OMB No 1545-0047

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 <u>www IRS qov/form990</u>

Inspection

A F(			lendar year, or tax year beginning		16			
		applicable	C Name of organization NATIONAL ASSOCIATION OF IDEA PRIM	_	-	D Emp	oloyer i	dentification number
		change	NATIONAL ASSOCIATION OF IDEA PRI	VCIFAL INVESTIGATORS		27-	10406	552
∏ Na		hange	Doing business as					
FII		eturn	NAIPĪ			E Tele	phone ni	umber
		ınated	Number and street (or P O box if mai 430 Hampton Creek Court	ıl ıs not delivered to street address) Room/su	ııte	(80	31269	-8631
		d return on pending	City or town, state or province, countr	ry, and ZIP or foreign postal code			3,203	0031
		,	Columbia, SC 29209			<b>G</b> Gros	ss receip	ts \$ 335,944
			<b>F</b> Name and address of principa	l officer	H(a)	Is this a gro	up retu	ırn for
			Lucia Amelia Pirisi Creek 430 Hampton Creek Court			subordinates	5?	⊤ Yes 🗸
			Columbia, SC 29209		Н(b)	No Are all subo	rdınate	Yes No
I Ta	r-exer	mpt status	<b>✓</b> 501(c)(3)	sert no ) 4947(a)(1) or 527	. ,	ıncluded?		TES   NO
J W	ebsit	t <b>e:►</b> ww	w naipi org			Group exem		st (see instructions)
<b>K</b> Fom	n of o	organization	✓ Corporation Trust Association	on Cther ▶		r of formation		M State of legal domicile SC
				,				
Pa	Tt I		<b>imary</b> scribe the organization's mission o	or most significant activities				
Activities & Governance	c ( I d	communic programs (NAIGM), IDeA-fun NAIPI is directions	cation for the development, promot , funded by the Institutional Devel , National Institutes of Health (NII ded grants across the nation, in or also the collective voice of IDeA - s and goals NAIPI contributes to	Investigators (NAIPI) is a scientific tion and improvement of biomedical reopment A wards (IDeA) program of the h). The mission of the organization is reder to maximize resource utilization, funded investigators who work togeth organizing scientific meetings of IDeAs, and supporting the exchange of infinite times.	esearch te Ration to promo Increase er the NI A-funded	through the I al Institute cote communi productivity IH leaders of l scientists a	NBRE, of Gene cation and p fIDeA ind stu	COBRE and CTR ral Medical Sciences among the leaders of romote best practices to provide advice on its dents, collecting
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<b>≫</b>	2	Check th	nis box 🕨 🥅 if the organization dis	continued its operations or disposed	of more t	han 25% of	ıts net	assets
Æ			'					ı
f)				g body (Part VI, line 1a)			3	20
•			of independent voting members of mber of individuals employed in ca		5	20		
				cessary)			6	21
			•	t VIII, column (C), line 12			7a	0
	ьΝ	Net unrela	ated business taxable income from	n Form 990-T, line 34			7b	
						· · · ·	,,,	'
						Prior Year		Current Year
Qı	8			e 1h)			9,009	Current Year 42,639
enue	9	Progra	am service revenue (Part VIII, lin	e 2g)			9,009	Current Year 42,639 293,305
Ravenue	9 10	Progra Inves	am service revenue (Part VIII, lin tment income (Part VIII, column (	e 2g)			9,009	Current Year 42,639 293,305
Ravenue	9 10 11	Progra Inves Other	am service revenue (Part VIII, lin tment income (Part VIII, column ( revenue (Part VIII, column (A), li	e 2g)		3	9,009	Current Year 42,639 293,305 0
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Ravenue	9 10 11 12	Progra Inves Other Total 12) Grant	am service revenue (Part VIII, ling tment income (Part VIII, column ( revenue (Part VIII, column (A), li revenue—add lines 8 through 11 ( s and similar amounts paid (Part I	e 2g)	e	3	9,009	Current Year 42,639 293,305 0 0 335,944
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. Yes No

Par	t IV Checklist of Required Schedules			
	<u> </u>		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 2	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
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		No
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	Yes	
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		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts $VIII$ , $VIII$ , $III$ ,			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a		No
	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	<b>11</b> b		No
	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	<b>11</b> c		No
	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		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
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		No
	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a		No
	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	<b>12</b> b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		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	<b>14</b> b		No
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
	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?	<b>20</b> b		

Part

30

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Yes

Form 990 (2015)

	Chaaldiatas	Doguinad	Cahadulaa	(continued)
r TA	Checklist of	Kequirea	Schedules	(continuea)

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

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 $1^7$ 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? <i>If "Yes," complete Schedule J</i>	23	No
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	

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

**b** Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

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

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . .

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV,

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled

an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV . . .

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified

33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . . Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

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

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I . . . . . . . . . . . . .

Par	t V	<b>Statements Regarding Other IRS Filings and Tax Complianc</b> Check if Schedule O contains a response or note to any line in this				
		effect if seffective of contains a response of flote to any fine in this	ruit v	• •	Yes	No
1a	Enter	the number reported in Box 3 of Form 1096 Enter -0 - if not applicable	<b>1a</b>   0			
		the number of Forms W-2G included in line 1a Enter -0- if not applicable	<b>1b</b> 0			
		Lie organization comply with backup withholding rules for reportable payments to	vendors and reportable			
٠		ig (gambling) winnings to prize winners?		1c		
2a	_	the number of employees reported on Form W-3, Transmittal of Wage and				
		tatements, filed for the calendar year ending with or within the year covered	30			
L	•	s return	2a 0	2b		
D		east one is reported on line 2a, and the organization lile all required lederal emp If the sum of lines 1a and 2a is greater than 250, you may be required to e-file				
3a	Did th	e organization have unrelated business gross income of \$1,000 or more during	the year?	За		No
b	If "Ye	s," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanatio</i>	on in Schedule O	3b		
4a	Atany	y time during the calendar year, did the organization have an interest in, or a si	gnature or other authority			
		a financial account in a foreign country (such as a bank account, securities acc	count, or other financial	4a		
	accou	int)?	•	<del>-1</del> a		No
Ь		s," enter the name of the foreign country				
	(FBAF	nstructions for filing requirements for FinCEN Form 114, Report of Foreign Bank	and Financial Accounts			
5a	•	·' he organization a party to a prohibited tax shelter transaction at any time durir	on the tax year?	5a		No
		ny taxable party notify the organization that it was or is a party to a prohibited t	· '			No
			ax shereer cransaction	5b		110
С	IT "Ye	s," 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 \$10	00,000, and did the	<b>6</b> a		No
	organ	ization solicit any contributions that were not tax deductible as charitable cont	ributions?			
b		s," did the organization include with every solicitation an express statement th	at such contributions or gifts	<b>6</b> b		
7		not tax deductible?		UD		
	_	ne organization receive a payment in excess of \$75 made partly as a contributi	on and partly for goods and	7a		
•		es provided to the payor?	. , -	, u		
b	If"Ye	s," did the organization notify the donor of the value of the goods or services p	rovided?	<b>7</b> b		
c		e organization sell, exchange, or otherwise dispose of tangible personal proper	ty for which it was required to	<b>.</b> .		
		rrm 8282?	7d	7c		
u	11 16	s, indicate the number of Forms 6262 filed during the year	7 <b>u</b>			
e	Did th	e organization receive any funds, directly or indirectly, to pay premiums on a p	ersonal benefit contract?	_		
	5 111			7e		
		ie organization, during the year, pay premiums, directly or indirectly, on a perso	ŀ	7f		
g	requir	organization received a contribution of qualified intellectual property, did the ored?	rganization file Form 8899 as	7g		
h	Ifthe	organization received a contribution of cars, boats, airplanes, or other vehicles	, did the organization file a			
		1098-C?		7h		
8	•	oring organizations maintaining donor advised funds.  donor advised fund maintained by the sponsoring organization have excess but	siness holdings at any time			
		the year?	· · · · · · ·	8		
9a	Did th	e sponsoring organization make any taxable distributions under section 4966	,	9a		
		e sponsoring organization make a distribution to a donor, donor advisor, or rela	ł	9b		
10		on <b>501(c)(7) organizations.</b> Enter	· ·			
а	Initiat	tion fees and capital contributions included on Part VIII, line 12	10a			
b		receipts, included on Form 990, Part VIII, line 12, for public use of club	10b			
	facılıt					
		on 501(c)(12) organizations. Enter	44-			
		Income from members or shareholders	11a			
D		Income from other sources (Do not net amounts due or paid to other sources st amounts due or received from them )	11b			
13-	-	·	un hou of Form 10412	13-		
		on <b>4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 s," enter the amount of tax-exempt interest received or accrued during the	m neu or Form 10417	12a		
U	year	5, enter the amount of tax-exempt interest received of accrued during the	12b			
13	Section	on 501(c)(29) qualified nonprofit health insurance issuers.				
а		organization licensed to issue qualified health plans in more than one state? <b>N</b> Onal information the organization must report on Schedule O	ote. See the instructions for	13a		
ь		the amount of reserves the organization is required to maintain by the states		-		
	ın whi	ch the organization is licensed to issue qualified health plans	13b			
c	Enter	the amount of reserves on hand	13c	ļ		
14a	Did th	e organization receive any payments for indoor tanning services during the tax	year?	14a		No
b	If"Ye	s," has it filed a Form 720 to report these payments? If "No," provide an explana	tion in Schedule O	14b		

orm	990 (2015)			Page
	For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, 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			
Se	ection A. Governing Body and Management		T	
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 20			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 20			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
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	Yes	
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?

Section C. Disclosure

Each committee with authority to act on behalf of the governing body? .

	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	Yes	
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ue Cod	e.)
			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?	<b>10</b> b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
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		No
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
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		
13	Did the organization have a written whistleblower policy?	13		No
14	Did the organization have a written document retention and destruction policy?	14		No
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?			
а	The organization's CEO, Executive Director, or top management official	15a		No
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			

Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the

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)

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a

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? . . . . . . . . .

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

Νo

8a

8b

16a

16b

Yes

Yes

#### 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

(A) Name and Title	(B) A verage hours per week (list any hours for related	Average Position (do not check more than one box, unless perk (list person is both an officer and a director/trustee)							(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	MISC)	organization and related organizations
1) Carolyn Bohach	2			X				0	0	
President	0									
(2) Lucia A Pirisi-Creek Freasurer	4 0			х				0	0	
3) Lawerence Comett Secretary	1 0			x				0	0	
(4) Douglas Wnght President Elect and Head Organizer, NISBRE	5			х				0	0	
					_					

<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours for related	more t perso and a	tion ( han d n is l	one l both	oox, an d /trus	officer stee)		(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
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officei	key employee	Highest compensated emptoviee	Former	_, ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	related organizations
1b Sub-Total						<b>•</b>				
c Total from continuation sheet		ection A	٠.			. ▶				
d Total (add lines 1b and 1c) .						<b>▶</b>		0	0	0

**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  $\triangleright 0$ 

services rendered to the organization? If "Yes," complete Schedule J for such person . . .

## **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
	Food and beverage services for NISBRE meeting	201,993

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 ▶ 1 Nο

5

Form 99 <b>Part V</b>		Statement of	f Revenue					Page <b>S</b>
			le O contains a respons		e 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
nts nts	1a	Federated camp	paigns 1a					
Contributions, Giffs, Grants and Other Similar Amounts	b	Membership due	es <b>1b</b>	42,639				
. G	С	Fundraising eve	ents <b>1c</b>	0				
sifts Iar ,	d	Related organiz	ations <b>1d</b>	0				
s, ( imil	e	Government grants	(contributions) <b>1e</b>	0				
tion r Si	f		ns, gifts, grants, and 1f	0				
ibut	g	similar amounts not Noncash contribution		0				
ntr d C	_	1a-1f \$			42.620			
Co	h	Total. Add lines	1a-1f	•	42,639			
He	2-	Dogistmtion foos to	the NICRRE	Business Code	202 205	202 205		,
Program Service Revenue	2d	Registration fees to conference	the NISBRE	813920	293,305	293,305	0	, ,
Ω_	b	_						
rwc	C							
፠	d e							
gran	f	A II other progra	m service revenue		0	0	0	0
P		Total Add lines			293,305			
			ome (including dividends					
	_	and other simila	ramounts)	• [	0	0	0	0
	4 5		ment of tax-exempt bond pr		0	0	0	
		Koyaities	(ı) Real	(II) Personal				
	6a	Gross rents	0	0				
	b	Less rental	0	0				
	С	expenses Rental income	0	0				
	d	or (loss) [ Net rental incor	me or (loss)		o	0	0	C
		[	(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other than inventory	0	0				
	b	Less cost or other basis and sales expenses	0	0				
	c d	Gain or (loss)	s)	0	0	0	0	ſ
nne		Gross income frevents (not incl	om fundraising					
Other Revenue		\$ of contributions See Part IV, line	reported on line 1c)	0				
)th	ь	Less direct exp	penses b	0				
0			loss) from fundraising ev	vents ▶	0		0	C
	9a	Gross income fr See Part IV, line	om gaming activities e 19	0				
		•	penses <b>b</b>	0	_		_	_
	С	Net income or (	loss) from gamıng actıvı	ties	0	0	U	(
	10a	Gross sales of I returns and allo		0				
	ь	Less cost of go	oods sold b	0				
	С		loss) from sales of inver	-	0	0	0	C
	11~	Miscellaneous	Revenue	Business Code				
	11a b							
	c							
	d	A II other revenu	le					
	e	Total. Add lines	11a-11d	•	0			
	12	Total revenue.	See Instructions		335,944	293,305	0	,
					555,574	255,505		

# Part IX Statement of Functional Expenses

Section 501(c)(3) and 50	1(c)(4) organizations must	complete all columns. All of	ther organizations must c	complete column (A.)

Check if Schedule O contains a response or note to any line in this Part IX						-		

	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> 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				
	ındıvıduals 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	0	0	0	0
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons	0	0	0	0
7	described in section 4958(c)(3)(B) Other salaries and wages	0	0	0	0
8	Pension plan accruals and contributions (include section 401(k)			0	0
	and 403(b) employer contributions)	0	0	0	0
9	Other employee benefits	0	0	0	0
10	Payroll taxes		0		
11	Fees for services (non-employees)	0	0	0	0
a	Management	12,018	12,018		0
b	Legal	0	12,018	0	0
c	Accounting	0	0	0	0
d	Lobbying	0	0	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)	0	0	0	0
12	Advertising and promotion	0	0	0	0
13	Office expenses				
14	Information technology				
15	Royalties	0	0	0	0
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings	209,548	209,548		
20	Interest	0	0	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	0	0	0	0
23	Insurance	0	0	0	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)				
а					
b					
c					
d					
e	All other expenses				
25	<b>Total functional expenses.</b> Add lines 1 through 24e	221,566	221,566	0	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)				

Form 9		2015)			Page <b>11</b>
Par	t X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			· · · · <u>· · </u>
			<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash-non-interest-bearing	35,333	1	149,711
	2	Savings and temporary cash investments	0	2	0
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	0	4	0
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part		•	<u> </u>
Assets		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	0	9	0
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D			
	b	Less accumulated depreciation	0	<b>10</b> c	
	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	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets See Part IV, line 11	0	15	0
	16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	35,333	16	149,711
	17	Accounts payable and accrued expenses	0	17	0
	18	Grants payable	0	18	0
	19	Deferred revenue	0	19	0
	20	Tax-exempt bond liabilities	0	20	0
<b>'A</b>	21	Escrow or custodial account liability Complete Part IV of Schedule D	0	21	0
lities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
Liabil		persons Complete Part II of Schedule L	0	22	0
Ξ	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24)  Complete Part X of Schedule D			
			0	25	0
	26	Total liabilities. Add lines 17 through 25	0	26	0
Assets or Fund Balances		Organizations that follow SFAS 117 (ASC 958), check here ▶			
lan I	27	Unrestricted net assets	35,333	27	149,711
æ	28	Temporarily restricted net assets	0	28	0
2	29	Permanently restricted net assets	0	29	0
F		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and			
ō		complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
1881	31	Paid-in or capital surplus, or land, building or equipment fund		31	
Y Y	32	Retained earnings, endowment, accumulated income, or other funds		32	

33

34

Total net assets or fund balances

Total liabilities and net assets/fund balances

149,711

149,711

35,333

35,333

33

34

	7			0
8	Prior period adjustments			0
9	Other changes in net assets or fund balances (explain in Schedule O)			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))  10			
Par	t XIII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			<u>. Г</u>
			Yes	No
1 2a	Accounting method used to prepare the Form 990	2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed or a separate basis, consolidated basis, or both			110
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b		No
	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?	<b>2</b> c		

If the organization changed either its oversight process or selection process during the tax year, explain in

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

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

Schedule O

Single Audit Act and OMB Circular A-133?

Form 990 (2015)

Νo

3a

3b

TY 2015 Reasonable Cause Explanation

Name: NATIONAL ASSOCIATION OF IDEA PRINCIPAL INVESTIGATORS

**Software ID:** 15000352

**EIN:** 27-1040652

**Software Version:** v1.00

**Explanation:** This delay is entirely my mistake, and I assume full responsibility

for it: the organization had selected the current fiscal year at its inception. However, in recent years, under an operational point of

view, the organization has operated more and more on a calendar

basis, rather than based on the official fiscal year. This was not a

problem when our revenues were way below \$50,000/year, and we filed the form 990N (ePostcard) each year. However, this year we both saw a sudden increase in our revenue and for the first time

we had to file the form 990. When I realized I had made a mistake, it was already quite late, and the fact that I am inexperienced with these filings added to the delay. Moving forward, the

organization and I have taken the following steps: 1) we are

DLN: 93493046034537

securing the services of a certified accountant who will take care of all the filings, moving forward, and assist with the management of the organization; 2) we will request a change in the fiscal year, to reflect more closely the way the organization works; 3) I will rotate off soon as the organization's treasurer, and the new treasurer will have the support of experienced fiscal managers from the start. I apologize! Lucia Pirisi-Creek

efile GRAPHIC p	rint -	DO NOT	PROCESS	As Filed	Data

DLN: 93493046034537 OMB No 1545-0047

**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.

Open to Public

Inspection

27-1040652

Employer identification number

Schedule A (Form 990 or 990-EZ) 2015

Department of the Treasury Internal Revenue Service Name of the organization

NATIONAL ASSOCIATION OF IDEA PRINCIPAL INVESTIGATORS

hospital's name, city, and state

SCHEDULE A

(Form 990 or

990EZ)

Part I

1

2 3

Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at

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

A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii).(Attach Schedule E (Form 990 or 990-EZ))

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

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

www.irs.gov/form990.

A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section

**170(b)(1)(A)(iv).** (Complete Part II ) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 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 Seesection 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g 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. 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. 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. 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. 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 Provide the following information about the supported organization(s) (i) (ii)EIN (iii) (iv) (v) (vi) Name of supported organization Type of Is the organization A mount of A mount of other listed in your governing organization monetary support support (see document? (described on lines (see instructions) instructions) 1-9 above (see instructions)) Yes No Total Cat No 11285F For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990EZ.

Schedule A (Form 990 or 990-EZ) 2015 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (a)2011 **(b)**2012 (c)2013 (d)2014 (e)2015 (f)Total (or fiscal year beginning in) ▶ 1 Gifts, grants, contributions, and 42,639 membership fees received (Do 42,639 not include any unusual grants ) 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 0 0 42,639 42,639 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly 39

6	supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)  Public support. Subtract line 5						42,639
_	from line 4						
	Calendar year fiscal year beginning in)	(a)2011	<b>(b)</b> 2012	(c)2013	<b>(d)</b> 2014	<b>(e)</b> 2015	<b>(f)</b> Total
7	A mounts from line 4	0	0	0	0	42,639	42,639
9	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or						0
10	not the business is regularly carried on Other income Do not include						0
	gain or loss from the sale of capital assets (Explain in Part VI)						0
11	<b>Total support.</b> Add lines 7 through 10						42,639
12	Gross receipts from related activiti	es, etc (see inst	tructions)			12	
13	First five years.If the Form 990 is f	or the organizati	on's first, second,	, thırd, fourth, or fı	ifth tax year as a	section 501(c)(3	) organization,

check this box and stop here . . . . Section C. Computation of Public Support Percentage Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) 14 100 % Public support percentage for 2014 Schedule A, Part II, line 14 15 100 % 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 ▶□

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

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

Section A. Public Support Calendar year

#### 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.)

/ · 5	Calendar year	(a)2011	<b>(b)</b> 2012	<b>(c)</b> 2013	<b>(d)</b> 2014	<b>(e)</b> 20	15	<b>(f)</b> Total			
(or t	iscal year beginning in) ► Gifts, grants, contributions, and						-				
•	membership fees received (Do	1,282	1,500	1,600	39,008		42,639	86,029			
	not include any "unusual grants")	,	,	,	· ·		·	,			
2	Gross receipts from admissions,										
	merchandise sold or services										
	performed, or facilities furnished	О	0	0	О		293,305	293,305			
	in any activity that is related to						·				
	the organization's tax-exempt										
3	purpose Gross receipts from activities										
,	that are not an unrelated trade or	О	0	0	О		О	0			
	business under section 513										
4	Tax revenues levied for the										
	organization's benefit and either	0	0	0	0		0	0			
	paid to or expended on its behalf						$\longrightarrow$				
5	The value of services or facilities		0	0				0			
	furnished by a governmental unit	0	U	0	0		0	0			
6	to the organization without charge <b>Total.</b> Add lines 1 through 5	1,282	1,500	1,600	39,008		335,944	379,334			
	Amounts included on lines 1, 2,	1,202	1,500	1,000	33,000		333,344	373,334			
/a	and 3 received from disqualified	o	0	0	0		o	0			
	persons		_					_			
b	A mounts included on lines 2 and										
	3 received from other than										
	disqualified persons that exceed	0	0	0	0		0	0			
	the greater of \$5,000 or 1% of										
	the amount on line 13 for the year	0		0			<del></del>				
	Add lines 7a and 7b	0	0	0	0		0				
8	<b>Public support.</b> (Subtract line 7c from line 6)							379,334			
	ction B. Total Support										
	<del></del>	T	I	I			— г				
(or f	Calendar year iscal year beginning in) ▶	<b>(a)</b> 2011	<b>(b)</b> 2012	<b>(c)</b> 2013	<b>(d)</b> 2014	<b>(e)</b> 20	15	<b>(f)</b> Total			
9	A mounts from line 6	1,282	1,500	1,600	39,008		335,944	379,334			
10a	Gross income from interest,	,	,	,	,			<del>,</del>			
	dividends, payments received on	0						0			
	securities loans, rents, royalties	ĭ	ď	ď	o o		ď	U			
	and income from similar sources										
b	Unrelated business taxable										
	income (less section 511 taxes) from businesses acquired after	0	0	0	0		0	0			
	June 30, 1975										
c	Add lines 10a and 10b	0	0	0	0		0	0			
11	Net income from unrelated										
	business activities not included	0			0		0	0			
	ın lıne 10b, whether or not the	· ·	ď	Ü	Ü		۷	U			
	business is regularly carried on						$\longrightarrow$				
12	Other income Do not include										
	gain or loss from the sale of capital assets (Explain in Part	0	0	0	0		0	0			
	VI)										
13	Total support. (Add lines 9, 10c,	4 202	4 500	4 500	20.000		225.044	270 224			
	11, and 12)	1,282	1,500	1,600	39,008		335,944	379,334			
14	First five years. If the Form 990 is f	or the organizatio	n's first, second,	third, fourth, or f	ifth tax year as a	section 5	01(c)(3	) organization,			
	check this box and stop here							▶□			
Se	ction C. Computation of Pub	lic Support Pe	ercentage								
15	Public support percentage for 2015			13. column (f))		15		100 %			
16	Public support percentage from 201			,							
		•	· · · · · · · · · · · · · · · · · · ·			16		100 %			
Se	Section D. Computation of Investment Income Percentage										
17	Investment income percentage for 3	<b>2015</b> (line 10c, co	olumn (f) divided	by line 13, colum	nn (f))	17		0 %			
18	Investment income percentage from	n <b>2014</b> Schedule <i>i</i>	A, Part III, line 1	7		18		0 %			
	<b>33 1/3% support tests—2015.</b> If the				line 15 is more t		3% and				
130	more than 33 1/3%, check this box							• <b>□</b>			
h	33 1/3% support tests—2014.If the										
U	22 1/ 2 70 auppoint rears—2014.11 tile	organización did	HOLCHECK & DUX	on time 14 of time	Toa, and inte 16	13 111016	11011 J J I	, 5 /0 alla IIIIE			

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 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, D, and E If you checked 11d of Part I, complete Sections A, D, and D, and Complete Part V.)

	I, complete Sections A and D, and complete Part V )			
Se	ction 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 <b>Part VI</b> 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 <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2)	2		<u> </u>
	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)?  If "Yes," answer (b) and (c) below	3a		
D	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 <b>Part VI</b> 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?	<b>3</b> c		
	If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use			ı
	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	4b		
	by or in connection with its supported organizations			
С	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	<b>4</b> c		
	organization was used exclusively for section 170(c)(2)(B) purposes			
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		
h	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?	<b>5</b> c		
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 <b>Part VI</b> .	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 <b>Part VI</b> .	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 <b>Part VI</b> .	<b>9</b> b		
С	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 <b>Part VI</b> .	<b>9</b> c		
0a	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)	<b>10</b> b		
1	Has the organization accepted a gift or contribution from any of the following persons?			
а	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		
	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)

Sectio	n B.	Type	I Su	pporting	ı Organiz	ations

S	ection 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 <b>Part VI</b> 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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization	2		
S	ection 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 <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
S	ection D. All Type III Supporting Organizations			
	,, <u> </u>		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 <b>Part VI</b> 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 <b>Part VI</b> the role the organization's supported organizations played in this regard	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations			
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see The organization satisfied the Activities Test Complete line 2 below  The organization is the parent of each of its supported organizations. Complete line 3 below  The organization supported a governmental entity. Describe in Part VI how you supported a government entity instructions.			
2			Yes	No
	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  b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of	2a		
	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

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of

**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

engaged in these activities but for the organization's involvement

3 Parent of Supported Organizations Answer (a) and (b) below.

each of the supported organizations? Provide details in Part VI

2b

3a

3b

Pai	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 ti	rust on	Nov 20, 1970 <b>See inst</b> i	ructions. All other						
	Type III non-functionally integrated supporting organizations must complete S	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								
а	Average monthly value of securities	1a								
b	Average monthly cash balances	<b>1</b> b								
c	Fair market value of other non-exempt-use assets	<b>1</b> c								
d	Total (add lines 1a, 1b, and 1c)	<b>1</b> d								
e	<b>Discount</b> 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	<b>Distributable Amount.</b> 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-instructions)	integrat	ed Type III supporting c	organization (see						

	arter Type III Non-Functionally Integra	ateu 309(a)(3) Suppoi	ting Organizations (co	Jiitiiiueu)
Se	ection D - Distributions			Current Year
1	A mounts paid to supported organizations to accom	plish exempt purposes		
2	2 A mounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exemp	ot purposes of supported orga	anızatıons	
4	A mounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval rec	quired)		
6	Other distributions (describe in Part VI) See instru	uctions		
7	Total annual distributions. Add lines 1 through 6			
	Distributions to attentive supported organizations t details in Part VI) See instructions	to which the organization is re	esponsive (provide	
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 requiredsee instructions)			
3	Excess distributions carryover, if any, to 2015			
a				
b				
C	From 2013			
	From 2014			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2015 distributable amount			
i	Carryover from 2010 not applied (see instructions)			
_	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			
С	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	<b>Excess distributions carryover to 2016.</b> Add lines 3j and 4c			
8	Breakdown of line 7			
<u>a</u>				
b				
c	Excess from 2013			
d	From 2014			
е	From 2015			

#### DLN: 93493046034537

Employer identification number

27-1040652

## SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue

Name of the organization

# **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

<u>www.irs.gov/form990</u>.

2015
Open to Public Inspection

Internal Revenue

Service

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-FZ, Part V, line 46 (Political Campaign Activities)

t the organization answered	'Yes" on For	m 990, Part IV, Line	e 3, or Form 990-E2	., Part V, line 46 (Politic	ai Campaign Activities), the
. C+ F04/-\/0\	- OI-4- D	I A I D D	4 I - 4 - D 4 I O		

- 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

Provide a description of the organization's direct and indirect political campaign activities in Part IV

Section 527 organizations Complete Part I-A only

NATIONAL ASSOCIATION OF IDEA PRINCIPAL INVESTIGATORS

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

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

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

2	Political expenditures			<b>&gt;</b>	\$
3	Volunteer hours				
Par	t I-B Complete if the or	ganization is exempt under	section 501(	c)(3).	
1		e tax incurred by the organization und	ler section 4955	5	\$
2	Enter the amount of any excise	e tax incurred by organization manag	ers under sectio	n 4955 <b>&gt;</b>	\$
3	If the organization incurred a s	section 4955 tax, did it file Form 472	O for this year?		☐ Yes ☐ No
4a	Was a correction made?				⊤ Yes
b	If "Yes," describe in Part IV				
Par	t I-C Complete if the or	ganization is exempt under	section 501(	c), except section 50	1(c)(3).
1	Enter the amount directly expe	ended by the filing organization for se	ction 527 exem	pt function activities 🕨	\$
2	Enter the amount of the filing of exempt function activities	organization's funds contributed to ot	her organization	s for section 527 ▶	\$
3	Total exempt function expendi	itures Add lines 1 and 2 Enter here a	and on Form 112	20-POL, line 17b ►	\$
4	Did the filing organization file <b>F</b>	form 1120-POL for this year?			⊤ Yes
	amount of political contribution	For each organization listed, enter the ns received that were promptly and d political action committee (PAC) If	rectly delivered	to a separate political orga	nızatıon, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter - 0 -
2					
3					
4					
5					
6					
For I	Paperwork Reduction Act Notice, se	ee the instructions for Form 990 or 990	-EZ.	Cat No 50084S Schedule C (	Form 990 or 990-EZ) 2015

reporting section 4911 tax for this year?

Sch	nedule C (Form 990 or 990-EZ) 2015				Page <b>2</b>
Pā	art II-A Complete if the organization i under section 501(h)).	is exempt under section 501(c)(3	) and file	ed Form 5768	(election
١.	Check ► If the filing organization belongs to a expenses, and share of excess lobby		filiated gro	up member's nam	e, address, EIN
3	Check ▶ ☐ If the filing organization checked box	x A and "limited control" provisions apply			
		ing Expenditures ans amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a b	Total lobbying expenditures to influence public op lobbying) Total lobbying expenditures to influence a legisla	(5)			
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 fro	om 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 ever \$1,500,000	\$175,000 plus 10% of the excess ever \$1,000,000			

2000 fing noncaxable amount Enter the amount	te 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
Grassroots nontaxable amount (enter 25% of	line 1f)
Subtract line 1g from line 1a If zero or less, e	enter -0-
Subtract line 1f from line 1c If zero or less, e	nter-0-

⊤ Y e s

If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720

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 (a)2012 **(b)**2013 (c)2014 (d)2015 (e) Total beginning in) Lobbying nontaxable amount 2a Lobbying ceiling amount (150% of line 2a, column(e)) c Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of line 2d, column (e)) Grassroots lobbying expenditures

	edule C (Form 990 or 990-EZ) 2015				Ρā	age <b>3</b>
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has N filed Form 5768 (election under section 501(h)).	TO				
		(	a)		(b)	
or e ctiv	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying vity		No		A moun	t
	During the year, did the filing organization attempt to influence foreign, national, state or local	Yes		7		
1	legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?			_		
b c	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  Media advertisements?			-		
d	Mailings to members, legislators, or the public?					
e	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912			1		
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?					
Pai	t III-A Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6).	<b>01</b> (c	)(5),	or s	ectio	n
			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		Νo
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		Νo
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		Νo
Pai	t III-B Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1			42	2,639
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).					_
а	Current year	2a				0
Ь	Carryover from last year	2b				0
С _	Total	2c				0
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				0
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				0
5	Taxable amount of lobbying and political expenditures (see instructions)	5				0
	art IV Sunniemental Information					

Return Reference

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

Explanation

As Filed Data efile GRAPHIC print - DO NOT PROCESS SCHEDULE O (Form 990 or

990-EZ)

Treasurv

Service

Department of the

Internal Revenue

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

DLN: 93493046034537

Name of the organization NATIONAL ASSOCIATION OF IDEA PRINCIPAL INVESTIGATORS	Employer identification number
	27-1040652

Return Reference	Explanation
Form 990, Part III, Line 2	During the year 2015-16, NAIPI maintained the NAIPI wiebsite and outcomes database, organized monthly teleconferences of the Executive Committee, and the annual meeting of the membership, and of the National Committee, coordinated communication across all the IDeA programs in 23 states and Puerto Rico, and substantially contributed to the organization of the National IDeA Symposium of Biomedical Research Excellence (NISBRE), held in Washington, DC, June 26-29, 2016, by serving as the agent that collected registration fees for this symposium and covered many of the Symposium expenses, including the cost of food The NISBRE is held every two years to bring together scientists (faculty, students, program leaders, technical staff, core facilities directors) from the IDeA states who participate in/contribute to IDeA funded programs. The symposium includes scientific presentations by faculty and students, in both oral and poster sessions, technical and career-development workshops open to all participants, on topics ranging from genomics to time management and mentoring, to grant writing, the NISBRE also includes a series of meetings of the technical personnel and directors of core facilities, who share best practices and management practices. Symposium activities start early in the morning, with a 7-00 am sunrise session organized during breakfast, and dedicated to mentoring, and continue through lunch with poster sessions and specific activities. Hence, the need to cover food for all participants, as it would have been very inefficient (and also unsafe, given the number of students in attendance) to send everyone out of the symposium venue to get lunch. Hence, by managing registrations and taking care of food costs, NAIPI contributed to the Symposium organization in a very substantial way

Return Reference	Explanation
Form 990, Part III, Line 3	NAIPI has gradually grown its activities, to finally directly participate, in 2016, in the organization of the National IDeA Symposium of Biomedical Research Excellence (NISBRE) NISBRE is the main symposium of the IDeA program, it brings together, in Washington DC, in June, every two years, scientists and students from all IDeA-funded grants for three days of scientific presentations, scientific and career development workshops, and technical workshops for and by biomedical service providers in specialized fields such as Genomics, Bioinformatics, as well as Core Facilities Managers. NAIPI collected and managed registration fees for the NISBRE NAIPI utilized these funds to cover some of the symposium expenses, therefore supporting the organizers in their overall effort to produce an excellent symposium. NAIPI will continue to work with NISBRE organizers in the future, to progressively increase its responsibility for the organization of this meeting which is vital to the IDeA program. This is the reason for the sudden increase in NAIPI revenue that made it necessary for us to file the form 990 for this fiscal year, while in the past NAIPI's revenues had never reached the \$50,000 limit and we had filed the form 990 necessary.

Return Reference	Explanation
Form 990, Part VI, Section A, Line 6	The National Association of IDeA Principal Investigators includes as members all principal investigators of IDeA funded programs. IDeA stands for "Institutional Development Aw ards", a program within the National Institute of General Medical Sciences (NIGMS), National Institutes of Health, that funds center grants and individual, investigator-initiated research grants in 23 states and Puerto Rico. Members support the organization by the payment of membership fees, which are obtained by program and not by individual, each IDeA program (INBRE, COBRE or CTR) contributes \$400 annually to NAIP to cover membership fees for all eligible members within that program. These membership fees are not derived from federal grants.

Return Reference Explanation	
Form 990, Part VI,	All NAIP members are invited to participate in NAIP activities and elect their representatives to the National Committee
Section A, Line 7a	w hich includes 20 members, 5 from each of the IDeA regions (Northeast, Southeast, Central and Western)

Return Reference	Explanation
Form 990, Part VI,	All major decisions concerning the organization are proposed by the 5-member Executive Committee (elected by the
Section A, Line 7b	National Committee) These decisions are review ed and approved by the National Committee and ratified by the
	membership at large through electronic voting

Return Reference	Explanation
Form 990, Part VI, Section A, Line 9	Carolyn Bohach, Ph D, President Program Director, Idaho INBRE, University of Idaho, University of Idaho, School of Food Science, Mines 317, 875 Perimeter Drive MS 3025, Moscow, ID 83844-3025 Law rence E Cornett, Ph D Vice Chancellor for Research, University of Arkansas for Medical Sciences, 4301 West Markham Street, Slot 718,Little Rock, Arkansas 72205 Doug Wright, Ph D, President Elect University of Kansas Medical Center, Mailstop 3051, 2059A Hemenway 3901 Rainbow Blvd, Kansas City, KS 66160

Return Reference	Explanation
Section B, Line 11b	This form 990 w as not distributed before filing, how ever both the President and President ⊟ect have access to the books, which are kept electronically, and financial reports are given by the Treasurer at least every six months. Given the urgency of this filing, this completed form 990 will be shared with the Executive Committee and the National Committee after it is filed.

Return Reference	Explanation
Form 990, Part VI,	This is the first year in which NAIPI has accrued substantial resources (over \$50,000) and therefore the financial
,	records of the organization may be of interest to anyone. This form 990, once completed, will be made available to interested parties upon request, to be directed to the Treasurer or the President.