMENT OF EDUCATION CAREER AND TECHNICAL EDUCATION VIA THE VALIDATION COMMITTEE THE GOAL OF PARTICIPATION WAS TO PROVIDE EXPERT INSIGHT INTO THE TECHNICAL KNOWLEDGE AND SKILLS HIGH SCHOOL STUDENTS NEED TO BE PREPARED TO ENTER THE BIOSCIENCE WORKFORCE

Return Reference	Explanation
PUBLIC OUTREACH	IN 2015, TGEN HOSTED OVER 800 INDIVIDUALS FOR LABORATORY TOURS, AN INCREASE OF NEARLY 40 PERCENT OVER 2014 TGEN IS COMMITTED TO MAINTAINING AN ACCESSIBLE COMMUNITY PRESENCE FOR THE PUBLIC, SCHOOL GROUPS, LEADERS AND INTERESTED INDIVIDUALS TGEN BELIEVES IT HAS A RESPONSIBILITY TO OFFER WORKFORCE DEVELOPMENT KNOWLEDGE, CONTENT AND EXPERTISE TO OUR EDUCATION COMMUNITY PARTNERS IN THIS SPIRIT, TGEN IS REPRESENTED ON BOARDS, COMMITTEES AND WORKING GROUPS INCLUDING, BUT NOT LIMITED TO CENTER FOR RESEARCH IN ENGINEERING, SCIENCE AND TECHNOLOGY (CREST) SCHOOL ADVISORY BOARD, ARIZONA BIOINDUSTRY ASSOCIATION EVENTS AND EDUCATION COMMITTEE, CITY OF PHOENIX HEALTHCARE SECTOR PARTNERSHIP; ARIZONA BIOMEDICAL RESEARCH COMMISSION, CENTRAL PHOENIX WOMEN, DEER VALLEY UNIFIED SCHOOL DISTRICT CAREER AND TECHNICAL EDUCATION BOARD, TEMPE UNIFIED HIGH SCHOOL DISTRICT CAREER AND TECHNICAL EDUCATION BOARD, QUEEN CREEK HIGH SCHOOL BIOTECHNOLOGY ADVISORY PANEL, PEORIA UNIFIED MEDICAL, ENGINEERING AND TECHNOLOGY PROFESSIONAL ACADEMY ADVISORY TEAM IN MARCH 2015, TGEN HOSTED TWO PHOENIX HIGH SCHOOL STUDENTS FOR THE BE A LEADER FOUNDATIONS ANNUAL SHADOW A PROFESSIONAL DAY TGEN HAS PARTICIPATED IN THIS EVENT EVERY YEAR FOR MORE THAN FIVE YEARS THE MISSION OF THE BE A LEADER FOUNDATION IS TO DESIGN PROGRAMS THAT INSTILL A HIGH SCHOOL COMPLETION AND COLLEGE-GOING CULTURE FOR LOCAL STUDENTS IN SUPPORT OF THE ARIZONA SCITECH FESTIVAL, TGEN PARTNERED WITH START@WEST-MEC, A COLLABORATIVE EDUCATION SPACE AT THE WESTERN MARICOPA EDUCATION CENTER, TO DELIVER TEACHER PROFESSIONAL DEVELOPMENT IN BIOINFORMATICS AND COMPUTATIONAL BIOLOGY TGEN SELECTED THIS PARTNER TO INCREASE ACCESS TO TGEN PROFESSIONAL DEVELOPMENT FOR WEST VALLEY EDUCATORS ABOUT 20 TEACHERS ATTENDED TO INTERACT WITH A PANEL OF TGEN RESEARCHERS AND STUDENT INTERNS

Return Reference	Explanation
MEDIA, MARKETING AND PUBLIC RECOGNITION	THE OVERALL GOAL OF TGENS MEDIA EFFORTS IS TO BUILD A STRONG AND COMPELLING COMMUNICATIONS TOOL SET TO TELL TGENS STORY IMMEDIATELY TO AUDIENCES THAT, OVER TIME, WILL BE INCREASINGLY AWARE OF TGEN AND WHAT MAKES IT UNIQUE AND ESSENTIAL TO THE END, TGEN CONTINUALLY PURSUES EARNED MEDIA EXPOSURE FOR THE INSTITUTES RESEARCH ACTIVITIES 2015 ALSO MARKED TGENS ENGAGEMENT IN PAID MEDIA TO DRIVE TRAFFIC THROUGH ITS VARIOUS SOCIAL CHANNELS IN TERMS OF OUR SOCIAL PLATFORMS, WE SAW A 27 5% INCREASE ON FACEBOOK, 34 5% ON TWITTER, 94 5% ON LINKEDIN, AND OUR E-NEWS IS NOW SENT TO OVER 12,000 SUBSCRIBERS/DONORS OUR EARNED MEDIA EFFORTS CONTINUE TO RECEIVE POSITIVE PRESS, BOTH LOCALLY AND NATIONALLY, TOTALING NEARLY 1,000 IMPRESSIONS ACROSS VARIOUS PRINT, BROADCAST AND DIGITAL PLATFORMS, INCLUDING FORBES MAGAZINE, NEWSWEEK, THE ARIZONA REPUBLIC, PITTSBURGH POST-GAZETTE, SAN ANGELO STANDARD-TIMES (TEXAS), GENOMEWEB, PHOENIX BUSINESS JOURNAL, ARIZONA BUSINESS GAZETTE, THE ARIZONA DAILY SUN (FLAGSTAFF), ABC 15, FOX 10, CBS 5, ARIZONA FAMILY CHANNEL 3, KJZZ, KFYI, KTAR, CHANNEL 8 PBS PHOENIX, CHANNEL 6 PBS TUCSON, ARIZONA REDBOOK, ARIZONA FOOTHILLS MAGAZINE, ARIZONAS VOICE, MAGAZINE, DRUG DELIVERY SURVEYING THE GLOBAL COMPETITIVE LANDSCAPE, STATES NEWS SERVICE, TARGETED NEWS SERVICE, PLUS PATENT NEWS, PRWEB NEWSWIRE, WEB NEWSWIRE, VIRTUAL STRATEGY MAGAZINE, US FED NEWS, US OFFICIAL NEWS IN TERMS OF PUBLIC RECOGNITION, TGEN FACULTY AND LEADERSHIP PARTICIPATED IN NUMEROUS COMMUNITY ACTIVITIES AND SERVE ON MANY BOARDS RECOGNITION OF TGENS EFFORTS SERVES TO HIGHLIGHT OUR PUBLIC, ACADEMIC AND INDUSTRY INVOLVEMENT ACROSS ARIZONA IN 2015, RECOGNITION INCLUDED IN MARCH, THE PHOENIX BUSINESS JOURNAL NAMED TGEN COO TESS BURLESON AS ONE OF THE PHOENIX BUSINESS JOURNALS 2015 OUTSTANDING WOMEN IN BUSINESS THE AWARD HONORS REMARKABLE WOMEN IN THE VALLEY BUSINESS COMMUNITY WHO SERVE AS MENTORS, LEADERS AND VISIONARIES TGEN ASSOCIATE PROFESSOR DR MATT HUENTELMAN DELIVERED THE KEYNOTE PRESENTATION AT THE ANNUAL ARIZONA BIOINDUSTRY ASSOCIATION EXPO IN APRIL DR HUENTELMAN DISCUSSED HOW TGEN'S MINDCROWD PROGRAM IS A PRIME EXAMPLE OF USING ONLINE CROWDSOURCING TO RECRUIT VOLUNTARY INDIVIDUALS FOR SCIENTIFIC STUDIES AND CLINICAL RESEARCH TO AN AUDIENCE OF BIOSCIENCE INDUSTRY LEADERS, STATE AND CITY OFFICIALS AND STUDENTS TGEN DIRECTOR OF PUBLIC AFFAIRS AND EDUCATION, BRANDY WELLS, WAS APPOINTED BY GOVERNOR DOUG DUCEY TO THE ARIZONA BIOMEDICAL RESEARCH COMMISSION AND CONFIRMED BY THE ARIZONA SENATE TO SERVE A THREE-YEAR TERM AS A PUBLIC MEMBER COMMISSIONER

Return Reference	Explanation
Form 990, Part IV, Line 32b	The organization did not sell, exchange, dispose of, or transfer more than 25% of its net assets However, due to a significant decrease in PMeds financial position and continued operating losses, TGen recorded a reserve of $18 4 million to fully reserve the investment in PMed as of December 31, 2015 FORM 990, PART VI, LINE 2 RICHARD BOALS AND WILLIAM POST HAVE A BUSINESS RELATIONSHIP RICHARD BOALS AND ROBERT BULLA HAVE A BUSINESS RELATIONSHIP

Return Reference	Explanation
FORM 990, PART VI, LINE 11B	THE FORM 990 IS PREPARED BY AN OUTSIDE ACCOUNTING FIRM BASED ON INFORMATION PROVIDED BY THE TGEN FINANCE DEPARTMENT THE FORM 990 IS THEN REVIEWED BY THE FINANCE DEPARTMENT AND OTHER MEMBERS OF MANAGEMENT THE FORM 990 IS POSTED ON THE BOARD WEBSITE FOR BOARD REVIEW PRIOR TO FILING WITH THE IRS

Return Reference	Explanation
FORM 990, PART VI, LINE 12C	TGEN DISTRIBUTES A CONFLICT OF INTEREST QUESTIONNAIRE ANNUALLY TO ALL DIRECTOR LEVEL POSITIONS AND ABOVE, IN ADDITION TO ANY KEY EMPLOYEES DESIGNATED BY THE CHIEF OPERATING OFFICER THE QUESTIONNAIRES ARE REVIEWED BY THE CHIEF FINANCIAL OFFICER AND TGEN'S OFFICE OF RESEARCH COMPLIANCE THOSE EMPLOYEES WITH CONFLICTS ARE SENT FOR FURTHER REVIEW TO THE CHIEF OPERATING OFFICER TO ENSURE AN APPROPRIATE PLAN IS SET FORTH UPDATES TO THE LIST ARE HANDLED ON AN AS-NEEDED BASIS, BASED ON CONTRACT REVIEWS AND EMPLOYEE INFORMATION

Return Reference	Explanation
FORM 990, PART VI, LINES 15A AND 15B	TGEN'S GOVERNANCE AND EXECUTIVE COMPENSATION COMMITTEE WILL ACT IN AN "ADVICE AND CONSENT" CAPACITY REVIEWING THE RECOMMENDATIONS FOR THE PRESIDENT AND SCIENTIFIC DIRECTOR REGARDING THE COMPENSATION OF DISQUALIFIED PERSONS AND FORWARDING FINAL RECOMMENDATIONS TO THE FULL BOARD FOR APPROVAL DISQUALIFIED PERSONS (EXCEPT FOR THE PRESIDENT AND SCIENTIFIC DIRECTOR) WILL NOT BE PRESENT FOR, OR PARTICIPATE IN, COMMITTEE DELIBERATIONS CONCERNING THEIR COMPENSATION (OTHER THAN TO ANSWER QUESTIONS) THE PRESIDENT AND SCIENTIFIC DIRECTOR WILL PARTICIPATE IN THE DELIBERATIONS CONCERNING THE COMPENSATION OF DIRECT REPORTS DURING THE DECISION MAKING PROCESS, THE COMMITTEE WILL ADHERE TO THE EXECUTIVE COMPENSATION PHILOSOPHY THE COMMITTEE IS AUTHORIZED (AND PROVIDED WITH SUFFICIENT FUNDING) TO ANNUALLY ENGAGE OUTSIDE INDEPENDENT COMPENSATION AND LEGAL ADVISORS, WHEN DEEMED NECESSARY AND ADVISABLE THE COMMITTEE WILL COMPLY WITH THE "REBUTTABLE PRESUMPTION OF REASONABLENESS" UNDER SECTION 4958 OF THE INTERNAL REVENUE CODE WHENEVER POSSIBLE THE COMMITTEE WILL REVIEW AND UNDERSTAND THE INTERNAL REVENUE CODE PROVISIONS DEALING WITH "EXCESS BENEFIT TRANSACTIONS CONCERNING DISQUALIFIED PERSONS' COMPENSATION " WHEN DEVELOPING A COMPENSATION PHILOSOPHY, TGEN KEPT IN MIND THE FOLLOWING FACTORS THE TGEN MISSION AND STRATEGY THE TGEN CULTURE TRENDS IN COMPENSATION IN THE EXTERNAL ENVIRONMENT TRENDS IN RECRUITMENT OF NEW EMPLOYEES TRENDS IN ORGANIZATIONAL EMPLOYEE TURNOVER TGEN'S LIFE CYCLE STAGE THE COMPENSATION REVIEW PROCESS WAS LAST COMPLETED IN 2015

Return Reference	Explanation
FORM 990, PART VI, LINE 19	THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE PROVIDED TO THE GENERAL PUBLIC UPON REQUEST

Return Reference	Explanation
FORM 990, PART VII, SECTION A, LINE 1A	TGEN HAS A BOARD OF GOVERNORS THAT IS COMPRISED OF CURRENT VOTING DIRECTORS AND SOME FORMER DIRECTORS THAT REMAIN AFFILIATED WITH TGEN IN AN ADVISORY ROLE THE CURRENT NONVOTING ADVISORY GOVERNORS NOT LISTED AS DIRECTORS IN PART VII, SECTION A INCLUDE BETSY BAYLESS RITA CHENG SUSAN CLARK-JOHNSON WYATT DECKER THE HONORABLE DIANE ENOS ANN WEAVER HART, PH D THE HONORABLE JIM SLATTERY

Return Reference	Explanation
FORM 990, PART XI, LINE 9	BOOK TO TAX DIFFERENCE - K-1 PARTNERSHIP INCOME -396,804

Return Reference	Explanation
FORM 990 PART XII, LINE 3B	TGEN DID UNDERGO AN AUDIT AS SET FORTH IN THE SINGLE AUDIT ACT, OMB CIRCULAR A-133 AND UNIFORM GUIDANCE AND HAD A ZERO FINDING REPORT FOR 2015

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION CONSORTIUM/CONTRACTUAL TOTAL FEES 4110458

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION OUTSIDE RESEARCH SERVICES TOTAL FEES 1734558

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION CONSULTING TOTAL FEES 834226

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION TEMPORARY SERVICES TOTAL FEES 286811

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Attach to Form 990. ▶ Information about Schedule R (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
THE TRANSLATIONAL GENOMICS RESEARCH INSTITUTE

Employer identification number
75-3065445

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) TGEN ACCELERATORS LLC (TGAM) 445 NORTH 5TH STREET SUITE 600 PHOENIX, AZ 85004 75-3065445	GENOMICS	AZ	0	0	TGEN
(2) THE CENTER FOR TRANSLATIONAL DRUG DEV 445 N 5TH STREET SUITE 600 PHOENIX, AZ 85004 43-2047329	DRUG DEVEL	AZ	-141,435	1,753,446	TGAM LLC
(3) TRANSLATIONAL SYSTEMS LLC 445 N 5TH STREET SUITE 600 PHOENIX, AZ 85004 46-1309498	ADV RESEARCH	AZ	0	0	TGEN
(4) PET CANCER DIAGNOSTICS LLC 445 N 5TH STREET SUITE 600 PHOENIX, AZ 85004 75-3065445	ANIMAL DIAG	AZ	0	0	TGEN
(5) TGEN HEALTH VENTURES LLC 445 N 5TH STREET SUITE 600 PHOENIX, AZ 85004 46-4520712	HEALTH CARE	AZ	1,106,596	9,426,528	TGEN

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	No
(1)TGEN RESEARCH INSTITUTE FOUNDATION 445 N 5TH STREET SUITE 600 PHOENIX, AZ 85004 33-1092191	FUNDRAISING	AZ	501(c)(3)	7	TGEN	Yes	

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity? Yes	(i) No

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

		Yes	No
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule			
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of **(i)** interest, **(ii)**annuities, **(iii)**royalties, or**(iv)**rent from a controlled entity . . .	**1a**		No
b Gift, grant, or capital contribution to related organization(s) . . .	**1b**		No
c Gift, grant, or capital contribution from related organization(s) . . .	**1c**	Yes	
d Loans or loan guarantees to or for related organization(s) . . .	**1d**		No
e Loans or loan guarantees by related organization(s) . . .	**1e**		No
f Dividends from related organization(s) . . .	**1f**		No
g Sale of assets to related organization(s) . . .	**1g**		No
h Purchase of assets from related organization(s) . . .	**1h**		No
i Exchange of assets with related organization(s) . . .	**1i**		No
j Lease of facilities, equipment, or other assets to related organization(s) . . .	**1j**		No
k Lease of facilities, equipment, or other assets from related organization(s) . . .	**1k**		No
l Performance of services or membership or fundraising solicitations for related organization(s) . . .	**1l**		No
m Performance of services or membership or fundraising solicitations by related organization(s) . . .	**1m**	Yes	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . .	**1n**	Yes	
o Sharing of paid employees with related organization(s) . . .	**1o**	Yes	
p Reimbursement paid to related organization(s) for expenses . . .	**1p**		No
q Reimbursement paid by related organization(s) for expenses . . .	**1q**	Yes	
r Other transfer of cash or property to related organization(s) . . .	**1r**		No
s Other transfer of cash or property from related organization(s) . . .	**1s**		No

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

(a) Name of related organization	**(b)** Transaction type (a-s)	**(c)** Amount involved	**(d)** Method of determining amount involved
(1)TGEN RESEARCH INSTITUTE FOUNDATION	c	6,881,065	ACTUAL COST
(2)TGEN RESEARCH INSTITUTE FOUNDATION	m	7,185,227	ACTUAL COST
(3)TGEN RESEARCH INSTITUTE FOUNDATION	n	108,000	ACTUAL COST
(4)TGEN RESEARCH INSTITUTE FOUNDATION	o	193,613	ACTUAL COST
(5)TGEN RESEARCH INSTITUTE FOUNDATION	P	1,172,359	ACTUAL COST

Part VI **Unrelated Organizations Taxable as a Partnership** Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation