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Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2018

Open to Public Inspection

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

Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

A For the 2019 calendar year, or tax year beginning 01-01-2018 , and ending 12-31-2018

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Final return/terminated

☐ Amended return

☐ Application pending

C Name of organization

STOWERS RESOURCE MANAGEMENT INC

% J SCOTT PETTET

Doing business as

Number and street (or P O box if mail is not delivered to street address)

1000 EAST 50TH STREET

Room/suite

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

KANSAS CITY, MO 64110

F Name and address of principal officer

RICHARD W BROWN

1000 EAST 50TH STREET

KANSAS CITY, MO 64110

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 STOWERS ORG

K Form of organization

☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation

2005

M State of legal domicile

DE

G Gross receipts \$

594,143,593

Part I

Summary

Activities & Governance

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

SRM SUPPORTS THE ACTIVITIES OF STOWERS INSTITUTE FOR MEDICAL RESEARCH ("SIMR") WHICH CONDUCTS BASIC CELL AND MOLECULAR BIOLOGY RESEARCH

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)

15

4 Number of independent voting members of the governing body (Part VI, line 1b)

10

5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)

151

6 Total number of volunteers (estimate if necessary)

10

7a Total unrelated business revenue from Part VIII, column (C), line 12

0

7b Net unrelated business taxable income from Form 990-T, line 34

56,827

Revenue

8 Contributions and grants (Part VIII, line 1h)

1,307,818

9 Program service revenue (Part VIII, line 2g)

25,227,551

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

111,167,503

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

47,614

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)

137,750,486

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)

95,000,000

14 Benefits paid to or for members (Part IX, column (A), line 4)

0

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)

18,959,502

16a Professional fundraising fees (Part IX, column (A), line 11e)

0

b Total fundraising expenses (Part IX, column (D), line 25) ▶

378,737

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)

19,400,171

18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)

133,359,673

19 Revenue less expenses Subtract line 18 from line 12

4,390,813

Net Assets or Fund Balances

20 Total assets (Part X, line 16)

2,024,327,697

21 Total liabilities (Part X, line 26)

391,896,353

22 Net assets or fund balances Subtract line 21 from line 20

1,632,431,344

Beginning of Current Year

End of Year

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

2019-08-14

Date

RICHARD W BROWN PRESIDENT

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name

Preparer's signature

Date

Check ☐ if self-employed

PTIN P00755304

Firm's name ▶ PricewaterhouseCoopers LLP

Firm's EIN ▶

Firm's address ▶ 600 13TH ST NW SUITE 1000

WASHINGTON, DC 20005

Phone no (202) 414-1000

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2018)

Part III Statement of Program Service AccomplishmentsCheck 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 \$ 110,000,000 including grants of \$ 110,000,000) (Revenue \$ 311,213)
See Additional Data

4b (Code) (Expenses \$ 27,207,565 including grants of \$) (Revenue \$ 27,207,565)
See Additional Data

4c (Code) (Expenses \$ 6,878,827 including grants of \$) (Revenue \$ 3,803)
See Additional Data

4d Other program services (Describe in Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ► 144,086,392

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	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	No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10 Yes	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b Yes	
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	No
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	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
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	
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 Yes	
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

Part IV Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck 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 72	
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	151			
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		
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N				15	Yes	
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O				16		No

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		
1b	Enter the number of voting members included in line 1a, above, who are independent		
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?	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?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?	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?	Yes	
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	Yes	
b	Each committee with authority to act on behalf of the governing body?	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.		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?		No
10b	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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	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.	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	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.	Yes	
13	Did the organization have a written whistleblower policy?	Yes	
14	Did the organization have a written document retention and destruction policy?	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.	Yes	
b	Other officers or key employees of the organization.	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?		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

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

18 Section 6104 requires an organization to make its Form 1023 (or 1024-A 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.
 J SCOTT PETTET 1000 EAST 50TH STREET KANSAS CITY, MO 64110 (816) 926-4000

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 (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) VIRGINIA G STOWERS DIRECTOR	2 0 2 0	X						0	0	0
(2) JAMES E STOWERS III DIRECTOR	2 0 0 0	X						0	0	0
(3) CLIFFORD W ILLIG DIRECTOR	2 0 2 0	X						0	0	0
(4) ROBERT E PETERSON DIRECTOR	2 0 0 0	X						0	0	0
(5) GINA KAISER DIRECTOR	2 0 0 0	X						0	0	0
(6) WILLIAM B NEAVES DIRECTOR (THROUGH 3/31/2018)	2 0 24 0	X						0	129,953	16,246
(7) ROBERT E KRUMLAUF DIRECTOR	2 0 42 0	X						0	548,762	66,943
(8) DAVID M CHAO DIRECTOR	2 0 42 0	X						0	1,373,501	42,696
(9) RICHARD W BROWN DIRECTOR/CHAIR/PRESIDENT/CEO	40 0 8 0	X		X				2,424,700	0	59,649
(10) RODERICK L STURGEON DIRECTOR/EVP/CFO	40 0 10 0	X		X				1,627,350	0	62,371
(11) DAVID A WELTE DIRECTOR/EVP/GENERAL COUNSEL	40 0 10 0	X		X				1,383,256	0	67,985
(12) ALBERZINE FREEMAN DIRECTOR	2 0 4 0	X		X				0	0	0
(13) CICI ROJAS DIRECTOR	2 0 0 0	X						0	0	0
(14) MAURICE WATSON DIRECTOR	2 0 0 0	X						0	0	0
(15) JULIE WILSON DIRECTOR	2 0 0 0	X						0	0	0
(16) JONATHAN THOMAS DIRECTOR	2 0 4 0	X						0	0	0
(17) GEORGE SATTERLEE EVP OF ADMINISTRATION	40 0 2 0			X				308,407	0	59,907

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) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) TIMOTHY J GEARY HEAD OF OPERATIONS & SERVICES	40 0 0 0					X		240,083	0	62,660
(19) J SCOTT PETTET CORPORATE CONTROLLER	40 0 0 0					X		222,623	0	59,331
(20) MICHAEL NEWHOUSE HEAD OF INFORMATION MANAGEMENT	40 0 0 0					X		212,570	0	56,630
(21) JESSICA WITT DIRECTOR OF IT APP & DVLPMT	40 0 0 0					X		174,259	0	54,245
(22) TONYEA INGLIS HEAD OF RESEARCH REG & EH&S	40 0 0 0					X		170,632	0	51,164

1b Sub-Total	▶			
c Total from continuation sheets to Part VII, Section A	▶			
d Total (add lines 1b and 1c)	▶	6,763,880	2,052,216	659,827

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 ▶ **23**

	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		No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	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		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
BRYAN CAVE LEIGHTON PAISNE LLP, PO BOX 503089 ST LOUIS, MO 631503089	LEGAL SERVICES	432,318
AMERICAN CENTURY INVESTMENTS, 4500 MAIN STREET KANSAS CITY, MO 64111	INDIRECT - SEE SCH 0	768,094
PRICEWATERHOUSECOOPERS LLP, PO BOX 75647 CHICAGO, IL 60675	AUDIT AND TAX SRVCS	191,200
ALEXANDER DEAN, 1268 BANNER CIRCLE ERIE, CO 80516	SOFTWARE DEVEL SRVCS	162,090
KARY SOFTWARE LLC, 2670 SOUTHEAST EVENINGTIDE WAY TOPEKA, KS 66605	SOFTWARE DEVEL SRVCS	109,400

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

Part VIII Statement of Revenue

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

Contributions, Gifts, Grants
and Other Similar Amounts

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
1a Federated campaigns	1a				
b Membership dues	1b				
c Fundraising events	1c				
d Related organizations	1d				
e Government grants (contributions)	1e				
f All other contributions, gifts, grants, and similar amounts not included above	1f	1,447,790			
g Noncash contributions included in lines 1a - 1f \$		0			
h Total. Add lines 1a-1f		1,447,790			

Program Service Revenue

	Business Code				
2a REIMB FROM SIMR 501(C)(3)	900099	27,207,565	27,207,565		
b REIMB FROM BVD, RELATED ORG	900099	311,213	311,213		
c					
d					
e					
f All other program service revenue					
9 Total. Add lines 2a-2f		27,518,778			

Other Revenue

3 Investment income (including dividends, interest, and other similar amounts)		115,357,514			115,357,514
4 Income from investment of tax-exempt bond proceeds		0			
5 Royalties		0			
6a Gross rents	(i) Real 43,958	(ii) Personal			
b Less rental expenses					
c Rental income or (loss)	43,958	0			
d Net rental income or (loss)		43,958			43,958
7a Gross amount from sales of assets other than inventory	(i) Securities 449,470,677	(ii) Other 301,073			
b Less cost or other basis and sales expenses	454,897,700	261,995			
c Gain or (loss)	-5,427,023	39,078			
d Net gain or (loss)		-5,387,945			-5,387,945
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18	a 0				
b Less direct expenses	b 0				
c Net income or (loss) from fundraising events		0			
9a Gross income from gaming activities See Part IV, line 19	a 0				
b Less direct expenses	b 0				
c Net income or (loss) from gaming activities		0			
10a Gross sales of inventory, less returns and allowances	a 0				
b Less cost of goods sold	b 0				
c Net income or (loss) from sales of inventory		0			
Miscellaneous Revenue	Business Code				
11a MISSOURI TIMELY FILING DISCOUNT	900099	3,803	3,803		
b					
c					
d All other revenue					
e Total. Add lines 11a-11d		3,803			
12 Total revenue. See Instructions		138,983,898	27,522,581		110,013,527

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.	110,000,000	110,000,000		
2 Grants and other assistance to domestic individuals. See Part IV, line 22.	0			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	0			
4 Benefits paid to or for members.	0			
5 Compensation of current officers, directors, trustees, and key employees.	5,993,624	5,394,262	539,426	59,936
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	0			
7 Other salaries and wages.	9,559,948	8,603,953	860,395	95,600
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	1,499,731	1,349,758	134,976	14,997
9 Other employee benefits.	1,991,364	1,792,228	179,223	19,913
10 Payroll taxes.	907,549	816,795	81,679	9,075
11 Fees for services (non-employees):				
a Management.	0			
b Legal.	523,357		523,357	
c Accounting.	209,327		209,327	
d Lobbying.	0			
e Professional fundraising services. See Part IV, line 17.	0			
f Investment management fees.	857,089		857,089	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	1,991,176	1,792,059	179,206	19,911
12 Advertising and promotion.	10,159	9,143	914	102
13 Office expenses.	406,935	366,241	36,624	4,070
14 Information technology.	805,863	725,277	72,528	8,058
15 Royalties.	0			
16 Occupancy.	3,983,189	3,584,870	358,487	39,832
17 Travel.	119,730	107,758	10,776	1,196
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.	0			
19 Conferences, conventions, and meetings.	455,334	409,800	40,980	4,554
20 Interest.	3,713,541	3,342,187	334,219	37,135
21 Payments to affiliates.	0			
22 Depreciation, depletion, and amortization.	1,425,589	1,283,030	128,303	14,256
23 Insurance.	318,504	286,654	28,665	3,185
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 MAINTENANCE EXPENSES	2,799,635	2,519,671	251,967	27,997
b OPERATION SUPPLIES	672,341	605,107	60,511	6,723
c SEC 4960 EXCISE TAX	485,000	436,500	43,650	4,850
d UBIT - PARKING TAX	11,934	10,741	1,074	119
e All other expenses	722,622	650,358	65,036	7,228
25 Total functional expenses. Add lines 1 through 24e.	149,463,541	144,086,392	4,998,412	378,737
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).				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part IX ☐

				(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest-bearing		0	1	0	
	2	Savings and temporary cash investments		854,653	2	838,741	
	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 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		18,750	7	0	
	8	Inventories for sale or use		0	8	0	
	9	Prepaid expenses and deferred charges		2,098,634	9	2,416,977	
	10a	Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D.	10a	12,258,439			
	b	Less: accumulated depreciation	10b	8,034,545	2,878,165	10c	4,223,894
	11	Investments—publicly traded securities		493,036,674	11	486,162,128	
	12	Investments—other securities. See Part IV, line 11		1,519,264,508	12	843,485,753	
	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		6,176,313	15	8,253,611	
16	Total assets. Add lines 1 through 15 (must equal line 34)		2,024,327,697	16	1,345,381,104		
Liabilities	17	Accounts payable and accrued expenses		6,582,434	17	6,986,858	
	18	Grants payable		0	18	0	
	19	Deferred revenue		55,000	19	35,000	
	20	Tax-exempt bond liabilities		290,000,000	20	290,000,000	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		0	21	0	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		0	22	0	
	23	Secured mortgages and notes payable to unrelated third parties		0	23	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		95,258,919	25	90,735,089	
	26	Total liabilities. Add lines 17 through 25		391,896,353	26	387,756,947	
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		1,630,559,146	27	955,882,511	
	28	Temporarily restricted net assets		767,947	28	600,652	
	29	Permanently restricted net assets		1,104,251	29	1,140,994	
	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		1,632,431,344	33	957,624,157		
34	Total liabilities and net assets/fund balances		2,024,327,697	34	1,345,381,104		

Part XI Reconciliation of Net AssetsCheck 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	138,983,898
2	Total expenses (must equal Part IX, column (A), line 25)	2	149,463,541
3	Revenue less expenses Subtract line 2 from line 1	3	-10,479,643
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,632,431,344
5	Net unrealized gains (losses) on investments	5	-671,549,858
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	7,222,314
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	957,624,157

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

- 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?
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?
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?
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?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		No
2b	Yes	
2c	Yes	
3a		No
3b		

Additional Data

Software ID:
Software Version:
EIN: 41-2186719
Name: STOWERS RESOURCE MANAGEMENT INC

Form 990 (2018)

Form 990, Part III, Line 4a:

FINANCIAL SUPPORT - SRM MONITORS THE FINANCIAL NEEDS OF SIMR SO SIMR CAN CONDUCT ITS MEDICAL RESEARCH IN THE PUBLIC INTEREST AND MAKE CONTRIBUTIONS TO SIMR TO SUPPORT THEIR MEDICAL RESEARCH ACTIVITIES THE CONTRIBUTIONS ARE MADE AS DETERMINED BY SRM'S BOARD OF DIRECTORS AFTER REVIEW OF FINANCIAL INFORMATION, BUDGETS, STRATEGIES, AND OTHER RELEVANT INFORMATION IN 2018, SRM PROVIDED \$95,000,000 TO SIMR FOR ENDOWMENT SUPPORT AND \$15,000,000 TO BIOMED VALLEY CORPORATION ("BVC"), A RELATED 501(C)(3) ORGANIZATION, FOR ENDOWMENT SUPPORT

Form 990, Part III, Line 4b:

MANAGEMENT, ADMINISTRATIVE AND OPERATION SUPPORT SERVICES - SRM PROVIDES MANAGEMENT SUPPORT TO SIMR THAT INVOLVES ASSISTING IN PLANNING FOR THE STRATEGIC DIRECTION OF SIMR, OPERATIONAL PLANNING, AND DEVELOPMENT AND IMPLEMENTATION OF STRATEGIC BUSINESS PLANS AND BUDGETS SRM ALSO PROVIDES ADDITIONAL ADMINISTRATIVE AND OPERATION SUPPORT SERVICES TO SIMR THAT INCLUDE HUMAN RESOURCES, ACCOUNTING, INFORMATION TECHNOLOGY, AND OTHER OPERATION SUPPORT ACTIVITIES FOR WHICH SRM ALLOCATED COSTS TO SIMR IN THE AMOUNT OF \$27,207,565 IN 2018 AS REPORTED ON PART VIII STATEMENT OF REVENUE LINE 2A, WITH RELATED INFORMATION ON SCHEDULE O

Form 990, Part III, Line 4c:

MANAGEMENT OF ENDOWMENT - SRM PARTICIPATES IN THE MANAGEMENT OF STOWERS INSTITUTE FOR MEDICAL RESEARCH ("SIMR") TO INSURE SIMR'S FINANCIAL
ABILITY TO CONTINUE ITS RESEARCH EFFORTS IN PERPETUITY

SCHEDULE A

(Form 990 or 990-EZ)

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.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
STOWERS RESOURCE MANAGEMENT INC

Employer identification number
41-2186719

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 12, 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 agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture See instructions Enter the name, city, and state of the college or university _____

10

☐

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

11

☐

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

12

☒

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 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g

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

1

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- 10 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		
(A) STOWERS INSTITUTE FOR MEDICAL RESEARCH	202993509	4	Yes		95,000,000	0
Total	1				95,000,000	0

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

Cat No 11285F

Schedule A (Form 990 or 990-EZ) 2018

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv), 170(b)(1)(A)(vi), and 170(b)(1)(A)(ix)
(Complete only if you checked the box on line 5, 7, 8, or 9 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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant ")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						

Section B. Total Support							
Calendar year (or fiscal year beginning in) ►		(a)2014	(b)2015	(c)2016	(d)2017	(e)2018	(f)Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc (see instructions)					12	
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 2018 (line 6, column (f) divided by line 11, column (f))	14
15	Public support percentage for 2017 Schedule A, Part II, line 14	15
16a	33 1/3% support test—2018. 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—2017. 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—2018. 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—2017. 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 10 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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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 2018 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2018 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2017 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2018. 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—2017. 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 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d 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? <i>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.</i>	1	Yes
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>	2	No
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>	3a	No
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>	3b	
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>	3c	
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>	4a	No
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>	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)? <i>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.</i>	4c	
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>	5a	No
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 (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>	6	No
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>	7	No
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>	8	No
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))? <i>If "Yes," provide detail in Part VI.</i>	9a	No
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>	9b	No
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>	9c	No
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>	10a	No
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>	10b	

Part IV

Supporting Organizations (continued)

	Yes	No
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?		
b A family member of a person described in (a) above?		
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		
11a		No
11b		No
11c		No

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	Yes	
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		No

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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) 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)		
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	Yes	No
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.	Yes	No
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 (explain in Part VI) **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 2018 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-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2018			
a From 2013.			
b From 2014.			
c From 2015.			
d From 2016.			
e From 2017.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2018 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
6 Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
7 Excess distributions carryover to 2019. Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2014.			
b Excess from 2015.			
c Excess from 2016.			
d Excess from 2017.			
e Excess from 2018.			

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

990 Schedule A, Supplemental Information

Return Reference	Explanation
PART I, LINE 12G, COLUMN (VI)	SRM PROVIDES A WIDE-RANGE OF SERVICES AND SUPPORT TO SIMR AS EXPLAINED IN PART III PROGRAM SERVICES, LINES 4B AND 4C

efile GRAPHIC print - DO NOT PROCESS

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SCHEDULE D

(Form 990)

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.

► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

STOWERS RESOURCE MANAGEMENT INC

Employer identification number

41-2186719

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.

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

(a) Donor advised funds

(b) Funds and other accounts

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

2a

Total number of conservation easements

2b

Total acreage restricted by conservation easements

2c

Number of conservation easements on a certified historic structure included in (a)

2d

Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

4

Number of states where property subject to conservation easement is located ►

5

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

☐ Yes

☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting, 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

► \$

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

Cat No 52283D

Schedule D (Form 990) 2018

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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
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" on 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	1,872,198	1,634,217	1,547,034	1,481,952	2,170,576
b Contributions	907,000	858,000	844,000	823,476	29,500
c Net investment earnings, gains, and losses	-117,418	226,508	74,656	-13,778	60,742
d Grants or scholarships					
e Other expenditures for facilities and programs	920,134	846,527	831,473	744,616	778,866
f Administrative expenses					
g End of year balance	1,741,646	1,872,198	1,634,217	1,547,034	1,481,952

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

▶

65.510 %

c

Temporarily restricted endowment

▶

34.490 %

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

(i) unrelated organizations

(ii) related organizations

b

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

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

4

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

Part VI

Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on 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				
b Buildings		53,290	29,365	23,925
c Leasehold improvements				
d Equipment		12,205,149	8,005,180	4,199,969
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				4,223,894

Schedule D (Form 990) 2018

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 _____ (A) AMERICAN CENTURY CLASS A SHS	843,485,753	F
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) ▶	843,485,753	

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
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
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)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) ▶	

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
(1) Federal income taxes	0
ANNUITY DEBT TO AFFILIATE	90,228,155
COMPENSATION EXCISE TAX	485,000
UBIT PAYABLE RELATED TO DISALLOWED PARKING FRINGES	11,934
OTHER LONG TERM LIABILITIES	10,000
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	90,735,089

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
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 41-2186719
Name: STOWERS RESOURCE MANAGEMENT INC

Supplemental Information

Return Reference	Explanation
PART V, LINE 4	THE PERMANENT RESTRICTED ENDOWMENT, INVESTED IN PERPETUITY, PROVIDES A SOURCE OF INCOME TO FUND THE "PRISCILLA WOOD NEAVES ENDOWED CHAIR IN BIOMEDICAL SCIENCE" AT THE STOWERS INSTITUTE THE EARNINGS FROM THE ENDOWMENT WILL BE DISTRIBUTED, ACCORDING TO THE TERMS OF THE RESTRICTED GIFT, TO THE CURRENT HOLDER OF THE CHAIR TO BE USED IN THEIR PURSUIT OF INNOVATIVE RESEARCH THE TEMPORARILY RESTRICTED ENDOWMENT(S) PROVIDE FUNDING FOR CERTAIN SCIENCE AND OTHER ACTIVITIES AT THE STOWERS INSTITUTE ACCORDING TO THE TERMS OF THE GIFT(S)

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	FIN 48 FINANCIAL STATEMENT FOOTNOTE FROM THE CONSOLIDATED STATEMENTS OF STOWERS INSTITUTE FOR MEDICAL RESEARCH (THE INSTITUTE), OF WHICH STOWERS RESOURCE MANAGEMENT, INC IS A SUPPORTING ORGANIZATION, IS AS FOLLOWS THE INSTITUTE RECOGNIZED THE EFFECT OF INCOME TAX POSITION ONLY IF THOSE POSITIONS ARE MORE LIKELY THAN NOT OF BEING SUSTAINED RECOGNIZED INCOME TAX POSITIONS ARE MEASURED AT THE LARGEST AMOUNT THAT IS GREATER THAN 50% LIKELY OF BEING REALIZED

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Schedule I
(Form 990)

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

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Open to Public
Inspection

Department of the
Treasury
Internal Revenue Service

Name of the organization
STOWERS RESOURCE MANAGEMENT INC

Employer identification number
41-2186719

Part IGeneral Information on Grants and Assistance

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

☒ Yes☐ No

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

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) STOWERS INSTITUTE FOR MEDICAL RESEARCH 1000 E 50TH ST KANSAS CITY, MO 64110	20-2993509	501(C)(3)		95,000,000	FMV	FIXED INCOME SECURIT	SEE PART IV
(2) BIOMED VALLEY CORPORATION 1000 E 50TH ST KANSAS CITY, MO 64110	74-3238244	501(C)(3)		15,000,000	FMV	FIXED INCOME SECURIT	SEE PART IV

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table2

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

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

Cat No 50055P

Schedule I (Form 990) 2018

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22
Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2	SRM'S PURPOSE IS TO SUPPORT THE ACTIVITIES OF SIMR, WHICH CONDUCTS BASIC CELL AND MOLECULAR BIOLOGY RESEARCH BESIDES GIVING FINANCIAL SUPPORT TO SIMR, SRM ALSO PROVIDES SUPPORT TO SIMR BY MANAGING SIMR'S ENDOWMENT, PROVIDING MANAGEMENT AND ADMINISTRATIVE SUPPORT, AND OPERATION SUPPORT SERVICES
PART II, LINE (1), COLUMN (H)	FINANCIAL SUPPORT TO ASSIST WITH SUPPORT ORGANIZATION'S SCIENTIFIC DISCOVERIES AND GIFT ANNUITY OBLIGATION
PART II, LINE (2), COLUMN (H)	FINANCIAL SUPPORT TO ASSIST WITH BVC'S EXEMPT PURPOSE TO SUPPORT, BENEFIT, AND CARRY OUT THE PURPOSES OF ITS SUPPORTED ORGANIZATION

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. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.	OMB No 1545-0047
		2018
		Open to Public Inspection

Department of the Treasury Internal Revenue Service	Name of the organization STOWERS RESOURCE MANAGEMENT INC	Employer identification number 41-2186719
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Part I Questions Regarding Compensation		Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed 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 indemnification 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?	4c		No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
Only 501(c)(3), 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?	5b		No
If "Yes," on line 5a or 5b, describe in Part III.			
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?	6b		No
If "Yes," on line 6a or 6b, describe in Part III.			
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.	7		No
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.	8		No
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9		

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.

See Additional Data Table

Schedule J (Form 990) 2018

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
PART I, LINE 1A	SRM HAS A WRITTEN EMPLOYMENT CONTRACT WITH RICHARD W. BROWN, PRESIDENT, WHICH PROVISIONS INCLUDE PAYMENT OF SOCIAL CLUB DUES AND PERSONAL USE OF AUTO. SRM HAS A WRITTEN EMPLOYMENT CONTRACT WITH RODERICK L. STURGEON, EVP/CFO, WHICH PROVISIONS INCLUDE REIMBURSEMENT FOR PERSONAL USE OF AUTO, TERM LIFE INSURANCE, TAX PLANNING AND TAX RETURN FEES, AND FINANCIAL PLANNING SERVICES. SRM HAS A WRITTEN EMPLOYMENT CONTRACT WITH DAVID A. WELTE, EVP/GENERAL COUNSEL, WHICH PROVISIONS INCLUDE REIMBURSEMENT FOR SOCIAL CLUB DUES AND LIFE INSURANCE. ALL TAXABLE BENEFITS ARE TREATED AS COMPENSATION TO THE RECIPIENTS. STURGEON AND WELTE EMPLOYMENT AGREEMENTS ALSO PROVIDE FOR THEM TO RECEIVE TAX GROSS-UP PAYMENTS SUFFICIENT TO COVER THE TAXES ON THE TAXABLE BENEFITS.
PART I, LINE 1B	SRM PROVIDED THE BENEFITS DESCRIBED IN RESPONSE TO LINE 1A PURSUANT TO WRITTEN EMPLOYMENT CONTRACTS THAT WERE APPROVED BY SRM'S GOVERNING BOARD. SEE RESPONSE TO FORM 990, PART VI, SECTION B, LINE 15 FOR ADDITIONAL PROCESSES RELATED TO DETERMINING SALARY AND BENEFITS FOR OFFICERS.

Additional Data

Software ID:**Software Version:**

EIN: 41-2186719

Name: STOWERS RESOURCE MANAGEMENT INC

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				
1ROBERT E KRUMLAUF DIRECTOR	(i)	-----		-----	-----	-----	-----	-----
	(ii)	543,533		5,229	41,250	25,693	615,705	
1DAVID M CHAO DIRECTOR	(i)	-----		-----	-----	-----	-----	-----
	(ii)	1,363,488		10,013	41,250	1,446	1,416,197	
2RICHARD W BROWN DIRECTOR/CHAIR/PRESIDENT/CEO	(i)	2,396,500		28,200	41,250	18,399	2,484,349	
	(ii)	-----		-----	-----	-----	-----	-----
3RODERICK L STURGEON DIRECTOR/EVP/CFO	(i)	1,521,855		105,495	41,250	21,121	1,689,721	
	(ii)	-----		-----	-----	-----	-----	-----
4DAVID A WELTE DIRECTOR/EVP/GENERAL COUNSEL	(i)	1,304,264		78,992	41,250	26,735	1,451,241	
	(ii)	-----		-----	-----	-----	-----	-----
5TIMOTHY J GEARY HEAD OF OPERATIONS & SERVICES	(i)	237,833		2,250	36,427	26,233	302,743	
	(ii)	-----		-----	-----	-----	-----	-----
6J SCOTT PETTET CORPORATE CONTROLLER	(i)	220,554		2,069	33,744	25,587	281,954	
	(ii)	-----		-----	-----	-----	-----	-----
7MICHAEL NEWHOUSE HEAD OF INFORMATION MANAGEMENT	(i)	211,884		686	32,264	24,366	269,200	
	(ii)	-----		-----	-----	-----	-----	-----
8JESSICA WITT DIRECTOR OF IT APP & DVLPMT	(i)	173,923		336	27,022	27,223	228,504	
	(ii)	-----		-----	-----	-----	-----	-----
9GEORGE SATTERLEE EVP OF ADMINISTRATION	(i)	306,085		2,322	41,250	18,657	368,314	
	(ii)	-----		-----	-----	-----	-----	-----
10TONYEA INGLIS HEAD OF RESEARCH REG & EH&S	(i)	170,090		542	26,125	25,039	221,796	
	(ii)	-----		-----	-----	-----	-----	-----

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule K
(Form 990)

Supplemental Information on Tax-Exempt Bonds

► Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
► Attach to Form 990.
► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
STOWERS RESOURCE MANAGEMENT INC

Employer identification number
41-2186719

Part I Bond Issues											
(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A HEALTH & ED FACILITIES AUTHORITY OF MO	43-1178966	60635HS34	03-31-2015	75,000,000	SEE SCHEDULE K, PART VI		X		X		X
B HEALTH & ED FACILITIES AUTHORITY OF MO	43-1178966	60635HS42	03-31-2015	75,000,000	SEE SCHEDULE K, PART VI		X		X		X
C HEALTH & ED FACILITIES AUTHORITY OF MO	43-1178966	60635HS59	03-31-2015	75,000,000	SEE SCHEDULE K, PART VI		X		X		X
D HEALTH & ED FACILITIES AUTHORITY OF MO	43-1178966	60635HS67	03-31-2018	65,000,000	SEE SCHEDULE K, PART VI		X		X		X

Part II		Proceeds							
		A		B		C		D	
1	Amount of bonds retired	0		0		0		0	
2	Amount of bonds legally defeased	0		0		0		0	
3	Total proceeds of issue	0		0		0		0	
4	Gross proceeds in reserve funds	75,000,000		75,000,000		75,000,000		65,000,000	
5	Capitalized interest from proceeds	0		0		0		0	
6	Proceeds in refunding escrows	0		0		0		0	
7	Issuance costs from proceeds	0		0		0		0	
8	Credit enhancement from proceeds	0		0		0		0	
9	Working capital expenditures from proceeds	0		0		0		0	
10	Capital expenditures from proceeds	0		0		0		0	
11	Other spent proceeds	75,000,000		75,000,000		75,000,000		65,000,000	
12	Other unspent proceeds	0		0		0		0	
13	Year of substantial completion	2000		2000		2000		2000	
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?		X		X		X		X
15	Were the bonds issued as part of an advance refunding issue?	X		X		X		X	
16	Has the final allocation of proceeds been made?	X		X		X		X	
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X		X	

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

Part III Private Business Use (Continued)		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?								
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c	Are there any research agreements that may result in private business use of bond-financed property?								
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶	0 %		0 %		0 %		0 %	
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶								
6	Total of lines 4 and 5								
7	Does the bond issue meet the private security or payment test? . . .								
8a	Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?								
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of . .								
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?								

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

Part IV Arbitrage (Continued)

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

Part V Procedures To Undertake Corrective Action

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	X		X		X		X	

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

Return Reference	Explanation
SCHEDULE K	\$290,000,000 BOND ISSUE IN AGGREGATE CONSISTING OF \$75,000,000 OF SERIES 2015A BONDS, \$75,000,000 OF SERIES 2015B BONDS, \$75,000,000 OF SERIES 2015C BONDS, AND \$65,000,000 OF SERIES 2015D BONDS

Return Reference	Explanation
PART I, COLUMN F FOR LINES A, B, C, AND D -	SRM AND STOWERS INSTITUTE FOR MEDICAL RESEARCH ("SIMR") ARE THE TWO MEMBERS OF AN OBLIGATED BOND GROUP FOR THESE TAX-EXEMPT BONDS, SRM IS A SUPPORTING ORGANIZATION OF SIMR AS DESCRIBED IN SRM'S MISSION STATEMENT AND REPORTED ON SCHEDULE R. THE BONDS WERE ISSUED TO REFUND \$215,000,000 OF BONDS ISSUED IN 2000 AND \$75,000,000 OF BONDS ISSUED IN 2002. THE 2000 BOND SERIES WAS ORIGINALLY ISSUED FOR THE PURPOSE OF PURCHASING AN EXISTING MEDICAL CENTER AND SURROUNDING BUILDINGS, STRIPPING THE STRUCTURES TO THEIR INFRASTRUCTURE AND RECONSTRUCTING A STATE OF THE ART MEDICAL RESEARCH FACILITY FOR SIMR. THE 2002 BOND SERIES WAS ORIGINALLY ISSUED FOR THE PURPOSE OF INTERIOR FINISH, FURNISHING, AND EQUIPPING OF THE SHELL FOR THE STRUCTURES BUILT WITH THE EARLIER 2000 BONDS.

Return Reference	Explanation
PART II, LINE 11 -	AGGREGATE 2015ABCD BOND ISSUE OF \$290,000,000 WAS ISSUED TO REFUND \$215,000,000 BOND SERIES ISSUED IN 2000 AND \$75,000,000 BOND SERIES ISSUED IN 2002

Return Reference	Explanation
PART II, LINE 15 -	SAME RESPONSE AS PART II, LINE 11

Return Reference	Explanation
PART IV ARBITRAGE, LINE 2 (B) -	THE BOND PROCEEDS WERE USED TO REFUND AND REDEEM THE REFUNDED BONDS ON THE ISSUE DATE IN ADDITION, THE INSTITUTE REASONABLY EXPECTS THAT THE DEBT SERVICE FUND WILL QUALIFY AS A BONA FIDE DEBT SERVICE FUND IN EVERY BOND YEAR BASED ON THESE EXPECTATIONS AND CERTIFICATIONS, BOND COUNSEL HAS ADVISED THE AUTHORITY AND THE INSTITUTE THAT NO ARBITRAGE REBATE OR YIELD RESTRICTIONS WILL BE REQUIRED FOR THE BONDS

Additional Data

Software ID:
Software Version:
EIN: 41-2186719
Name: STOWERS RESOURCE MANAGEMENT INC

Return Reference	Explanation
SCHEDULE K	\$290,000,000 BOND ISSUE IN AGGREGATE CONSISTING OF \$75,000,000 OF SERIES 2015A BONDS, \$75,000,000 OF SERIES 2015B BONDS, \$75,000,000 OF SERIES 2015C BONDS, AND \$65,000,000 OF SERIES 2015D BONDS
PART I, COLUMN F FOR LINES A, B, C, AND D -	SRM AND STOWERS INSTITUTE FOR MEDICAL RESEARCH ("SIMR") ARE THE TWO MEMBERS OF AN OBLIGATED BOND GROUP FOR THESE TAX-EXEMPT BONDS, SRM IS A SUPPORTING ORGANIZATION OF SIMR AS DESCRIBED IN SRM'S MISSION STATEMENT AND REPORTED ON SCHEDULE R THE BONDS WERE ISSUED TO REFUND \$215,000,000 OF BONDS ISSUED IN 2000 AND \$75,000,000 OF BONDS ISSUED IN 2002 THE 2000 BOND SERIES WAS ORIGINALLY ISSUED FOR THE PURPOSE OF PURCHASING AN EXISTING MEDICAL CENTER AND SURROUNDING BUILDINGS, STRIPPING THE STRUCTURES TO THEIR INFRASTRUCTURE AND RECONSTRUCTING A STATE OF THE ART MEDICAL RESEARCH FACILITY FOR SIMR THE 2002 BOND SERIES WAS ORIGINALLY ISSUED FOR THE PURPOSE OF INTERIOR FINISH, FURNISHING, AND EQUIPPING OF THE SHELL FOR THE STRUCTURES BUILT WITH THE EARLIER 2000 BONDS
PART II, LINE 11 -	AGGREGATE 2015ABCD BOND ISSUE OF \$290,000,000 WAS ISSUED TO REFUND \$215,000,000 BOND SERIES ISSUED IN 2000 AND \$75,000,000 BOND SERIES ISSUED IN 2002
PART II, LINE 15 -	SAME RESPONSE AS PART II, LINE 11
PART IV ARBITRAGE, LINE 2 (B) -	THE BOND PROCEEDS WERE USED TO REFUND AND REDEEM THE REFUNDED BONDS ON THE ISSUE DATE IN ADDITION, THE INSTITUTE REASONABLY EXPECTS THAT THE DEBT SERVICE FUND WILL QUALIFY AS A BONA FIDE DEBT SERVICE FUND IN EVERY BOND YEAR BASED ON THESE EXPECTATIONS AND CERTIFICATIONS, BOND COUNSEL HAS ADVISED THE AUTHORITY AND THE INSTITUTE THAT NO ARBITRAGE REBATE OR YIELD RESTRICTIONS WILL BE REQUIRED FOR THE BONDS

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

STOWERS RESOURCE MANAGEMENT INC

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.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Employer identification number

41-2186719

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART III, LINE 1	THE STOWERS RESOURCE MANAGEMENT INC ("SRM") OPERATES EXCLUSIVELY WITHIN THE MEANING OF CODE SECTIONS 501(C)(3) AND 509(A)(3) SRM'S CHARITABLE PURPOSE IS TO SUPPORT, BENEFIT, AND CARRY OUT THE PURPOSES OF ITS SUPPORTED ORGANIZATION SRM CURRENTLY SUPPORTS STOWERS INSTITUTE FOR MEDICAL RESEARCH ("SIMR") SIMR IS A TAX EXEMPT ORGANIZATION DESCRIBED IN SECTION 501(C)(3), AND PUBLIC CHARITY DESCRIBED IN SECTIONS 509(A)(1) AND 170(B)(1)(A)(III) SIMR IS ACTIVELY ENGAGED IN SCIENTIFIC RESEARCH IN THE PUBLIC INTEREST SRM HELPS MANAGE SIMR'S ENDOWMENT, PROVIDES MANAGEMENT SUPPORT, AND FUNDRAISES FOR THEIR BENEFIT THE MANAGEMENT SUPPORT INVOLVES ASSISTING IN PLANNING FOR THE STRATEGIC DIRECTION OF SIMR, OPERATIONAL PLANNING, DEVELOPMENT, AND IMPLEMENTATION OF STRATEGIC BUSINESS PLANS AND BUDGETS THE CONTRIBUTIONS, GRANTS, AND INCOME FROM SRM'S ENDOWMENT ARE USED TO SUPPORT THE EXEMPT ACTIVITIES OF SIMR

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART VI, LINE 1A	THE BOARD HAS DELEGATED CERTAIN AUTHORITY TO AN EXECUTIVE COMMITTEE WHICH MAY EXERCISE DELEGATED POWERS AND AUTHORITY OF THE BOARD IN THE MANAGEMENT OF THE BUSINESS AND AFFAIRS OF SRM THE MEMBERS OF THE EXECUTIVE COMMITTEE ALL SERVE ON THE BOARD

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART VI, LINE 2	CLIFFORD W ILLIG, JONATHAN THOMAS, WILLIAM B NEAVES, ALBERZINE FREEMAN, DAVID M CHAO, RICHARD W BROWN, RODERICK L STURGEON, AND DAVID A WELTE, ALL DIRECTORS OF SRM, HAVE A BUSINESS RELATIONSHIP RICHARD W BROWN, DAVID A WELTE, GINA KAISER, ALBERZINE FREEMAN, VIRGINIA G STOWERS, JONATHAN THOMAS AND DAVID M CHAO, ALL DIRECTORS OF SRM, HAVE A BUSINESS RELATIONSHIP WILLIAM B NEAVES, ROBERT E KRUMLAUF AND DAVID M CHAO, DIRECTORS OF SRM, HAVE A BUSINESS RELATIONSHIP VIRGINIA G STOWERS AND JAMES E STOWERS III, DIRECTORS OF SRM, HAVE A FAMILY RELATIONSHIP

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART VI, LINES 6 & 7A	SIMR IS SRM'S SOLE MEMBER AND ELECTS SRM'S BOARD OF DIRECTORS

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART VI, LINE 11B	THE DATA AND INFORMATION NECESSARY TO PREPARE SRM'S FORM 990 IS COMPILED BY THE ACCOUNTING DEPARTMENT AND REVIEWED BY OUR TAX ATTORNEY AT BRYAN CAVE LEIGHTON PAISNER, LLP PWC, OUR EXTERNAL TAX PREPARERS, USE THIS INFORMATION TO PREPARE THE FORM 990 THE COMPLETED FORM 990, INCLUDING REQUIRED SCHEDULES, IS REVIEWED BY THE OFFICERS OF SRM BEFORE IT IS FILED WITH THE IRS AFTER THE PREPARATION AND REVIEW PROCESS DETAILED ABOVE, THE FORM 990, INCLUDING REQUIRED SCHEDULES, IS PROVIDED TO EACH VOTING MEMBER OF SRM'S BOARD BEFORE IT IS FILED WITH THE IRS

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART VI, LINE 12C	SRM HAS ADOPTED A "CONFLICTS OF INTEREST AND DIRECTOR INDEPENDENCE POLICY" EACH DIRECTOR, OFFICER, AND OTHER PERSON WHO IS IN A POSITION TO EXERCISE SUBSTANTIAL INFLUENCE OVER DECISIONS OF SRM (EACH, A "COVERED PERSON") ARE REQUIRED TO ANNUALLY COMPLETE AND SIGN A DISCLOSURE STATEMENT THAT IS PART OF THE POLICY ALSO, A COVERED PERSON MUST DISCLOSE THE EXISTENCE OF A POTENTIAL CONFLICT AND ALL MATERIAL FACTS TO THE BOARD OF DIRECTORS OR GOVERNANCE COMMITTEE AS SOON AS THE PERSON HAS KNOWLEDGE THAT A POTENTIAL CONFLICT MIGHT EXIST PER THE POLICY, THE BOARD OF DIRECTORS OR GOVERNANCE COMMITTEE THEN REVIEWS THE DISCLOSURE TO DETERMINE WHETHER A CONFLICT EXISTS AFTER THE COVERED PERSON MAKES THE RELEVANT DISCLOSURE, THEY ARE RECUSED AND MAY NOT PARTICIPATE IN THE DELIBERATIONS AND DECISIONS REGARDING THE TRANSACTION SRM ALSO CONDUCTS PERIODIC AND ADHOC REVIEWS OF TRANSACTIONS AND AGREEMENTS TO ENSURE THAT IT DOES NOT ENGAGE IN ACTIVITIES THAT ARE NOT CONSISTENT WITH ITS TAX-EXEMPT PURPOSE

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART VI, LINES 15A & 15B	THE PROCESS FOR DETERMINING THE REASONABLENESS OF THE COMPENSATION FOR SRM'S PRESIDENT, EXECUTIVE VICE-PRESIDENT/CHIEF FINANCIAL OFFICER AND EXECUTIVE VICE-PRESIDENT/GENERAL COUNSEL INCLUDED RETAINING THE SERVICES OF A NATIONALLY KNOWN COMPENSATION CONSULTANT TO PROVIDE DATA AND ANALYSIS TO DETERMINE COMPARABLE SALARY AND BENEFITS FOR SIMILARLY QUALIFIED PERSONS IN COMPARABLE POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS. COMPENSATION FOR ALL POSITIONS WAS DOCUMENTED IN EMPLOYMENT CONTRACTS WHICH WERE APPROVED BY THE GOVERNING BODY AS DOCUMENTED IN THE OFFICIAL MINUTES. THE LAST COMPLETED REVIEW PROCESS FOR ALL LISTED POSITIONS WAS IN 2016. THERE HAVE NOT BEEN ANY CHANGES IN RELEVANT PERSONNEL SUBSEQUENT TO THE LAST REVIEW.

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART VI, SECTION C, LINE 19	STOWERS RESOURCE MANAGEMENT INC 'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART VII, SECTION A, COLUMN B	RICHARD W BROWN, RODERICK L STURGEON, AND DAVID A WELTE, OFFICERS OF SRM, ALSO PERFORM SUPPORT SERVICES FOR ONE OR MORE OF THE RELATED ORGANIZATIONS DISCLOSED IN SCHEDULE R THE SE SERVICES ARE PERFORMED IN THEIR ROLE AS SRM EMPLOYEES AND SRM IS REIMBURSED BY THE RELATED ORGANIZATIONS PART VII, SECTION B SRM RECEIVES INVESTMENT MANAGEMENT SERVICES FROM AMERICAN CENTURY INVESTMENTS (ACI) ACI IS A WHOLLY OWNED SUBSIDIARY OF AMERICAN CENTURY COMPANIES, INC (ACCI) IN SELECTING ACI TO MANAGE ITS LIQUID INVESTMENTS, SRM NOT ONLY SELECTED A HIGH QUALITY MUTUAL FUND COMPANY WITH AN OUTSTANDING TRACK RECORD, BUT ALSO PLACED ITS LIQUID INVESTMENTS IN A COMPANY IN WHICH IT OWNS STOCK AND RECEIVES DIVIDENDS SRM PAYS ACI THE SAME ADMINISTRATIVE FEES FOR THESE SERVICES AS ANY ARMS-LENGTH INVESTORS

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART VIII, LINE 2A	SRM RECEIVED EXPENSE REIMBURSEMENTS FROM SIMR, A 501(C)(3) RELATED ORGANIZATION, IN THE AMOUNT OF \$27,207,565 FOR SUPPORT SERVICES PROVIDED BY SRM

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART VII, LINE 2B	SRM RECEIVED EXPENSE REIMBURSEMENTS FROM BVD, A RELATED PARTY, IN THE AMOUNT OF \$311,213 FOR OR ADMINISTRATIVE SUPPORT SERVICES PROVIDED BY SRM SRM ALLOCATED THE COSTS OF PROVIDING THESE SERVICES TO BVD

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART XI, LINE 9	OTHER CHANGES IN NET ASSETS OR FUND BALANCES EQUITY TRANSFERS FROM RELATED 501(C)(2) ORG (NOTE 1) 2,201,551 UNREALIZED GAIN ON INTEREST RATE SWAP 0 ANNUITY PAYMENT TO SIMR 15,000, 000 ACTUARIAL CHANGE IN ANNUITY OBLIGATION (9,979,237) ----- OTHER CHANGES IN NET A SSETS 7,222,314 NOTE 1 SRM RECEIVED PASS-THROUGH AMOUNTS FROM STOWERS REAL ESTATE HOLDING CORPORATION ("SREHC") SRM IS THE TAX EXEMPT PARENT OF SREHC SREHC IS A TAX EXEMPT ORGAN IZATION UNDER SECTION 501(C)(2) OF THE CODE, AND AS SUCH, SREHC REMITS THEIR NET INCOME AN D MAKES OTHER TRANSFERS TO ITS TAX EXEMPT PARENT, SRM SRM RECEIVED \$2,201,551 OF NET INCO ME FROM SREHC

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.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
STOWERS RESOURCE MANAGEMENT INC

Employer identification number
41-2186719

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

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)STOWERS INSTITUTE FOR MEDICAL RESEARCH 1000 EAST 50TH STREET KANSAS CITY, MO 64110 20-3270502	MEDICAL RSRCH	DE	501(C)(3)	4	NA		No
(2)STOWERS REAL ESTATE HOLDING CORPORATION 1000 EAST 50TH STREET KANSAS CITY, MO 64110 26-1472230	TITLE HOLDING	DE	501(C)(2)	N/A	SRM	Yes	
(3)BIOMED VALLEY CORPORATION 1000 EAST 50TH STREET KANSAS CITY, MO 64110 74-3238244	SUPPORT ORG	DE	501(C)(3)	12A-TYPE I	SIMR		No
(4)STOWERS SCIENTIFIC EDUCATION INSTITUTE 1000 EAST 50TH STREET KANSAS CITY, MO 64110 20-5916445	SUPPORT ORG	DE	501(C)(3)	12A-TYPE I	SIMR		No
(5)STOWERS POLICY INSTITUTE INC 1000 EAST 50TH STREET KANSAS CITY, MO 64110 20-3270502	SEE PART VII	DE	501(C)(4)	N/A	SIMR		No
(6)THE GRADUATE SCHOOL OF SIMR 1000 EAST 50TH STREET KANSAS CITY, MO 64110 46-4588696	EDUCATION	MO	501(C)(3)	2	SIMR		No

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No
(1) BIOMED VALLEY DISCOVERIES INC 1000 EAST 50TH STREET KANSAS CITY, MO 64110 06-1646533	SEE PART VII	DE	BVC	C CORP					No

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**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 organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
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 Yes	
c Gift, grant, or capital contribution from related organization(s)	1c	No
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	No
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 Yes	
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 Yes	

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) STOWERS REAL ESTATE HOLDING CORPORATION	S	2,201,551	SEE PART VII

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

[illegible]

Part VII **Supplemental Information**

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

Return Reference	Explanation
PART II, LINE (5), COLUMN (B)	STOWERS POLICY INSTITUTE INC ("SPI") IS AN ADVOCATE FOR A POLITICAL, ECONOMIC, AND SOCIAL ENVIRONMENT THAT ADVANCES AND PROTECTS BIOMEDICAL RESEARCH AND CURES

Return Reference	Explanation
PART IV, LINE (1), COLUMN (B)	BIOMED VALLEY DISCOVERIES INC 'S PRIMARY ACTIVITY IS THE DEVELOPMENT AND MARKETING OF SCIENTIFIC DISCOVERIES BIOMED VALLEY CORPORATION IS THE 100% SHAREHOLDER OF BVD

Return Reference	Explanation
PART V, LINE 2	SRM PROVIDES RESOURCES AND SERVICES TO ITS RELATED ORGANIZATIONS DESCRIBED IN PART II AND PART III AND IS REIMBURSED BY THE RELATED ORGANIZATIONS

Return Reference	Explanation
PART V, LINE 2, (1)(D)	STOWERS REAL ESTATE HOLDING CORPORATION ("SREHC") IS A CONTROLLED ENTITY WITHIN THE MEANING OF 512(B)(13) HOWEVER, SREHC MADE NO SPECIFIED PAYMENTS TO SRM RATHER, SRM RECEIVED PASS-THRU AMOUNTS FROM SREHC SREHC IS A TAX EXEMPT ORGANIZATION UNDER 501(C)(2) OF THE CODE, AND AS SUCH, REMITS ITS NET INCOME AND MAKES OTHER TRANSFERS TO ITS TAX EXEMPT PARENT, SRM SRM RECEIVED \$2,230,551 OF NET INCOME FROM SREHC

