<b>F</b>	<b>. 9</b>	90	<b>Return of Organization Exempt From I</b>	ncome	Tax	ĸ	OMB No. 1545-0047						
For	n <b>V</b> . V. Januar		Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (e)	cept priva	te foui	ndations)	2019						
		of the Treasury	Do not enter social security numbers on this form as it may				Open to Public						
	rnal Reve	enue Service	► Go to www.irs.gov/Form990 for instructions and the lates		ion. 1 Dece		Inspection						
<u>A</u>	For the	, 20 19											
В	Check i	f applicable:	C Name of organization Foundation for Innovative New Diagnostics			D Employ	er identification number						
Ц		s change	Doing business as <b>FIND</b>				980407553						
Ц	Name c		Number and street (or P.O. box if mail is not delivered to street address)	Room/suite			one number						
Ц	Initial re		Chemin des Mines 9			+	41 22 710 27 80						
H		urn/terminated	City or town, state or province, country, and ZIP or foreign postal code			0.0	EC 741 201						
Н		ed return	Geneva 1202, Switzerland F Name and address of principal officer: Catharina Boehme		46.10	G Gross r							
	Applica	tion pending	as above		-		subordinates? ✓ Yes □ No s included? ✓ Yes □ No						
1	Tax-exe	empt status:	√ 501(c)(3) 501(c) ( ) ◀ (insert no.) 4947(a)(1) or 527				. (see instructions)						
J		e: • www.fir				xemption n							
ĸ		organization:			003		f legal domicile: Sw						
_	art I	Summa											
	1		cribe the organization's mission or most significant activities: The d	evelopmer	nt and	impleme	ntation of new, low-						
e		-	ostics for infectious diseases for use in low-resource areas.										
Jan													
/err	2	Check this	25% of i	ts net assets.									
Go	3	Number of	voting members of the governing body (Part VI, line 1a)	3	11								
8	4	Number of	independent voting members of the governing body (Part VI, line 1	b)		4	11						
Activities & Governance	5	Total numb	per of individuals employed in calendar year 2019 (Part V, line 2a)	5	73								
tivi	6		per of volunteers (estimate if necessary)	4									
Ac	7a		ated business revenue from Part VIII, column (C), line 12			7a							
	b	Net unrelat	ed business taxable income from Form 990-T, line 39		• •	7b							
				Pr	ior Yea		Current Year						
ae	8		ons and grants (Part VIII, line 1h)		59,	513,727	55,842,142						
Revenue	9	-	ervice revenue (Part VIII, line 2g)										
Rev	10		income (Part VIII, column (A), lines 3, 4, and 7d)			340,946	314,122						
	11		nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			447,040	585,117						
	12 13		ue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)			301,713	56,741,381						
	13		I similar amounts paid (Part IX, column (A), lines 1–3)		10,4	284,866	19,509,593						
	40		her compensation, employee benefits (Part IX, column (A), lines 5–10)		11	170,091	12,083,872						
Expenses	16a		al fundraising fees (Part IX, column (A), line 11e)		11,	10,031	12,003,072						
neo	b		aising expenses (Part IX, column (D), line 25) ►										
Ă	17		enses (Part IX, column (A), lines 11a–11d, 11f–24e)	Sel 11 Cal Age	31.8	309,520	24,673,017						
	18		nses. Add lines 13–17 (must equal Part IX, column (A), line 25)			564,477	56,266,482						
	19		ess expenses. Subtract line 18 from line 12			737,236	474,899						
or				Beginning			End of Year						
Net Assets or Fund Balances	20	Total asset	s (Part X, line 16)			124,346	50,956,898						
Ass A Ba	21		ties (Part X, line 26)			700,774	45,058,424						
Pund	22		or fund balances. Subtract line 21 from line 20		5,4	423,572	5,898,474						
	art II		re Block										
			I declare that I have examined this return, including accompanying schedules and state. Declaration of preparer (other than officer) is based on all information of which prepare				y knowledge and belief, it is						

Sign Here	Signature of officer <u>LOWSA</u> CHAUSC-R Type or print name and title	TIFINANCE	BECAUSE	ACL THE	Pat	2	abber 2020
Paid Preparer	Print/Type preparer's name	Preparer's signature	1	Date		Check if if self-employed	PTIN
Use Only	Firm's name 🕨	Firm's EIN ►					
Ose only	Firm's address ►		Phone no.				
May the IRS	discuss this return with the preparer s	shown above? (see instruction	ns) .		i i		🗌 Yes 🗌 No
For Daporwo	rk Reduction Act Nation see the congra	to instructions		Cat No. 11090V			Form 000 (2010)

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 11282Y

<ul> <li>If "Yes," describe these new services on Schedule 0.</li> <li>Did the organization cease conducting, or make significant changes in how it conducts, any program services?</li></ul>		0 (2019) Page
<ul> <li>Briefly describe the organization's mission: FIND is an international non-profit organization that enables the development and delivery of much-needed diagnostic tests for poverty-related diseases. FIND acts as a bridge between experts in technology development, policy and clinical care, reducing harriers to innovation and effective implementation of diagnostic solutions in low and-middle-income countries.</li> <li>Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 980-E22</li></ul>	Part	
<ul> <li>FIND is an international non-profit organization that enables the development, and delivery of much-needed dispass. Fill back as a bridge between experts in technology development, policy and clinical care, reducing barriers to innovation and effective implementation of diagnostic solutions in low-and-middle-income countries.</li> <li>Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E2?</li> <li>If "Yes," describe these new services on Schedule O.</li> <li>Did the organization cease conducting, or make significant changes in how it conducts, any program services?</li> <li></li></ul>	-	
<ul> <li>prior Form 990 or 990-E27</li> <li>If "Yes," (describe these on Schedule 0.</li> <li>Old the organization cease conducting, or make significant changes in how it conducts, any program services?.</li> <li>If "Yes," (describe these changes on Schedule 0.</li> <li>Describe the organization's program service accomplishments for each of its three largest program services, as measure expenses. Sciento 501(c)3 and 501(c)40 (organizations are required to proor the amount of grants and allocations to of the total expenses, and revenue, if any, for each program service reported.</li> <li>Code: Access. ) (Expenses 5. 13,780,247 including grants of 5. 1,532,159.) (Revenue \$ 14,329,017)</li> <li>Access. 313,780,247 means 510,427,420 Access 128 Access is not excountines and cross calivexments for 1). TJ Joint Effort for Elimination of TB (JEET) program in India, in pathership with the private sector physician, laboratories and notice achievements for 1). TJ Joint Effort for Elimination of TB (JEET) program in India, in pathership with the private sector. 2015, patient notification jumped by 97% an undification of successful treatment completion rates. In 2015, patient notification jumped by 97% an undification of successful treatment completion rates. In 2015, patient notification jumped by 97% an undification of successful treatment undiracing in knows 19 %0% over the pri-JEET program sector. 2) The TrygaN00 limitative eliminate human African trpanosomiasis (steeping sickness) in endemic countries in Africa, where Uganda became the first count in the program to submit a dosire to WHO ovidencing sleeping sickness.</li> <li>Mor Code: TB (Expenses 19 0NO exercises were carried out in Kenya, India, Central African Republic, and Rwanda. We are now collaborating with program partners to develop a user-friendly open access to for use by countries.</li> <li>Code: TB (Expenses 1 dosire to WHO open access the adving open significant docease to a consumation of the Xper Ultra, as well as fl</li></ul>	1	FIND is an international non-profit organization that enables the development and delivery of much-needed diagnostic tests for poverty-related diseases. FIND acts as a bridge between experts in technology development, policy and clinical care, reducing
<ul> <li>services?</li></ul>	2	prior Form 990 or 990-EZ?
<ul> <li>expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to of the total expenses, and revenue, if any, for each program service reported.</li> <li>4a (Code: Access) (Expenses \$ 13.780.247 including grants of \$ 1.532.158) (Revenue \$ 14.329.017.) Access: 513.780.247 mounts \$10.427.420 Access TB &amp; Access in other countries and cross cutting \$3.352.827 Downstream, or Access, work in 2019 was dominated by three major initiatives, listed here including main achievements for 1) TJ Joint Effort for Elimination of TB (JEET) program in India, in partnership with the private sector physician, laboratories and pharmacies in over 33 districts. It aim to establish linkages to increase identification and notifaction of TB, facilitate early treatme initiation and provide adherence support for improved treatment completion rates. In 2019, patient notification jumped by 67% an notification of successful treatment outcomes by 69% over the pre-JEET period, in the private sector. 2) The TrypaN0 linitative eliminate human African typanosmiasis (sleeping sickness) in endemic countries in Africa, where Uganda became the first court in the program to submit a dossier to WHO evidencing sleeping sickness a elimination (per WHO criteria) from the country in 2019.</li> <li>3) The DNO (diagnostic network optimization) program, which essentially comprises an exercise that uses national and subhatio population and epidemiological data to redesign the diagnostic network set up in order to increase access, maximize impact, generate efficiencies. In 2019 DNO exercises were carried out in Kenya, India. Central African Republic, and Rwanda. We are now collaborating with program partners to develop a user-friendly open access tool for use by countries.</li> <li>4b (Code: TB ) (Expenses \$ 10.181.810 including grants of \$ 4.960.940 ) (Revenue \$ 1.148.126 ) The TB program had mass of their projects in cilicical phase during 2019. The tree revelues a significant were to evaluate: i) a</li></ul>	3	services?
Access - \$13,780,247 (made up of two amounts \$10,427,420 Access TB & Access in other countries and cross cutting \$3,352,827)         Downstream, or Access, work in 2019 was dominated by three major initiatives, listed here including main achievements for 1)         Joint Effort of Elimination of TB (JEET program in India, in partnership with the private sector physician, laboratories and pharmacies in over 93 districts. It aim to establish linkages to increase identification and notifaction of TB, facilitate early treatment initiation and provide adherence support for improved treatment completion rates. In 2019, patient notification jumped by 87% are notification of successful treatment outcomes by 69% over the pro -JEET period, in the private sector. 2) The TrypA010 initiative eliminate human African trpanosomiasis (sleeping sickness) in endemic countries in Africa, where Uganda became the first count in the program to submit a dossier to WHO evidencing sleeping sickness elimination (per WHO criteria) from the country in 2019. 3) The DNO (diagnostic network optimization) program, which essentially comprises an exercise that uses national and subhatio population and epidemiological data to redesign the diagnostic network set up in order to increase access, maximize impact, generate efficiencies. In 2019 DNO exercises were carried out in Kerya, India, Central African Republic, and Rwanda. We are now collaborating with program partners to develop a user-friendly open access tool for use by countries.         4b       (Code: TB ) (Expenses \$ 10,181,810 including grants of \$ 4,960,481 (Revenue \$ 11,481,262 ) The TB program had most of their projects in clinical phase during 2019. The three most significant were to evaluate: 10 a TB stoc for pediatric use, with the study including two most advanced stool processing methods, assessed head-to-head for performanc combination with Xpert Ultra, as well a	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.
<ul> <li>The TB program had most of their projects in clinical phase during 2019. The three most significant were to evaluate: 1) a TB stor for pediatric use, with the study including two most advanced stool processing methods, assessed head-to-head for performanc combination with Xpert Ultra, as well as feasibility and operational characteristics; 2) four centralized TB drug-susceptibility ass with testing in Moldova, Georgia, India and South Africa; 3) an India molecular platform TB and Rif resistant TB with testing in P Ethiopia, Papua New Guinea and India these data were presented to the WHO guideline development group in Dec 2019. Apart from the clinical validation work, one significant molecular assay for multi- and extensive drug resistant TB came out of the R&amp;D phases and into regulatory approval. The largest number of specimens were provided from the FIND Specimen Bank for TB product development in 2019 (more than double than for any other disease). The Specimen Bank houses over 400,000 disease sa to support commercial and academic researchers in the development or evaluation of new and existing diagnostic tools for infect diseases in LMICs.</li> <li>4c (Code: HCV ) (Expenses \$ 8,452,231 including grants of \$ 3,800,449 ) (Revenue \$ 9,275,627 ) FIND has been working to contribute to WHO HCV Elimination targets in four countries, Malaysia, India, Myanmar and Georgia. In 134,580 people receive treatment directly from FIND investment. After the tuberculosis program, the HCV program had had the mext highest number of clinical studies in 2019 that included both product evaluations and implementation research (in routine setting Key studies were for 1) field evaluation of four molecular assays (Georgia, Georgia, Georgia, and Cameroon) using dried blod spra a sampling methodolog; 2) clinical evaluation of HCV core Antigen as a test of cure; and 3) an evaluation of 13 rapid diagnostic withe best performing tests further evaluated on prospectively collected fresh blood specimens in Georgian and Cambodia.</li></ul>	4a	Access - \$13,780,247 (made up of two amounts \$10,427,420 Access TB & Access in other countries and cross cutting \$3,352,827). Downstream, or Access, work in 2019 was dominated by three major initiatives, listed here including main achievements for 1) The Joint Effort for Elimination of TB (JEET) program in India, in partnership with the private sector physician, laboratories and pharmacies in over 93 districts. It aim to establish linkages to increase identification and notifaction of TB, facilitate early treatment initiation and provide adherence support for improved treatment completion rates. In 2019, patient notification jumped by 87% and notification of successful treatment outcomes by 69% over the pre -JEET period, in the private sector. 2) The TrypaN0! initiative to eliminate human African trpanosomiasis (sleeping sickness) in endemic countries in Africa, where Uganda became the first country in the program to submit a dossier to WHO evidencing sleeping sickness elimination (per WHO criteria) from the country in 2019. 3) The DNO (diagnostic network optimization) program, which essentially comprises an exercise that uses national and subnational population and epidemiological data to redesign the diagnostic network set up in order to increase access, maximize impact, generate efficiencies. In 2019 DNO exercises were carried out in Kenya, India, Central African Republic, and Rwanda. We are now
FIND has been working to contribute to WHO HCV Elimination targets in four countries, Malaysia, India, Myanmar and Georgia. In134,580 people were screened with RDTs, which was 81% of the targeted tests and 19,586 people received confirmatory testing a3,489 people receive treatment directly from FIND investment. After the tuberculosis program, the HCV program had had the nexthighest number of clinical studies in 2019 that included both product evaluations and implementation research (in routine settingKey studies were for 1) field evaluation of four molecular assays (Georgia, Greece, Rwanda and Cameroon) using dried blood spia sampling methodolog; 2) clinical evaluation of HCV core Antigen as a test of cure; and 3) an evaluation of 13 rapid diagnostic wthe best performing tests further evaluated on prospectively collected fresh blood specimens in Georgilna and Cambodia. Datafrom FIND studies were used by manufacturers in several submissions to WHO PQ (x5) and for regulatory clearance (x3).In addition, HCV self-testing received WHO recommendation; an HCV diagnostic pathway costing tool was completed andpiloted in several countries; and integration and decentralization was included in Myanmar National Hepatitis Strategic plan.4dOther program services (Describe on Schedule O.)(Expenses \$ 18,652,446 including grants of \$ 9,216,038 ) (Revenue \$ 20,756,272 )	4b	The TB program had most of their projects in clinical phase during 2019. The three most significant were to evaluate: 1) a TB stool kit for pediatric use, with the study including two most advanced stool processing methods, assessed head-to-head for performance in combination with Xpert Ultra, as well as feasibility and operational characteristics; 2) four centralized TB drug-susceptibility assay, with testing in Moldova, Georgia, India and South Africa; 3) an Indian molecular platform TB and Rif resistant TB with testing in Peru, Ethiopia, Papua New Guinea and India these data were presented to the WHO guideline development group in Dec 2019. Apart from the clinical validation work, one significant molecular assay for multi- and extensive drug resistant TB came out of the R&D phases and into regulatory approval. The largest number of specimens were provided from the FIND Specimen Bank for TB product development in 2019 (more than double than for any other disease). The Specimen Bank houses over 400,000 disease sample to support commercial and academic researchers in the development or evaluation of new and existing diagnostic tools for infectious
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	4d	
	4e	(Expenses \$ 18,652,446 including grants of \$ 9,216,038 ) (Revenue \$ 20,756,272 )         Total program service expenses > 51,066,734

Part	V 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	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	√	
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		1
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		1
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		~
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		✓
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		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8		
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? <i>If "Yes," complete Schedule D, Part IV</i> .	9		~
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V.	10		1
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	1	
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		1
С	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		1
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? <i>If "Yes," complete Schedule D, Part IX</i>	11d		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		✓
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)? <i>If "Yes," complete Schedule D, Part X</i>	11f		1
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	1	
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		1
13 14a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13 14a	1	<ul> <li>✓</li> </ul>
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? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	14b	1	
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	1	
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	1	
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		1
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		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19		1
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
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? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	1	

Form 99	90 (2019)		F	Page 4
Part	V Checklist of Required Schedules (continued)			
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	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? If "Yes," complete Schedule J.	23	~	
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		√
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		$\checkmark$
С	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		1
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		✓
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		✓
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		✓
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		✓
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		✓
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):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28a		✓
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		$\checkmark$
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		✓
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	✓	
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		<b>√</b>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		✓
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		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.	33		✓
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		$\checkmark$
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.	35b		✓
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		~
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		~
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O.	38	1	
Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	•••	 Yes	No
1a b c	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		TES	

Form 99				Page 5
Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
<b>2</b> a	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	and a	ALE SA	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		$\checkmark$
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	$\checkmark$	
b	If "Yes," enter the name of the foreign country Switzerland, India, South Africa, Vietnam and Uganda		No. al	
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	12016		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		$\checkmark$
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		$\checkmark$
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		$\checkmark$
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
100	gifts were not tax deductible?	6b	No. of Concession, Name	distant array sources
7	Organizations that may receive deductible contributions under section 170(c).		N. S.	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	392.57	N.R.T.	-
	and services provided to the payor?	7a		$\checkmark$
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		1
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	-		
	required to file Form 8282?	7c	10000	1
d	If "Yes," indicate the number of Forms 8282 filed during the year	7-	and the second s	1
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		V
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7f		<b>↓ ▼</b>
g	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h		
h	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	111	6.962	and the
8	sponsoring organization have excess business holdings at any time during the year?	8		1
9	Sponsoring organization have excess business notaings at any time during the year 1	U	10th	10000
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		1
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		1
10	Section 501(c)(7) organizations. Enter:	1.4.3	A.M.	
а	Initiation fees and capital contributions included on Part VIII, line 12			
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:			
а	Gross income from members or shareholders	-		
b	Gross income from other sources (Do not net amounts due or paid to other sources		P. S. M.	
	against amounts due or received from them.)	1.015		
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	122		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		Non-S	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.		Sec. 1	
b	Enter the amount of reserves the organization is required to maintain by the states in which	1.2		
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand		12.915	1
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<ul> <li>✓</li> </ul>
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on 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?	15	Constant of the	1
	If "Yes," see instructions and file Form 4720, Schedule N.	10		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	10000	V
	If "Yes," complete Form 4720, Schedule O.		1.19.45	1 20TORS

Form 99	0 (2019)			P	Page 6
Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Sched	lule O. Se	e ins	struct	
0	Check if Schedule O contains a response or note to any line in this Part VI		•	• •	$\checkmark$
Secu	on A. Governing Body and Management			Yes	No
19	Enter the number of voting members of the governing body at the end of the tax year   1a	11	125	165	NO
Ia	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 on Schedule O.		And a		
b	Enter the number of voting members included on line 1a, above, who are independent . <b>1b</b>	11			5.2.5
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with			347.5
	any other officer, director, trustee, or key employee?		2		$\checkmark$
3	Did the organization delegate control over management duties customarily performed by or under the	direct			
	supervision of officers, directors, trustees, or key employees to a management company or other person	ı?.	3		✓
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was		4		1
5	Did the organization become aware during the year of a significant diversion of the organization's assets		5		<u> </u>
6	Did the organization have members or stockholders?		6		✓
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	·	-		,
	one or more members of the governing body?		7a		✓
b	Are any governance decisions of the organization reserved to (or subject to approval by) mem stockholders, or persons other than the governing body?		7b		./
8	Did the organization contemporaneously document the meetings held or written actions undertaken c				Y
U	the year by the following:	iuning	12.5	1	
а	The governing body?		8a	1	
b	Each committee with authority to act on behalf of the governing body?	. 17	8b	$\checkmark$	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reach	ied at			
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		9		✓
Secti	on B. Policies (This Section B requests information about policies not required by the Internal	Revenue		́T	
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		0a		✓
b	If "Yes," did the organization have written policies and procedures governing the activities of such chap affiliates, and branches to ensure their operations are consistent with the organization's exempt purpose		0b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the		1a		./
b	Describe in Schedule O the process; if any, used by the organization to review this Form 990.		14	1200	V.
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	. 1	2a	1	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to con		2b	$\overline{\mathbf{V}}$	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "				
	describe in Schedule O how this was done		2c	$\checkmark$	
13	Did the organization have a written whistleblower policy?		13	$\checkmark$	
14	Did the organization have a written document retention and destruction policy?	· · [	14	$\checkmark$	
15	Did the process for determining compensation of the following persons include a review and approv				
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and deci		Ling		132.0
а	The organization's CEO, Executive Director, or top management official		5a	V	
b	Other officers or key employees of the organization	· ·	5b	~	Sec. State
40	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 arrange with a taxable entity during the year?		6a		1
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate				
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguar			Party -	1763
Cast	organization's exempt status with respect to such arrangements?	. 1	6b		
	on 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 Forms 1023 (1024 or 1024-A, if applicable), 990, and (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	7 990-1 (	Seci	.ion 5	01(C)
	Own website				
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co	onflict of i	inter	est n	olicy
	and financial statements available to the public during the tax year.			-0. p	51103,

<sup>20</sup> State the name, address, and telephone number of the person who possesses the organization's books and records ► Louisa Chaubert, FIND, Director of Finance, 9 Chemin des Mines, 1202, Geneva, Switzerland

Form 990 (201	9) Page /
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and
	Independent Contractors

**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, and 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.

See instructions for the order in which to list the persons above.

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

				(0	C)					
(A)	(B)				ition			(D)	(E)	(F)
Name and title	Average					e than o is both		Reportable	Reportable	Estimated amount
	hours					or/trust		compensation	compensation	of other
	per week (list any		1	-	1			from the organization	from related organizations	compensation from the
	hours for	divid	stitu	Officer	ey e	ghe	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and
	related	dual	tion	7	Idu	st co yee	4		3 (2).	related organizations
	organizations below	Individual trustee or director	Institutional trustee		Key employee	dud				
	dotted line)	stee	uste		Ű	ens				
			e			Highest compensated employee				
(1) Mark Kessel										
Chairman of the Board		1								
(2) Daniel Robert Camus										
Member of the Board		1								
(3) Andrew John Jack										
Member of the Board		1						×		
(4) Iona Kickbush										
Member of the Board		1								
(5) Carlos Morel Medicis										
Member of the Board		1		•						
(6) Marcel Tanner										
Member of the Board		1			_					
(7) Sheila Tlou										
Member of the Board		✓								
(8) Michael Watson										
Member of the Board		$\checkmark$								
(9) David Heymann										
Member of the Board		✓								
(10) Gao Fu										2
Member of the Board		✓								
(11) Kamineni Shobana										
Member of the Board		$\checkmark$								
(12) Catharina Boehme								1		
Chief Executive Officer				$\checkmark$				370,032		
(13) Zachary Benjamin Katz										
Chief Access Officer				1	_			224,194		
(14) Rangarajan Sampath										
Chief Scientific Officer				$\checkmark$				289,174		
										Form 990 (2019)

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Part VII Section A. Officers, Direct	tors, Trustees,	Key	Emp	olo	yee	s, an	d H	lighest Compe	nsated En	nploye	es (conti	inued)
, , , , , , , , , , , , , , , , , , , ,	,		(C)									
(A)	(B)	(1)	Position (do not check more than					(D)	(E)	(E) (F		
Name and title	Average					is both		Reportable	Reportable		Estimated ar	
	hours per week		1			or/trust		compensation from the	compensati from relate		of othe compensa	
	(list any	or director	Institutional trustee	Officer	Key employee	High	Former	organization	organizatio	ns	from the	е
	hours for related	irect	tutio	er	emp	lest loye	ner	(W-2/1099-MISC)	(W-2/1099-M		organizatior lated organi	
	organization	s tor tr	onal		oloy	e						
	dotted line	Jste	trus		ee	pens						
			tee			Highest compensated employee						
(15) Sharon Saacks			$\vdash$									
Director of Operations				1				197,897				
(16) Louisa Chaubert												
Director of Finance				1		1		213,990				
(17) Cassandra Kelly												
Director of Emerging Threat				1				221,975				
(18) Jon Bastow												
Director of Business Dev. & Resource Mob	lisastio			$\checkmark$				209,146				
(19) Sergio Carmona												
Chief Access Officer				1	-	•		73,557				
(20) Béatrice Mouton					1			100.000				
Head of Human Resources			-	-	<b>√</b>			162,896				
(21) Francesco Marinucci Head of HCV & HIV				1	1			16,280				
(22) Joseph Ndung'u		-		-	V		-	10,200				
Head of NTD Programme & FIND Kenya					1			308,893				
(23) Morten Ruhwald			-		<b> </b>	-						
Head of Tuberculosis					1			99,168				
(24) Stefano Ongarello						1						
Head of Data Services & Biobanking					1			178,365				
(25) Sabine Dittrich				-								
Head of Malaria & Fever					$\checkmark$			167,027				
1b Subtotal			÷					2,732,594				
c Total from continuation sheets				•		•		1,183,598				
d Total (add lines 1b and 1c) .						•		3,916,192				
2 Total number of individuals (includ		ed to the	nose	e lis	ted	above	e) w		e than \$100	,000 of	F	
reportable compensation from the	organization <b>&gt;</b>							48				
											Yes	s No
3 Did the organization list any fo employee on line 1a? If "Yes," cor	rmer officer, di	rector,	, tru	iste	e, k lividi	key e	mp	loyee, or highes	st compens	ated	3 √	
							•	· · · · · · ·	· · · · ·		3 🗸	S 125 28
4 For any individual listed on line 1a organization and related organiz	a, is the sum of r	epoπa han \$	150	CON	npei 12 <i>l</i> i	nsatio f "Vo	on a °"	and other comper	dule 1 for	n the		
individual	allons greater i	παπ φ	100,	,000	J: 1		з,			Such	4 √	
5 Did any person listed on line 1a re	ceive or accrue (	ompe	ansa	tion	, froi	m anv	/ un	related organizat	tion or indiv	idual	100100	
for services rendered to the organ											5	1
Section B. Independent Contractor												
1 Complete this table for your fir		oensat	ed	ind	eper	ndent	cc	ontractors that r	eceived m	ore tha	an \$100,0	000 of
compensation from the organization												
(A								(B)			(C)	
Name and bus								Description of serv	vices	Cor	mpensation	
SAMS, B372 New Friends Colony, New Dell							-	isiness support se				804,017
BCG, Ludwigstrasse 21, Munchen, German							-	rategy developme				590,000
Xeam Ventures, 3rd floor flat, Mahipalpur, 5		India					-	utsourced staff ser	vices			561,477
Ronald Sutherland, Rue Daubin 22, Geneva			<b>-</b> -			di e		gal Services				356,846
Caliber Outsourcing Services, D-51 Shanyi								utsourced services	1000	Contrast.	3	39,209,
2 Total number of independent co received more than \$100,000 of co	· •	-					u tr	nose listed abov <b>18</b>	e) who			
			gai	nza	aon	-		10			Form <b>99</b>	0 (2010)
											F0111 39	<b>U</b> (2019)

Continuation sheet Part VII Section A. Officers, Directors, trustees, Key Employees, and Highest Compensated Employees

(A) Name and title	(B) Average hours per week (list any) hours for elated organization below dotted line)	Individual trustee or director	box,	Po: not check unless pe	C) more thar erson is bo director/tru Key employee	th an	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
	10					ä		100.000		
(26) Sarah -Jane Loveday	40+				~			160,068		
Head of Communications	40.				•			171.017		
(27)Hiedi Albert	40+	1			~			171,817		
Head of South Africa FIND 28) Sylvain Bieler	40+				· · ·			176,804		
Senior Project Manager	40+					1		170,804		
(29) Anita Suresh	40+					· · ·		167,676		
Head of Sequencing	401					1		107,070		
(30) Samuel Schumacher	40+							168,649		
Head of Quality, Clinical and	40,							100,013		
Regulatory affairs						~				
(31) Elena Ivanova	40+							176,190		
Deputy Head HCV R&D						✓				
(32) Pamela Nabeta Senior Manager Quality & Medical Affairs	40+					×		162,394		
1b Sub-total							>	1,183,598		
C Total from continuation shee	-						>	0		<u> </u>
d Total (add lines 1b and 1c).		••••		• • • • •	•		$\triangleright$	1,183,598		

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••

Statement of Revenue Part VIII Check if Schedule O contains a response or note to any line in this Part VIII . . . . (D) Revenue excluded from tax under sections 512–514 **(C)** Unrelated business revenue (B) Related or exempt function revenue (A) Total revenue 1a Federated campaigns . . . 1a Contributions, Gifts, Grants and Other Similar Amounts Membership dues . . . . 1b b Fundraising events . . . 1c С Related organizations . . . 1d d Government grants (contributions) 25,639,643 е 1e All other contributions, gifts, grants, f and similar amounts not included above 1f 30,202,499 Noncash contributions included in g lines 1a-1f . . . . . . . . 1g Total. Add lines 1a-1f . 55,842,142 h . . **Business** Code **Program Service** 2a b Revenue С d е f All other program service revenue . . Total. Add lines 2a-2f . . . . . . . . . . . g Investment income (including dividends, interest, and 3 other similar amounts) . . . . . . . . . . 314,122 4 Income from investment of tax-exempt bond proceeds 5 Royalties . . . . . . . . (i) Real (ii) Personal 6a Gross rents . . 6a b Less: rental expenses 6b Rental income or (loss) 6c С Net rental income or (loss) d (ii) Other (i) Securities 7a Gross amount from sales of assets other than inventory 7a Less: cost or other basis h Other Revenue 7b and sales expenses . Gain or (loss) . . 7c С Net gain or (loss) d . . . . . Gross income from fundraising 8a events (not including \$ of contributions reported on line 1c). See Part IV, line 18 . . . 8a Less: direct expenses . . . . 8b b Net income or (loss) from fundraising events С Gross income from gaming 9a activities. See Part IV, line 19 . 9a Less: direct expenses . . . . 9b b Net income or (loss) from gaming activities С 10a Gross sales of inventory, less returns and allowances . . . 10a Less: cost of goods sold . . . 10b b Net income or (loss) from sales of inventory . С . **Business** Code Miscellaneous 15,680 11a Commission on tax deductions 541200 Revenue b С All other revenue 569,437 d 585,117 Total. Add lines 11a-11d . е . 56,741,381 12 Total revenue. See instructions .

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	0 (2019)				Page <b>10</b>
	IX Statement of Functional Expenses				(1)
Sectio	n 501(c)(3) and 501(c)(4) organizations must compl				
	Check if Schedule O contains a response				
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 .				
2	Grants and other assistance to domestic individuals. See Part IV, line 22	2,801,919	2,801,919		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	16,707,674	16,707,674		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	3,064,478	2,247,708	816,770	
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .				
7	Other salaries and wages	6,683,468	5,539,438	1,144,030	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	928,119	674,836	253,283	
9	Other employee benefits	566,031	449,760	116,271	
10	Payroll taxes	841,776	660,791	180,985	
11	Fees for services (nonemployees):				
а	Management	181,548	79,656	101,892	
b	Legal	67,474	2,858	64,616	
С	Accounting	175,242	79,566	95,676	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	17,992		17,992	
12	Advertising and promotion				
13	Office expenses	1,016,382	936,829	79,553	
14	Information technology	558,352	266,255	292,097	
15	Royalties				
16		985,698	178,774	806,924	
17		2,599,194,	2,437,257	161,937	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	200,884	187,221	13,663	
20					
21	Payments to affiliates	40.075		40.070	
22	Depreciation, depletion, and amortization	19,370		19,370	
23	Insurance	43,874		43,874	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	Project contractors	9,211,055	8,555,363	655,692	
b	Equipment & supplies	9,179,211	9,050,677	128,534	
С	Printing and publications	267,989	200,992	66,997	
d	Bank and similar charges	148,752	9,160	139,592	
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	56,266,482	51,066,734	5,199,748	
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)				

Pa	art X				
		Check if Schedule O contains a response or note to any line in this Par	tX	<u> </u>	
			<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash—non-interest-bearing	952	1	2,05
	2	Savings and temporary cash investments	37,814,256	2	40,869,75
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	300,560	4	2,226,11
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .		6	
ts	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
Ϋ́	9	Prepaid expenses and deferred charges	2,767,698	9	7,573,56
	10a	Land, buildings, and equipment: cost or other	Contraction of the second		
		basis. Complete Part VI of Schedule D 10a 73,096			
	b	Less: accumulated depreciation 10b 26,451	5,317		46,64
	11	Investments-publicly traded securities		11	
	12	Investments-other securities. See Part IV, line 11		12	
	13	Investments-program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	235,566		238,76
_	16	Total assets. Add lines 1 through 15 (must equal line 33)	41,124,349		50,956,89
	17	Accounts payable and accrued expenses	7,419,530		7,559,21
	18	Grants payable		18	
	19	Deferred revenue	28,281,244	19	37,499,21
	20	Tax-exempt bond liabilities		20	10. 
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to any current or former officer, director,			
ilit		trustee, key employee, creator or founder, substantial contributor, or 35%			
iab		controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	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		05	
	06	Total liabilities.   Add lines 17 through 25	35,700,774	25 26	45,058,42
	26		35,700,774	20	45,058,42
Net Assets or Fund Balances		Organizations that follow FASB ASC 958, check here ► □ and complete lines 27, 28, 32, and 33.			
	07			27	
	27 28			28	
	20	Net assets with donor restrictions		20	
		and complete lines 29 through 33.			
or	29	Capital stock or trust principal, or current funds		29	
ts	30	Paid-in or capital surplus, or land, building, or equipment fund	40,430		40,43
SSE	30 31	Retained earnings, endowment, accumulated income, or other funds	5,383,145		5,858,04
ťΑ	32	Total net assets or fund balances	5,423,575		5,898,47
Ne	33	Total liabilities and net assets/fund balances	41,124,349		50,956,89
	00		,		Form <b>990</b> (201

	20 (2019) XI Reconciliation of Net Assets				Pa	ige <b>12</b>
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	• •	• •	56,74	
2	Total expenses (must equal Part IX, column (A), line 25)	2			56,26	
3	Revenue less expenses. Subtract line 2 from line 1	3			-	4,899
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) .	4				3,575
5	Net unrealized gains (losses) on investments	5			0,12	0,010
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 on Schedule O)	9				
0	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10			5,89	8,474
Part	All Financial Statements and Reporting					,
	Check if Schedule O contains a response or note to any line in this Part XII					
			_		Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," et	xplain	n in 📗			
•	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? .	÷		2a		1
	If "Yes," check a box below to indicate whether the financial statements for the year were com	npiled	or			
	reviewed on a separate basis, consolidated basis, or both:				R. A.	
h	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	$\checkmark$	Cart & State
	If "Yes," check a box below to indicate whether the financial statements for the year were audit separate basis, consolidated basis, or both:	ed or	na			
	Separate basis, Consolidated basis, or both.		100		The state	
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ove					
U	the audit, review, or compilation of its financial statements and selection of an independent accounta	rsight	tof	2c	1	
	If the organization changed either its oversight process or selection process during the tax year, ex			20	1	
	Schedule O.	piain	on			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set for	th in i	the			
	Single Audit Act and OMB Circular A-133?	ut ni		3a	$\checkmark$	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	• erao ·		Ju	v	
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a	udits		3b	1	
					990	(0010)

SCHEDULE A (Form 990 or 990-EZ)

Name of the organization

# Public Charity Status and Public Support

ort npt charitable trust. ation. Employer identification number

Complete if the org
► Go

mplete 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 instructions and the latest information.

Foun	dation	for Innovative New Diagnostic	s				98-040	07553
Par	tl	<b>Reason for Public Char</b>	rity Status (All	organizations must	comple	te this p	art.) See instructio	ns.
The c	organiz	ation is not a private founda	tion because it i	s: (For lines 1 through	12, chec	k only or	ne box.)	
1		church, convention of churcl						
2		school described in section						
3		hospital or a cooperative hos						
4		medical research organizatio		onjunction with a hosp	oital desc	ribed in s	ection 170(b)(1)(A)(	(iii). Enter the
-		spital's name, city, and state					1	-1
5	se	n organization operated for tection 170(b)(1)(A)(iv). (Com	olete Part II.)					ai unit described in
6		federal, state, or local govern	•					
7		organization that normally			port from	a goveri	nmental unit or from	the general public
		escribed in section 170(b)(1)						
8		community trust described in						
9		agricultural research organi						
	un	university or a non-land-gra iversity:						-
10		n organization that normally r ceipts from activities related	eceives: (1) more	e than 331/3% of its su nctions—subject to co	apport fro	om contril	outions, membership and (2) no more that	o tees, and gross
	SU	pport from gross investment	income and uni	related business taxal	ole incom	ie (less se	ection 511 tax) from	businesses
		quired by the organization a						
11		organization organized and						
12		organization organized and						
		one or more publicly suppo neck the box in lines 12a thro						
			-				-	
а		<b>Type I.</b> A supporting organ the supported organization						
		supporting organization. Y						
b		Type II. A supporting organ					upported organizati	on(s) by having
D		control or management of						
		organization(s). You must		a Charles and a second se		1		
С		Type III functionally integ its supported organization(	rated. A suppor	ting organization oper	ated in c			ally integrated with,
d		Type III non-functionally i						orted organization(s)
u		that is not functionally integ						
		requirement (see instructio						
е		Check this box if the organ functionally integrated, or 7						e II, Type III
f	Ente	er the number of supported of				Jiganizat		[
g		vide the following information						
		ne of supported organization	(ii) EIN	(iii) Type of organization	1	organization	(v) Amount of monetary	(vi) Amount of
				(described on lines 1–10	listed in you	ur governing ment?	support (see	other support (see
				above (see instructions))		nonti	instructions)	instructions)
					Yes	No		
(A)								
(B)								
(0)				=			N	
(C)							<i>a</i> .	
(D)								
(E)								
Tota								
For P	aperwo	ork Reduction Act Notice, see	the Instructions f	or Form 990 or 990-EZ.	Cat	. No. 11285	F Schedule A (Fo	orm 990 or 990-EZ) 2019

Page 2

Part							
	(Complete only if you checked th						alify under
<u> </u>	Part III. If the organization fails to	qualify unde	r the tests lis	ted below, pl	ease comple	te Part III.)	
	on A. Public Support	() 0015	(1) 0010	() 0017	( )) 0010	() 0010	(0 T-1-1
	dar year (or fiscal year beginning in) ►	<b>(a)</b> 2015	<b>(b)</b> 2016	(c) 2017	<b>(d)</b> 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not include any "unusual grants.")	22.000 4.40	22 225 222	40.040.044	50 540 707	55 040 140	220 700 542
•		33,926,140	33,235,693	48,242,841	59,513,727	55,842,142	230,760,543
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	33,926,140	33,235,693	48,242,841	59,513,727	55,842,142	230,760,543
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)	All Strends	design from	Erel harry	S MAR SALES		80,970,793
6	Public support. Subtract line 5 from line 4						149,789,750
-	on B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2015	<b>(b)</b> 2016	<b>(c)</b> 2017	<b>(d)</b> 2018	<b>(e)</b> 2019	(f) Total
7	Amounts from line 4	33,926,140	33,235,693	48,242,841	59,513,727	55,842,142	230,760,543
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	636,376	638,314	411,567	787,986	899 239	3,373,482
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 12	<b>Total support.</b> Add lines 7 through 10 Gross receipts from related activities, etc.	. (see instructio	ons)			12	234,134,025
13	First five years. If the Form 990 is for the	e organization	's first, secon	d, third, fourth	, or fifth tax ye	ear as a sectio	n 501(c)(3)
	organization, check this box and stop he						🕨 🗌
	on C. Computation of Public Suppor						
14	Public support percentage for 2019 (line 6					14	63.9 %
15	Public support percentage from 2018 Sch					15	62.2 %
16a	331/3% support test-2019. If the organi						
L.	box and <b>stop here.</b> The organization qua						
b	331/3% support test—2018. If the organization						
17a	<b>10%-facts-and-circumstances test</b> — <b>20</b> 10% or more, and if the organization me Part VI how the organization meets the " organization	eets the "facts- facts-and-circu	and-circumsta umstances" te	ances" test, ch st. The organi	eck this box a zation qualifies	and <b>stop here.</b> as a publicly	Explain in supported
b	<b>10%-facts-and-circumstances test</b> — <b>20</b> 15 is 10% or more, and if the organiza Explain in Part VI how the organization n	tion meets the neets the "fact	e "facts-and-c s-and-circums	vircumstances' stances" test.	'test, check † The organizati	this box and son qualifies as	a publicly
18	supported organization	d not check a l	box on line 13	, 16a, 16b, 17a	, or 17b, chec	k this box and	see
	instructions					· · · · · ·	

Schedule A (Form 990 or 990-EZ) 2019

Part	Support Schedule for Organiza	ations Descr	ibed in Secti	ion 509(a)(2)			
	(Complete only if you checked th			0			der Part II.
	If the organization fails to qualify	under the te	sts listed belo	ow, please co	omplete Part I	l.)	
	on A. Public Support		·····				
	dar year (or fiscal year beginning in) ►	<b>(a)</b> 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(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 7a	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1, 2, and 3						
1a	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						
с	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from					and the state of the	
	line 6.)						
	on B. Total Support	(-) 0015	(1-) 0010	(-) 0017	(-1) 0010	(-) 0010	(6) T = t = 1
Galen 9	dar year (or fiscal year beginning in)  Amounts from line 6	<b>(a)</b> 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
10a	Gross income from interest, dividends,						
IVa	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						
С	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						
4.0	• •						
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 th	ne organizatior	i's first, secon	d, third, fourth	, or fifth tax ye	ar as a section	n 501(c)(3)
	organization, check this box and stop he	re					🕨 🔲
	on C. Computation of Public Suppor	· · · · · · · · · · · · · · · · · · ·				· · · · · ·	
15	Public support percentage for 2019 (line 8					15	%
<u>16</u>	Public support percentage from 2018 Sch					16	%
<u>3ecu</u> 17	on D. Computation of Investment In Investment income percentage for 2019 (			v line 12 colu	(f)	17	%
18	Investment income percentage for 2019 ( Investment income percentage from 2018			-		18	<u>%</u>
19a	33 <sup>1</sup> / <sub>3</sub> % support tests—2019. If the organ						
	17 is not more than 331/3%, check this box						
b	331/3% support tests-2018. If the organiz						3¹/3%, and
	line 18 is not more than 331/3%, check this		_				
20	Private foundation. If the organization di	d not check a	box on line 14	, 19a, or 19b, d	check this box	and see instruc	ctions 🕨 🗌

## Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on 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

# 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.

- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below.*
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- **5a** Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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? *If "Yes," provide detail in Part VI.*
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as 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? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in Part VI.*
- **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? *If "Yes," provide detail in Part VI.*
- 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? If "Yes," provide detail in **Part VI.**
- 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)? If "Yes," answer 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

Schedule A (Form 990 or 990-EZ) 2019

Yes No

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

e A (Form 990 or 990-EZ) 2019		F	Page 5
V Supporting Organizations (continued)			
Has the organization accepted a gift or contribution from any of the following persons?		Yes	No
below, the governing body of a supported organization?	11a		
A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
		Yes	No
Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
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? <i>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.</i>	2		
on C. Type II Supporting Organizations			
Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		Yes	No
on D. All Type III Supporting Organizations			<u> </u>
	, 	Yes	No
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		
Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>	3		
on E. Type III Functionally Integrated Supporting Organizations			
<ul> <li>The organization satisfied the Activities Test. Complete line 2 below.</li> <li>The organization is the parent of each of its supported organizations. Complete line 3 below.</li> </ul>	(see ins	truct	
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 <b>Part VI identify</b> <b>those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	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? A family member of a person described in (a) above? 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. On B. Type I Supporting Organizations Did the directors, trustees, or membership of one or more supported organizations have the power to regulary 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 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. 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). On C. Type II Supporting Organization or control 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 support organization supported organization (s). DI Littype III Supporting Organizations DI dite organization's functions, by the last day of the fifth month of the organization's in events on thus tees either (a) apported organization's supported organization. (b) evented organization's investment policies and in officiant, and (fi) operies of the organization's investment policies and in the supported organization's supported organization. DI C. Type II Supporting Organizations DI the organization provide to each of its sup	Has the organization accepted a gift or contribution from any of the following persons?       Image: Control is a supported organization?       Image: Control is a support of comparization?       Image: Control is a support of con and support is a support of control is a support of contex suppo	Has the organization accepted a gift or contribution from any of the following persons?       Image: Controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?       Image: Controls, either alone or together with persons described in (b) and (c) the supported organization?         A family member of a person described in (a) ebove?       A 55% controlled entity of a person described in (a) ebove? If "Yes" to a, b, or c, provide detail in Part VI.         On B. Type I Supporting Organizations       Yes         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 of the organization, describe how the powers to appoint and or emove directors or trustees at all times during the directors or controlled the organization or esticitons, if any, applied to such powers during the tax year.       Image: Controlled the organization or controlled the supported organization (b) "Yes," explain in Part VI how the purpors to controlled the supporting organization.       Image: Controlled the organization's directors or trustees during the tax year.         Did the organization supporting organization.       Image: Controlled the supporting organization.       Yes         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.       Yes         or trustees of each of the supporting organization.       Imagee: Controlled the supporting organization.

- **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.*
- 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.*
- **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.

2b

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Page 6 Schedule A (Form 990 or 990-EZ) 2019 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. (B) Current Year Section A-Adjusted Net Income (A) Prior Year (optional) 1 1 Net short-term capital gain 2 2 Recoveries of prior-year distributions 3 3 Other gross income (see instructions) 4 4 Add lines 1 through 3. 5 5 Depreciation and depletion 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 7 Other expenses (see instructions) 8 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) (B) Current Year Section B-Minimum Asset Amount (A) Prior 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): 1a a Average monthly value of securities 1b b Average monthly cash balances 1c c Fair market value of other non-exempt-use assets 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 2 Acquisition indebtedness applicable to non-exempt-use assets 3 3 Subtract line 2 from line 1d. 4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, 4 see instructions). 5 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 6 Multiply line 5 by .035. 7 7 Recoveries of prior-year distributions 8 8 Minimum Asset Amount (add line 7 to line 6) Section C-Distributable Amount **Current Year** 1 Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 2 Enter 85% of line 1. 3 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 4 4 Enter greater of line 2 or line 3. 5 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4, unless subject to 6 emergency temporary reduction (see instructions).

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

Schedule A (Form 990 or 990-EZ) 2019

Schedu	e A (Form 990 or 990-EZ) 2019			Page <b>7</b>
Part	V Type III Non-Functionally Integrated 509(a)(3	B) Supporting Organization	zations (continued)	
Secti	on D—Distributions			Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes	······	
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppo	orted	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
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 whic (provide details in <b>Part VI</b> ). See instructions.	h the organization is res	sponsive	
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
		(3)	(ii)	(iii)
Secti	on E-Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2019	Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019			
	(reasonable cause required – explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2019			
а	From 2014			
b	From 2015			
С	From 2016			
d	From 2017			
е	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h				
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from			
	Section D, line 7: \$			
а	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount	the second s	the dependence of the second	
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if			
•	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h			
Ŭ	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2015			
b	Excess from 2016			
<u>с</u>	Excess from 2017			
 d	Excess from 2018			
 e	Excess from 2019			
C			and a second	

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Schedule A (Form 990 or 990-EZ) 2019

Schedule A (Form 990 or 990-EZ) 2019 Page 8					
Part VI	<b>Supplemental Information.</b> 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.)				

Schedule B	
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(Form 990, 990-EZ, or 990-PF)

#### Department of the Treasury Internal Revenue Service Name of the organization

# **Schedule of Contributors**

OMB No. 1545-0047



Employer identification number

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

Foundation for Innovative New	980407553	
Organization type (check on	ə):	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( 3 ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private fou	ndation

	527	political	organization
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Form 990-PF	501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

## **General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

## **Special Rules**

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Cat. No. 30613X Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

	(Form 990, 990-EZ, or 990-PF) (2019)		Page <b>2</b>
	organization on for Innovative New Diagnostics	E	nployer identification number 980407553
Part I	Contributors (see instructions). Use duplicate copies	s of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	UNITAID Global Health Campus, Chemin du Pommier 40 (5th floor) CH -1218 Grand Saconnex, Switzerland	 \$9,527,334	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Department for International Development (DFID) Abercrombie House, East Kilbride G75 8EA United Kingdom	 \$9,167,875_ 	Person✓Payroll□Noncash□(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	The Bill and Melinda Gates Foundation PO Box 23350 Seattle WA 98012 USA	 \$9,167,016	Person☑Payroll□Noncash□(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	The Global Fund Global Health Campus, Chemin du Pommier 40 CH -1218 Grand Saconnex, Switzerland	 \$	Person✓Payroll□Noncash□(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	Department for Health and Social Care (DHSC) 39 Victoria Street London, SW1H 0EU, United Kingdom	 \$\$3,879,967	Person☑Payroll□Noncash□(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	Australian Department of Foreign Affairs and Trade R.G. Casey Building, John McEwan Cres Canberra ACT 0211 Australia	 \$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
	***************************************		1

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

undati	on for Innovative New Diagnostics		98-0407553
art I	Contributors (see instructions). Use duplicate copies of	f Part I if additional space	is needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	KfW Development Bank		Person ☑ Payroll □
	Palmengartenstrasse 5-9 60325, Frankfurt am Main, Germany	\$2,495,763	Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contributior
8	Global Health Innovative Technology Fund		Person 🗹 Payroli 🗌
	Ark Hills Sengokuyama Mori Tower 25F, 1-9-10 Roppongi, Minato-ku, Tokyo, 106 - 0032 Japan	\$1,847,860	5 Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	Swiss Agency for Development and Cooperation		Person 🗹 Payroll 🗌
	Freiburgstrasse,130 3003, Bern, Switzerland	\$ <u>1,677,73</u> 4	-
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	The Central TB Division (CTS Minstry of Health & Family Welfare		Person 🗹 Payroll
	Nirman Bhawan, Maulana Azad Road	\$1,410,058	Noncash (Complete Part II for
	New Delhi, 110011, India		noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contributior
<u>11</u>	Dutch Ministry of Foreign Affairs (DGIS)		Person ☑ Payroll □
	Social Development Department, Health and Aids Division PB 20061 2500 EB The Hague, The Netherlands	\$1,399,96 <sup>-</sup>	Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contributior
		\$	Person Payroli Noncash
		Ψ	(Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

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Schedule B (Form 990, 990-EZ, or 990-PF) (2019)	Page <b>3</b>
Name of organization	Employer identification number

Part II	Noncash Property (see instructions). Use duplicate co	pies of Part II if additional space	e is needed.
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		  \$	
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		   \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		  \$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Schedule B (F	orm 990, 990-EZ, or 990-PF) (2019)			Page 4		
Name of org	anization			Employer identification number		
Part III	(10) that total more than \$1,000 fo the following line entry. For organiza contributions of <b>\$1,000 or less</b> for t	<b>r the year from any</b> a ations completing Par he year. (Enter this inf	one contributor. t III, enter the tota ormation once. S	escribed in section 501(c)(7), (8), or Complete columns (a) through (e) and I of <i>exclusively</i> religious, charitable, etc., ee instructions.) ► \$		
	Use duplicate copies of Part III if ad	ditional space is need	led.	<u>*</u>		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
-	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use c	f gift	(d) Description of how gift is held		
	Transferee's name, address, a	er of gift Relatior	nship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
	(e) Transfer of gif Transferee's name, address, and ZIP + 4			ft Relationship of transferor to transferee		
-						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
	(e) Transfer of gift					
	Transferee's name, address, a			nship of transferor to transferee		

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

### **General Instructions**

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Schedule B (Form 990, 990-EZ, or 990-PF), such as legislation enacted after the schedule and its instructions were published, go to *www.irs.gov/Form990*.

Note: Terms in **bold** are defined in the *Glossary* of the Instructions for Form 990.

#### Purpose of Schedule

Schedule B (Form 990, 990-EZ, or 990-PF) is used to provide information on contributions the organization reported on:

• Form 990, Return of Organization Exempt From Income Tax, Part VIII, *Statement of Revenue*, line 1;

• Form 990-EZ, Short Form Return of Organization Exempt From Income Tax, Part I, line 1; or

• Form 990-PF, Return of Private Foundation, Part I, line 1.

#### Who Must File

Every organization must complete and attach Schedule B to its Form 990, 990-EZ, or 990-PF, unless it certifies that it doesn't meet the filing requirements of this schedule by:

• Answering "No" on Form 990, Part IV, Checklist of Required Schedules, line 2; or

- Checking the box on:
  - Form 990-EZ, line H; or
  - Form 990-PF, Part I, Analysis of Revenue and Expenses, line 2.

See the separate instructions for these lines on those forms.

If an organization isn't required to file Form 990, 990-EZ, or 990-PF but chooses to do so, it must file a complete return and provide all of the information requested, including the required schedules.

#### Accounting Method

When completing Schedule B (Form 990, 990-EZ, or 990-PF), the organization must use the same accounting method it checked on Form 990, Part XII, *Financial Statements and Reporting*, line 1; Form 990-EZ, line G; or Form 990-PF, line J.

#### **Public Inspection**

**Note:** Don't include social security numbers of contributors as this information may be made public.

• Schedule B is open to public inspection for an organization that files Form 990-PF.

• Schedule B is open to public inspection for a section 527 political organization that files Form 990 or 990-EZ.

• For all other organizations that file Form 990 or 990-EZ, the names and addresses of contributors aren't required to be made available for public inspection. All other information, including the amount of contributions, the description of **noncash contributions**, and any other information, is required to be made available for public inspection unless it clearly identifies the contributor.

If an organization files a copy of Form 990 or 990-EZ, and attachments, with any state, it shouldn't include its Schedule B (Form 990, 990-EZ, or 990-PF) in the attachments for the state, unless a schedule of contributors is specifically required by the state. States that don't require the information might inadvertently make the schedule available for public inspection along with the rest of the Form 990 or 990-EZ.

See the instructions for Form 990, 990-EZ, or 990-PF for information on telephone assistance and the public inspection rules for these forms and their attachments.

# Contributions To Be Included on Part I

A *contributor* (person) includes individuals, fiduciaries, partnerships, corporations, associations, trusts, and exempt organizations. In addition, section 509(a)(2), 170(b)(1)(A)(iv), and 170(b)(1)(A)(vi) organizations must also report **governmental units** as contributors.

#### Contributions

*Contributions* reportable on Schedule B (Form 990, 990-EZ, or 990-PF) are contributions, grants, bequests, devises, and gifts of money or property, whether or not for charitable purposes. For example, political contributions to section 527 political organizations are included. Contributions don't include fees for the performance of services. See the instructions for Form 990, Part VIII, line 1, for more detailed information on contributions.

#### **General Rule**

Unless the organization is covered by one of the *Special Rules*, later, it must report in Part I contributions from all persons who contribute \$5,000 or more (in money or other property) during the **tax year**. As described below, certain organizations report only total contribution amounts. Contributions may be made directly or indirectly and may take the form of money, **securities**, or any other type of property. Include all separate and independent gifts that are \$1,000 or more to determine a contributor's total contribution. Gifts that are less than \$1,000 may be disregarded. Include each contribution reported on Form 990, Part VIII, line 1. For example, if an organization that uses the accrual method of accounting reports a pledge of noncash property in Part VIII, line 1, it must include the value of that contribution in calculating whether the contributor meets the General Rule (or one of the Special Rules, if applicable), even if the organization didn't receive the property during the tax year.

Note: Under regulations proposed by the Treasury Department and the IRS, certain organizations would not have to report the names and addresses of their contributors on Schedule B. These organizations must continue to:

• Collect the names and addresses of their contributors,

• Keep this information in their records and books, and

• Make the information available to the IRS upon request.

Section 501(c)(3) organizations (including section 4947(a)(1) nonexempt charitable trusts and nonexempt private foundations described in section 6033(d)), and section 527 political organizations must report the names and addresses of their contributors in Part I, column (b), on Schedule B.

#### Special Rules

Section 501(c)(3) organizations that file Form 990 or 990-EZ. For an organization described in section 501(c)(3) that meets the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and not just the 10% support test (whether or not the organization is otherwise described in section 170(b)(1)(A)), list in Part I only those contributors whose contribution of \$5,000 or more during the tax year is greater than 2% of the amount reported on Form 990, Part VIII, line 1h(A); or Form 990-EZ, line 1. An organization that claims the benefit of this special rule must either (1) establish on Schedule A (Form 990 or 990-EZ), Part II, that it met the 331/3% support test for the current year or prior year; or (2) check the box on Schedule A (Form 990 or 990-EZ), Part I, line 7 or 8, and the box on Schedule A, Part II, line 13, as a section 170(b)(1)(A)(vi) organization in its first 5 years.

**Example.** A section 501(c)(3) organization, of the type described above, reported \$700,000 in total contributions, gifts, grants, and similar amounts received on Form 990, Part VIII, line 1h. The organization is only required to list in Parts I and II of its Schedule B each person who contributed more than the greater of \$5,000 or 2% of \$700,000 (\$14,000) during

the tax year. Thus, a contributor who gave a total of \$11,000 wouldn't be reported in Parts I and II for this section 501(c)(3) organization. Even though the \$11,000 contribution to the organization was greater than \$5,000, it didn't exceed \$14,000.

# Section 501(c)(7), (8), or (10)

organizations. For contributions to these social and recreational clubs, fraternal beneficiary and domestic fraternal societies, orders, or associations that weren't for an exclusively religious, charitable, etc., purpose, list in Part I contributions from each contributor who contributed \$5,000 or more during the tax year, as described under *General Rule*, earlier.

For contributions to a section 501(c)(7), (8), or (10) organization received for use exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals (section 170(c)(4), 2055(a)(3), or 2522(a)(3)), list in Part I contributions from each contributor whose aggregate contributions for an exclusively religious, charitable, etc., purpose were more than \$1,000 during the tax year. To determine the more-than-\$1,000 amount, total all of a contributor's gifts for the tax year (regardless of amount). For a noncash contribution, complete Part II.

All section 501(c)(7), (8), or (10) organizations that listed an exclusively religious, charitable, etc., contribution in Part I or II must also complete Part III to provide further information on such contributions of more than \$1,000 during the tax year and show the total amount received from such contributions that were for \$1,000 or less during the tax year.

Under the proposed regulations, all section 501(c)(7), (8), or (10) organizations listing contributions under this special rule would enter "N/A" in Part I, column (b), and would not enter the name and address of any contributor.

However, if a section 501(c)(7), (8), or (10) organization didn't receive total contributions of more than \$1,000 from a single contributor during the tax year for exclusively religious, charitable, etc., purposes and consequently wasn't required to complete Parts I through III with respect to these contributions, it need only check the third *Special Rules* box on the front of Schedule B and enter, in the space provided, the total contributions it received during the tax year for an exclusively religious, charitable, etc., purpose.

#### Specific Instructions



Don't attach substitutes for Schedule B or attachments to Schedule B with information on contributors. Parts I, II, and III of

Schedule B may be duplicated as needed to provide adequate space for listing all contributors. Number each page of each part (for example, Page 2 of 5, Part II).

**Part I.** In column (a), identify the first contributor listed as No. 1 and the second contributor as No. 2, etc. Number

consecutively. In column (b), section 501(c)(3) organizations (including section 4947(a)(1) nonexempt charitable trusts and section 501(c)(3) nonexempt private foundations) and section 527 organizations enter the contributor's name, address, and ZIP code. Identify a donor as "anonymous" only if the organization doesn't know the donor's identity. Under the proposed regulations, other organizations would enter "N/A" in place of each contributor's name, address, and ZIP code. In column (c), enter the amount of total contributions for the **tax year** for the contributor listed.

In column (d), check the type of contribution. Check all that apply for the contributor listed. If a *cash contribution* came directly from a contributor (other than through payroll deduction), check the "Person" box. A cash contribution includes contributions paid by cash, credit card, check, money order, electronic fund or wire transfer, and other charges against funds on deposit at a financial institution.

If an **employee's** cash contribution was forwarded by an employer (indirect contribution), check the "Payroll" box. If an employer withholds contributions from employees' pay and periodically gives them to the organization, report only the employer's name and address or "N/A," as applicable, and the total amount given unless you know that a particular employee gave enough to be listed separately.

Check the "Noncash" box in column (d) for any contribution of property other than cash during the tax year, and complete Part II of this schedule. For example, if an organization that uses the accrual method of accounting reports a pledge of noncash property on Form 990, Part VIII, line 1g, it must check the "Noncash" box and complete Part II even if the organization didn't receive the property during the tax year.

For a section 527 organization that files a Form 8871, Political Organization Notice of Section 527 Status, the names and addresses of contributors that aren't reported on Form 8872, Political Organization Report of Contributions and Expenditures, don't need to be reported in Part I if the organization paid the amount specified by section 527(j)(1). In this case, enter "Pd. 527(j)(1)" in column (b) instead of a name, address, and ZIP code; but you must enter the amount of contributions in column (c).

Part II. In column (a), show the number that corresponds to the contributor's number in Part I. In column (b), describe the **noncash contribution** received by the organization during the tax year, regardless of the value of that noncash contribution. Note the public inspection rules discussed earlier.

In columns (c) and (d), report property with readily determinable market value (for example, market quotations for securities) by listing its fair market value (FMV). If the organization immediately sells securities contributed to the organization (including through a broker or agent), the contribution must still be reported as a gift of property (rather than cash) in the amount of the net

proceeds plus the broker's fees and expenses. See the instructions for Form 990, Part VIII, line 1g, which provide an example to illustrate this point. If the property isn't immediately sold, measure market value of marketable securities registered and listed on a recognized securities exchange by the average of the highest and lowest quoted selling prices (or the average between the bona fide bid and asked prices) on the contribution date. See Regulations section 20.2031-2 to determine the value of contributed stocks and bonds. When FMV can't be readily determined, use an appraised or estimated value. To determine the amount of a noncash contribution subject to an outstanding debt, subtract the debt from the property's FMV. Enter the date the property was received by the organization. but only if the donor has fully given up use and enjoyment of the property at that time.

The organization must report the value of any **qualified conservation contributions** and contributions of **conservation easements** listed in Part II consistently with how it reports revenue from such contributions in its books, records, and financial statements and in Form 990, Part VIII, Statement of Revenue.

For more information on noncash contributions, see the instructions for Schedule M (Form 990), Noncash Contributions.

If the organization received a partially completed Form 8283, Noncash Charitable Contributions, from a donor, complete it and return it so the donor can get a charitable contribution deduction. Keep a copy for your records.

Original (first) and successor donee (recipient) organizations must file Form 8282, Donee Information Return, if they sell, exchange, consume, or otherwise dispose of (with or without consideration) charitable deduction property (property other than money or certain publicly traded securities) within 3 years after the date the original donee received the property.

Part III. Section 501(c)(7), (8), or (10) organizations that received contributions for use exclusively for religious, charitable, etc., purposes during the tax year must complete Parts I through III for each person whose gifts totaled more than \$1,000 during the tax year. Show also, in the heading of Part III, the total of gifts to these organizations that were \$1,000 or less for the tax year and were for exclusively religious, charitable, etc., purposes. Complete this information only on the first Part III page if you use duplicate copies of Part III.

If an amount is set aside for an exclusively religious, charitable, etc., purpose, show in column (d) how the amount is held (for example, whether it is commingled with amounts held for other purposes). If the organization transferred the gift to another organization, show the name and address of the transferee organization in column (e) and explain the relationship between the two organizations.

(Form 990)       ▶ Groupsten it the organization answered "ves" on Form 990, Part IV, ine 7, 8, 10, 11, 11, 11, 11, 11, 11, 11, 11, 11	SCHE	DULE D	Supplementa	I Financial Sta	atements		OMB No. 1545-0047
Department         Description         Description <thdescription< th=""> <thdescription< th=""></thdescription<></thdescription<>	(Form	n 990)	► Complete if the org	► Complete if the organization answered "Yes" on Form 990,			2019
Agregate value of constraints income the organization asswered "Yee" on Form 990, Part IV, line 6.     Complete if the organization answered "Yee" on Form 990, Part IV, line 6.     Complete if the organization answered "Yee" on Form 990, Part IV, line 6.     Complete if the organization answered "Yee" on Form 990, Part IV, line 6.     Complete if the organization answered "Yee" on Form 990, Part IV, line 6.     Complete if the organization answered "Yee" on Form 990, Part IV, line 6.     Complete if the organization for lones, and done ackusive ligal control?     Agregate value of contributions to (during year)     Aggregate value of contributions to (during year)     Complete if the organization if norm all dones, and done valvisor in writing that grant funds can be used     only for charitable purposes and not for the benefit of the done or done valvisor, or for any other purpose     confering lupermissible purposes and not for the benefit of the done or done valvisor, or for any other purpose     conference lupermission information.     Complete if the organization information (exclusive ligal control?     Complete if the organization information (exclusive ligal control?     Complete if the organization information (exclusive)     Complete inse 2a through 2d if the organization infore	<b>.</b> .				e, 11f, 12a, or 12b.		Open to Public
Foundation for Innovative New Diagnostics         9940753           Part II         Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.           Complete if the organization asswered "Yes" on Form 990, Part IV, line 6.           1         Total number at end of year .         (e) Doner arvives tauts         (b) Funds are other accounts           2         Aggregate value of contributions to (during year)         (e) Doner arvives tauts         (b) Funds are other accounts           3         Aggregate value of contributions to (during year)         (e) Doner arvives tauts         (b) Funds are other accounts           4         Aggregate value of control and conces, and doner advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the doner or donor advisor, or for any other purpose conferring impermissible purposes and not for the benefit of the doner or donor advisor, or for any other purpose conferring impermissible purposes and not for the benefit of the doner or donor advisor, or for any other purpose conferring impermissible purposes and not for the benefit of the doner or donor advisor, for any other purpose conferring impermissible purposes and not for bubic use (for avanta), accretation or donar advisor, for any other purpose conferring impermissible purposes and not for the second on the accounts         (Preservation of a conservation assements.           1         Purpose(s) of conservation easements.         2 fail         (Preservation of a conservation easements.         2 fail           2         2 fail         2 fail					the latest information	1.	
2011       Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yee" on Form 990, Part IV, line 6.          1       Total number at end of year .       (e) Doner advised trues          2       Aggregate value of orbibutions to (during year)        (e) Doner advised trues          3       Aggregate value of grants from (during year)        (e) Doner advised trues          4       Aggregate value of grants from (during year)        (e) Doner advised trues          5       Did the organization inform all donors and donor advisors in writing that the assets held in donor advised        (f) For the organization inform all grantese, donors, and donor advisors in writing that grant funds can be used       only for dratticible purposes and not for the benefit of the donor a donor advisor, or form yother purpose       complete in the organization answered "Yee" on Form 990, Part IV, line 7.          Partual Conservation easements        Complete in the organization answered "Yee" on Form 990, Part IV, line 7.          Parpose(g) of conservation assements        Complete in the organization answered "Yee" on Form 990, Part IV, line 7.          Parpose(g) of conservation easements        Complete intervation easements        (f) House asset         Complete lines 2a through 2d if the organization held a qualified conservation of a actified historic structure        (f) House asset         Preservation of a case present	Name o	f the organization			Em	ployer identif	ication number
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 contributions to (during year)         4       Aggregate value of contributions to (during year)         5       Did the organization inform all donors and donor advisors in writing that the assets held in donor advised trunds are the organization for and 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 impermisable purposes in an other the organization inform all grantees. A contex, and the organization inform all grantees. No         1       Purpose(s) of conservation easements held by the organization (benck all that apply).         1       Purpose(s) of conservation easements in a certified historic structure         1       Preservation of a mistoric assements.         2       Complete lines 2 a through 2d if the organization held a qualified conservation or a instructure line of conservation easements.         2       Complete lines 2 a through 2d if the organization held a qualified conservation contribution in the form of a conservation easements.         2       Complete lines 2 a through 2d if the arganization held a qualified conservation conservation assements.         2       Za         3       Number of conservation easements included in							
I       Total number at end of year       Image by the provided funds       Denor advised funds       Denor advised funds         2       Aggregate value of contributions to (during year)       Aggregate value of contributions to (during year)       Image by the provided funds are the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all grantess, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor of donor advisors of any other purpose conferring impermissible private benefit?         PartIII       Completed if the organization answered "Yest" on Form 990, Part IV, line 7.       Image by the organization answered "Yest" 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 (for example, recreation or education)       Preservation of a instrontically important land area improvements on a certified historic structure         2       Complete lines 2 a through 2 di ft the organization held a qualified conservation contribution in the form of a conservation easements to a certified historic structure included in (a) and 2 a distoric structure listed in the National Register         3       Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year is conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year is conservation easements modified, transferred, released, extinguished, or terminated by the organization du	Par					r Accoun	ts.
1       Total number at end of year		Comple	ete if the organization answered	r	····· · · · · · · · · · · · · · · · ·	(b) Eundo	and other accounts
2       Aggregate value of contributions to (during year).	4	Total number :	at end of year			(b) Funce	
3       Aggregate value of grants from (during year)			-				
A aggregate value at end of year		00 0					
funds are the organization's property, subject to the organization's exclusive legal control?       Image: the organization informal organization and oncor advisor, or for any other purpose conferring impermissible private benefit?       Image: the organization informal organization answered "Yes" on Form 990, Part IV, line 7.         PartUL       Conservation easements held by the organization (check all that apply).       Image: the organization information answered "Yes" on Form 990, Part IV, line 7.         Proceeds; of conservation easements held by the organization (check all that apply).       Image: the organization held a qualified conservation of a certified historic structure         Preservation of and for public use (for example, recreation or education)       Preservation of a conservation easements in the qualified conservation of a certified historic structure         Preservation of open space       Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easements.       Za         a Total number of conservation easements.       Za       Za         d Number of conservation easements in cluded in (c) acquired after 7/25/06, and not on a historic structure included in the locks?       Zad         3 Number of conservation easements modified, transferred, released, exitigation have a written policy regaring the periodic monitoring, inspection, handling of violations, and enforcing conservation easements during the year because of a conservation easements during the year because of acting the periodic monitoring, inspection, handling of violations, and enforcing conservation easements during the year because of acting the perio							
G 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?	5		-	advisors in writing that	t the assets held ir	donor ad	vised
only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose       Image: the second sec		funds are the	organization's property, subject to the	organization's exclusi	ive legal control? .		. 🗌 Yes 🗌 No
contering impermissible private benefit? Part UI Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of an torpublicus e(or example, recreation or education) Protection of natural habitat Preservation of and for publicus e(or example, recreation or education) Preservation of an of points pace Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easements on a certified historic structure Intel at the End of the Tax Year Total average restricted by conservation easements and a certified historic structure included in (a) 2d 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 Number of conservation easements modified, transfered, released, extinguished, or terminated by the organization during the tax year. Number of ostates where property subject to conservation easement is located by the organization during the tax year. Number of states where property subject to conservation easements included in (a) (b)(a)(a)(a)(a)(a)(a)(b)(a)(a)(a)(a)(a)(a)(a)(a)(a)(a)(a)(a)(a)	6						
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).         1       Preservation of and for public use (for example, recreation or education)       Preservation of a historically important land area         1       Protection of natural habitat       Preservation of a certified historic structure         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.       If their at the End of the Tax Year         3       Total acreage restricted by conservation easements.       2a         2       2d       2d         3       Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register       2d         4       Number of states where property subject to conservation easement is located ▶       2d         5       Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcing conservation easements during the year         7       Amount of expenses lncurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year         8       Does the organization inmonitoring, inspecting, handling of violations, and enforcing conservation easements accuring the						y other pui	
Complete if the organization answered "Yes" on Form 990, Part IV, line 7.         Improve (a) of conservation easements held by the organization (check all that apply).         Preservation of and for public use (for example, recreation or education)       Preservation of a chartal habitat         Preservation of on of public use (for example, recreation or education)       Preservation of a certified historic structure         Preservation of open space       Preservation of a certified historic structure         Complete lines 2a through 20 if the organization held a qualified conservation contribution in the form of a conservation easements       2a         Image: Total acreage restricted by conservation easements       2a         Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register       2a         Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year b         Staff and voluteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements in holds?         Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements and balance sheet, and include, if applicable, the text of the footnote to the organization easements and balance sheet, and include, if applicable, the text of the footnote to the organization's financial 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	Dor		-	• • • • • • • •	• • • • • • •		
1       Purpose(s) of conservation easements held by the organization (check all that apply).	rai			les" on Form 990 F	Part IV line 7		
□       Preservation of land for public use (for example, recreation or education)       □       Preservation of a historically important land area         □       Preservation of a certified historic structure         □       Preservation of a conservation         easement on the last day of the tax year.       ■         □       Total acreage restricted by conservation easements       ■         □       Number of conservation easements on a certified historic structure included in (a)       2a         □       Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶         □       Number of states where property subject to conservation easements in holds?       □         0       Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year         ▶       □       Yes       No         0       Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year         ▶       □       Yes       No         0       Staff and voluntere hours devoted to monitoring, inspecting,	1						
□       Preservation 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 easements       1       Held at the End of the Tax Year         a       Total aureage restricted by conservation easements       2a       Held at the End of the Tax Year         a       Total acreage restricted by conservation easements       2a       2d       2d         d       Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register       2d	•					istoricallv i	mportant land area
Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation     aesement on the last day of the tax year.     Total acreage restricted by conservation easements     Total acreage restricted by conservation easements     Total acreage restricted by conservation easements     Conservation easements included in (c) acquired after 7/25/06, and not on a     historic structure listed in the National Register     Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the     tax year ►     Number of states where property subject to conservation easements in lockded ►     Verse of the organization have a written policy regarding the periodic monitoring, inspection, handling of     violations, and enforcement of the conservation easements in holds?     Anount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements and the verse     Anount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements and the verse of the conservation easements in it locks?     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)?     I and section 170(h)(4)(B)(iii)?     I and section 170(h)(4)(B)(iii)				· · · · · · · · · · · · · · · · · · ·			
<ul> <li>easement on the last day of the tax year.</li> <li>a Total number of conservation easements</li></ul>		Preservatio	n of open space				
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<ul> <li>Number of conservation easements on a certified historic structure included in (a)</li></ul>	а						
d       Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register       2d         3       Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶         4       Number of states where property subject to conservation easement is located ▶         5       Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?         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)(0)         and section 170(h)(4)(B)(0)?       (P test of the footnote to the organization's financial statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization easements.         Part III       Organization 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 FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures		0	5				
historic structure listed in the National Register       2d         3       Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶					. ,		
<ul> <li>Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶</li></ul>	a					1 1	
<ul> <li>tax year ▶</li></ul>	3		•			L	organization during the
<ul> <li>Number of states where property subject to conservation easement is located ▶</li> <li>Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?</li> <li>Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶</li> <li>Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶\$</li> <li>Boes 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)?</li> <li>Does each conservation easement 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.</li> <li>Part III Organization Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.</li> <li>Ia If the organization elected, as permitted under FASB 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 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 soutnes:</li> <li>(i) Revenue included on Form 990, Part X</li></ul>	Ŭ			ionou, roiouoou, oxin	guidrida, dr torrinna		organization daming the
<ul> <li>violations, and enforcement of the conservation easements it holds?</li></ul>	4		tes where property subject to conserv	ation easement is loca	ated 🕨		
<ul> <li>6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  <ul> <li>Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year</li> <li>\$</li></ul></li></ul>	5				nonitoring, inspecti	on, handlir	
<ul> <li>Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year</li> <li>3</li> <li>Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i)</li> <li>and section 170(h)(4)(B)(ii)?</li> <li>And section 170(h)(4)(B)(B)</li> <li>And section 160(d) is appointed under FASB 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 the following amounts relating to these items:         <ul> <li>(i) Revenue included on Form 990, Part X.</li> <li>(ii) Assets included in Form 990, Part X.</li> <li>(iii) Assets included in Form</li></ul></li></ul>							
<ul> <li>▶\$</li></ul>	6	Staff and volun	teer hours devoted to monitoring, inspec	ting, handling of violatio	ns, and enforcing cor	servation e	asements during the year
<ul> <li>▶\$</li></ul>	-	►					
<ul> <li>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)?</li></ul>	1		enses incurred in monitoring, inspecting	g, handling of violations	, and enforcing cons	ervation ea	sements during the year
<ul> <li>and section 170(h)(4)(B)(ii)?</li></ul>	ß			(d) above satisfy the r	aquirements of secti	on $170(h)//$	i\/B\/i\
<ul> <li>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.</li> <li>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.</li> <li>1a If the organization elected, as permitted under FASB 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.</li> <li>b If the organization elected, as permitted under FASB 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 in Part XIII the text of the footnote to its financial statements that describes these items.</li> <li>b If the organization elected, as permitted under FASB 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: <ul> <li>(i) Revenue included on Form 990, Part X.</li> <li>(ii) Assets included in Form 990, Part X.</li> <li>(ii) Assets included in Form 990, Part X.</li> <li>(ii) Assets included on Form 990, Part X.</li> <li>(iii) Assets included on Form 990, Part X.</li> <li>(iii) Assets included on Form 990, Part X.</li> <li>(ii) Assets included on Form 990, Part X.</li> <li>(ii) Assets included on Form 990, Part X.</li> <li>(iii) Assets included on Form 990, Part X.</li> <li>(i</li></ul></li></ul>	0		-				panning panning
<ul> <li>organization's accounting for conservation easements.</li> <li>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.</li> <li>1a If the organization elected, as permitted under FASB 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.</li> <li>b If the organization elected, as permitted under FASB 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: <ul> <li>(i) Revenue included on Form 990, Part X</li> <li>(ii) Assets included in Form 990, Part X</li> <li>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 FASB ASC 958 relating to these items:</li> <li>a Revenue included on Form 990, Part X</li> <li>b Assets included in Form 990, Part X</li> </ul></li></ul>	9						
<ul> <li>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.</li> <li>1a If the organization elected, as permitted under FASB 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.</li> <li>b If the organization elected, as permitted under FASB 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: <ul> <li>(i) Revenue included on Form 990, Part VIII, line 1</li> <li>(ii) Assets included in Form 990, Part X</li> <li>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 FASB ASC 958 relating to these items:</li> <li>a Revenue included on Form 990, Part VIII, line 1</li> <li>Assets included in Form 990, Part VIII, line 1</li> <li>S</li> </ul></li></ul>					ganization's financia	ıl statemen	ts that describes the
<ul> <li>Complete if the organization answered "Yes" on Form 990, Part IV, line 8.</li> <li>1a If the organization elected, as permitted under FASB 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.</li> <li>b If the organization elected, as permitted under FASB 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: <ul> <li>(i) Revenue included on Form 990, Part VIII, line 1</li> <li>(ii) Assets included in Form 990, Part X</li> <li>2 If the organization received or held works of art, historical treasures, or other rASB ASC 958 relating to these items:</li> <li>a Revenue included on Form 990, Part VIII, line 1</li> <li>Assets included in Form 990, Part X</li> </ul> </li> </ul>		0	<u> </u>				
<ul> <li>1a If the organization elected, as permitted under FASB 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.</li> <li>b If the organization elected, as permitted under FASB 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: <ul> <li>(i) Revenue included on Form 990, Part VIII, line 1</li> <li>(ii) Assets included in Form 990, Part X</li> <li>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 FASB ASC 958 relating to these items:</li> <li>a Revenue included on Form 990, Part VIII, line 1</li> <li>Assets included in Form 990, Part VIII, line 1</li> <li>Assets included in Form 990, Part VIII, line 1</li> <li>Assets included in Form 990, Part VIII, line 1</li> <li>Assets included in Form 990, Part VIII, line 1</li> <li>Assets included in Form 990, Part X</li> </ul></li></ul>	Parl					er Similaı	<sup>•</sup> Assets.
<ul> <li>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.</li> <li>b If the organization elected, as permitted under FASB 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: <ul> <li>(i) Revenue included on Form 990, Part VIII, line 1</li> <li>(ii) Assets included in Form 990, Part X</li> <li>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 FASB ASC 958 relating to these items:</li> <li>a Revenue included on Form 990, Part X</li> <li>b Assets included in Form 990, Part X</li> </ul></li></ul>		•	<u> </u>				
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<ul> <li>provide the following amounts relating to these items:</li> <li>(i) Revenue included on Form 990, Part VIII, line 1</li></ul>	5						
<ul> <li>(ii) Assets included in Form 990, Part X.</li> <li>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 FASB ASC 958 relating to these items:</li> <li>a Revenue included on Form 990, Part VIII, line 1</li> <li>b Assets included in Form 990, Part X</li> <li>b Assets included in Form 990, Part X</li> </ul>		provide the fol	lowing amounts relating to these item	S:			
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following amounts required to be reported under FASB ASC 958 relating to these items:         a         Revenue included on Form 990, Part VIII, line 1         b       Assets included in Form 990, Part X         S		(ii) Assets incl	uded in Form 990, Part X			🕨	\$
a       Revenue included on Form 990, Part VIII, line 1       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       <	2					ets for fina	ncial gain, provide the
b Assets included in Form 990, Part X	-					•	¢
							Ψ\$

Schedule D (Form 990) 2019 Page 2 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 make significant use of its collection items (check all that apply): d 🗌 Loan or exchange program а Public exhibition e 🗌 Other Scholarly research b **c** Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part 4 XIII. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar 5 🗌 Yes 🗌 No assets to be sold to raise funds rather than to be maintained as part of the organization's collection? 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. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not 1a Yes No If "Yes," explain the arrangement in Part XIII and complete the following table: b Amount c Beginning balance . . . . . . 1c **d** Additions during the year 1d e Distributions during the year . . . 1e 1f f Ending balance . . . . . . . . . 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? No No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on 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 . . . b Contributions . . . . . . С Net investment earnings, gains, and losses . . . . . . . . . . d Grants or scholarships . . . . Other expenditures for facilities and е programs . . . . . . . . . f Administrative expenses . . . . g End of year balance . . . . . Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: 2 a Board designated or quasi-endowment >\_\_\_\_% b Permanent endowment ►\_\_\_\_\_ c Term endowment ►\_\_\_\_\_9 % 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 Yes No organization by: 3a(i) (ii) Related organizations 3a(ii) **b** If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? . . . 3b Describe in Part XIII the intended uses of the organization's endowment funds. 4 Land, Buildings, and Equipment. Part VI 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 (b) Cost or other basis (c) Accumulated (d) Book value depreciation (other) (investment) **1a** Land . . . . . . . . . . . b Buildings . . . . . c Leasehold improvements . . . . 73,096 26,451 d Equipment . . . . . . . 46.645 Other е Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) . ►

Schedule D (Form 990) 2019

Part VII	rm 990) 2019			Page 3
	Investments—Other Securities.	m 000 Dort IV line	11b See Form	000 Dort V line 10
	Complete if the organization answered "Yes" on For	I		
	<ul> <li>(a) Description of security or category         (including name of security)     </li> </ul>	(b) Book value		nod of valuation: -of-year market value
(1) Financial	derivatives			
• •	eld equity interests			
(A)	******			
(B)				
(C)				
(D)				
(E)				
(F)	***************************************			
(G)	***************************************			
(H)				
Total. (Colui	mn (b) must equal Form 990, Part X, col. (B) line 12.)  🕨			
Part VIII	Investments—Program Related.			
	Complete if the organization answered "Yes" on For	m 990, Part IV, line	11c. See Form	990, Part X, line 13.
	(a) Description of investment	(b) Book value		nod of valuation:
			Cost or end	of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col. (B) line 13.) . ►			
Part IX	Other Assets.			
	Complete if the organization answered "Yes" on For	m 990, Part IV, line	11d. See Form	
(4) 5 00	(a) Description			(b) Book value
	0 Part X line 15	namiaaa in Canava Vi	atu ana anal	
(3) New Dell	esents rental agreement guarantee deposits for FIND's office p	remises in Geneva, vi	etham and	238,765
(4)				
(5)				
(5)		· · ·		
(5) (6) (7)		· · · · · · · · · · · · · · · · · · ·		
(5) (6) (7) (8)				
(5) (6) (7) (8) (9)	nn (b) must equal Form 990. Part X. col. (B) line 15.)			
(5) (6) (7) (8) (9) Total. (Colui	mn (b) must equal Form 990, Part X, col. (B) line 15.)			
(5) (6) (7) (8) (9)	Other Liabilities.		►	Form 990. Part X.
(5) (6) (7) (8) (9) Total. (Colui			▶	9 Form 990, Part X,
(5) (6) (7) (8) (9) Total. (Colui	Other Liabilities. Complete if the organization answered "Yes" on For		▶	
(5) (6) (7) (8) (9) Total. (Colui Part X	Other Liabilities. Complete if the organization answered "Yes" on For line 25. (a) Description of liability		▶	e Form 990, Part X, (b) Book value
(5) (6) (7) (8) (9) Total. (Colui Part X 1. (1) Federal in	Other Liabilities. Complete if the organization answered "Yes" on For line 25. (a) Description of liability		▶	
(5) (6) (7) (8) (9) Total. (Colui Part X 1. (1) Federal in (2)	Other Liabilities. Complete if the organization answered "Yes" on For line 25. (a) Description of liability		▶	
(5) (6) (7) (8) (9) <b>Total.</b> (Colui <b>Part X</b> <b>1.</b> (1) Federal in (2) (3)	Other Liabilities. Complete if the organization answered "Yes" on For line 25. (a) Description of liability		▶ 11e or 11f. See	
(5) (6) (7) (8) (9) <b>Total.</b> (Coluit <b>Part X</b> <b>1.</b> (1) Federal in (2) (3) (4)	Other Liabilities. Complete if the organization answered "Yes" on For line 25. (a) Description of liability		▶ 11e or 11f. See	
(5) (6) (7) (8) (9) <b>Total.</b> (Colui <b>Part X</b> <b>1.</b> (1) Federal in (2) (3) (4) (5)	Other Liabilities. Complete if the organization answered "Yes" on For line 25. (a) Description of liability		▶ 11e or 11f. See	
(5) (6) (7) (8) (9) <b>Total.</b> (Colui <b>Part X</b> <b>1.</b> (1) Federal in (2) (3) (4) (5) (6)	Other Liabilities. Complete if the organization answered "Yes" on For line 25. (a) Description of liability		▶ 11e or 11f. See	
(5) (6) (7) (8) (9) <b>Total.</b> (Colui <b>Part X</b> 1. (1) Federal in (2) (3) (4) (5) (6) (7)	Other Liabilities. Complete if the organization answered "Yes" on For line 25. (a) Description of liability		▶ 11e or 11f. See	
(5) (6) (7) (8) (9) <b>Total.</b> (Colui <b>Part X</b> <b>1.</b> (1) Federal in (2) (3) (4) (5) (6) (7) (8)	Other Liabilities. Complete if the organization answered "Yes" on For line 25. (a) Description of liability		▶ 11e or 11f. See	
(5) (6) (7) (8) (9) <b>Total.</b> (Colui <b>Part X</b> <b>1.</b> (1) Federal in (2) (3) (4) (5) (6) (7) (8) (9)	Other Liabilities. Complete if the organization answered "Yes" on For line 25. (a) Description of liability		►	
(5) (6) (7) (8) (9) Total. (Colui Part X 1. (1) Federal in (2) (3) (4) (5) (6) (7) (8) (9) Total. (Colui	Other Liabilities. Complete if the organization answered "Yes" on For line 25. (a) Description of liability come taxes	· · · · · · · ·		(b) Book value

Schedule D (Form 990) 2019

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.				
				FC 741 201
1	Total revenue, gains, and other support per audited financial statements		1	56,741,381
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	_	
е	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:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		5	56,741,381
Part			per Return.	
<u> </u>	Complete if the organization answered "Yes" on Form 990,			F0 000 400
1	Total expenses and losses per audited financial statements	· · · · · · · · ·	1	56,266,482
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines <b>2a</b> through <b>2d</b>		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines <b>4a</b> and <b>4b</b>		4c	
5	Total expenses. Add lines 3 and 4c. <i>(This must equal Form 990, Part I, lir</i> XIII Supplemental Information.	ne 18.)	5	56,266,482
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a ar XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part			e 4; Part X, line

Schedule D (Form 990) 2019 Page 2					
Part XIII	Supplemental Information (continued)				
		***************************************			
		***************************************			
		,			

Schedule D (Form 990) 2019

SCH	EDULE F	State	ement of	· Activitie	s Outside the Uni	ted States	0	MB No. 1545-0047
(For	n 990)				ed "Yes" on Form 990, Part I		6.	2019
Depart	ment of the Treasury	•	Ŭ	► Atta	ich to Form 990.		0	pen to Public
Interna	Revenue Service	▶ (	io to www.irs.	.gov/Form9901	or instructions and the latest			entification number
	of the organization dation for Innova	tive New Diagn	ostics					3-0407553
Par		I <b>Informatior</b> ), Part IV, line		ies Outside	the United States. Com	plete if the organ	nization ar	nswered "Yes" on
1		ce, the grante	es' eligibility	for the gran	cords to substantiate the a ts or assistance, and the s			🗹 Yes 🗌 No
2	For grantmak outside the Ur		in Part V the	e organization	's procedures for monitorir	ng the use of its g	jrants and	d other assistance
3	Activities per F	Region. (The fo	llowing Part	I, line 3 table o	can be duplicated if addition	nal space is neede	ed.)	
	(a) Region	1	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed a program ser describe specific service(s) in the	vice, type of	(f) Total expenditures for and investments in the region
(1)	Sub Saharan Afr	ica	2	4	Program Services	Laboratory streng	thening	580,446
(2)						evaluation work		
(3)	South Asia		1	82	Program Services	Laboratory streng	Ithening	11,722,192
(4)						evaluation work		
(5)	East Asia and Pa	ocific	1	2	Program Services	Laboratory streng	Ithening	61,495
(6)						evaluation work		
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)			·····					
(16)								
(17)								
3a b		continuation	4	88				12,364,133
с			4	88				12,364,133

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

Cat. No. 50082W

Schedule F (Form 990) 2019

Schedule F (Form 990) 2019 Part II Grants a Part IV Ii	and Other A line 15 for a	Assistance to Organs ov recipient who re	m 980) 2019 Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization Part IV line 15 for any recipient who received more than \$5 000 Part II can be dunlicated if additional snace is needed	es Outside the		uplete if the organ	Complete if the organization answered "Yes" if additional snare is needed	Page <b>2</b> Yes" on Form 990,
1 (a) Name of organization	( <b>b</b> ) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	<ul> <li>(i) Method of valuation (book, FMV, appraisal, other)</li> </ul>
(u)		C & South Asia	Diagnostics	1,729,963	Electr.fund transfer	N/A	N/A	N/A
( <b>2</b> )		E&W Asia &Pacific	Diagnostics	2,891,936	2,891,936 Electr.fund transfer	NIA	N/A	N/A
(3)		Europe	Diagnostics	8,851,152	8,851,152 Electr.fund transfer	N/A	N/A	N/A
(4)		N. America (Ex US)	Diagnostics	400,840	400,840 Electr.fund transfer	N/A	N/A N/A	N/A
(5)		South America	Diagnostics	439,397	439,397 Electr.fund transfer	N/A	N/A N/A	N/A
( <b>6</b> )		Sub Saharan Africa	Diagnostics	2,431,588	2,431,588 Electr.fund transfer	N/A N/A	N/A	N/A
<u>ل</u>								
(8)								
(6)								
(10)								
(LI)		•						
(12)								
(13)								
(14)								
(15)								
(16)								
2 Enter total nui by the IRS, or	Imber of recipie	ent organizations list grantee or counsel h	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	gnized as charities 501(c)(3) equivaler	s by the foreign countr ncv letter	y, recognized as ta	tx-exempt	108
3 Enter total nui	imber of other (	Enter total number of other organizations or entities	ties	•	· · · ·	· · · ·	•	192
							Sc	Schedule F (Form 990) 2019

Schedule F (Form 990) 2019

Part III Grants and Other Assistance to Individuals Outside Part III can be duplicated if additional space is needed.	Assistance to Individ cated if additional spa	l <b>uals Outside t</b> l tce is needed.	he United States	s. Complete if the	organization ansv	Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.	90, Part IV, line 16.
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	<b>(e)</b> Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(2)							
(8)							
(6)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
. (18)							
						Sc	Schedule F (Form 990) 2019

Schedule F (Form 990) 2019

Part IV **Foreign Forms** Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," 1 the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign 2 Yes ✓ No Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may 2 be required to separately file Form 3520. Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990) Yes ✓ No Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," 3 the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471) Yes ✓ No 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621) Yes ✓ No Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," 5 the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865) Yes ✓ No

6 Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)... Yes V No

Schedule F (Form 990) 2019

## Page 4

Schedule F (F	Form 990) 2019 Page <b>5</b>
Part V	Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.
Contracts	are given for research and development of new tools for the diagnosis of infectious diseases. Except for the initial advance,
payments	are conditional upon achievement of milestones or deliverables through the period of the contract as
evidenced	in contractually specified reports.
Part 1, Col	umn F - all expenditures are reported under the accrual accounting method.
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SCHEDULE I (Form 990)		Grants and Governments omplete if the organ	Other Assis , and Individ nization answered "	tance to Org uals in the L Yes" on 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.	, S	OMB No. 1545-0047 2019
Department of the Treasury Internal Revenue Service		► Go to M	<ul> <li>Attach to Form 990.</li> <li>Go to www.irs.gov/Form990 for the latest information.</li> </ul>	Form 990. 90 for the latest info	ormation.		Open to Public Inspection
Name of the organization Foundation for Innovative New Diarmostics	tive New Diagnostics					Employe	Employer identification number 980407553
Part General	General Information on Grants and Assistance	Assistance					
1 Does the orga the selection o	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?	stantiate the amou or assistance?	int of the grants or	assistance, the g	rantees' eligibility	for the grants or assistanc	e, and · · · ☑ Yes  □ No
2 Describe in Pa	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	es for monitoring t	the use of grant fu	nds in the United			
Part II Grants a Part IV, I	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.	mestic Organiz eceived more th	ations and Dorr an \$5,000. Part	lestic Governm	ents. Complete ated if additional	if the organization answ space is needed.	/ered "Yes" on Form 990,
<b>1</b> (a) Name and address of organization or government	s of organization (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) Please see attached excel t speadsheet	hed excel t			Not applicable	Not applicable - no non cash	contracts	
(2) US Form 990 Schedule i part 2	nedule i part 2			Total awards	\$3,679,749.66		
(3)							
(4)							
(5)							
(9)							
(2)							
(8)							
(6)							
(10)							
(11)							
(12)							
2 Enter total nur 3 Enter total nur	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table	ernment organiza	tions listed in the	ine 1 table	· · ·	· · · · · · · · · · · · · · · · · · ·	. <b>*</b> 5 . <b>*</b> 21
For Paperwork Reduct	For Paperwork Reduction Act Notice, see the Instructions for Form	s for Form 990.		Ö	Cat. No. 50055P		Schedule I (Form 990) (2019)

Part IV, line 22.	(f) Description of noncash assistance								nal information.			, ,			Schedule I (Form 990) (2019)
Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. is needed.	(e) Method of valuation (book, FMV, appraisal, other)								1 (b); and any other additic						
e organization answ	(d) Amount of noncash assistance								ne 2; Part III, columr	****					
<b>als.</b> Complete if the J.	(c) Amount of cash grant								equired in Part I, lii		 3 4 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3				
omestic Individua al space is needeo	(b) Number of recipients								e the information r						
Schedule I (Form 990) (2019) Part III Grants and Other Assistance to Domestic Individual Part III can be duplicated if additional space is needed.	(a) Type of grant or assistance								Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.						
Schedule I (Fc Part III		F	2	r	4	ນ	9	7	Part IV						

US FORM 990- Schedule I Part 2 (TIN 98-0407553)

# NAME AND ADDRESS OF ORGANISATION IRC section	if applicable Am	ount of cash grant	Purpose of grant and assistance
1 Becton, Dickinson & company- 1 Becton Drive, Franklin Lakes NJ07417 USA		100,000.00	Imaging of Authentic samples and Staff training
2 CEPHEID - Sunnyvale CA 94085 USA		700,000.00	inst 2, Development of test
3 CHAI -Clinton Health Access Initiation Inc, - 383 Dorchester Avenue, suite 400 Boston, Ma, USA 02127)	501 C (3)	91,605.15	Establishment and implementation of IPAQT (Initiative for Promoting Affordable and Quality TB Tests) in Pakistan.
4 CHEMBIO -3661 Horseblock Road Medford NY 11763 USA.		15,000.00	Test Elisa
5 Diagnostic Consulting Network 6354 Corte Del Abeto, Carlsbad, CA 92011,		1,321,239.35	Development of diagnotic tests
6 Drugs & Diagnostics for Tropical Diseases 4898 Ronson Ct, San Diego, CA 92111		304,400.00	Development and commercialisation of diagnotic tests
7 Johns Hopkins University 733 N.Broadway, Baltimore Maryland 21205-1832 USA	501 C (3)	20,831.84	FIND AFI Study
8 LUMOS -Lumos Diagnostics Inc, 2724 Loker Ave. Carlsbad, CA 92011 USA		144,109.55	LAM POC technology assessment
9 MMU, 201 S.Division, Suite 200, ANN ARBOR, Michigan 48104		68,689.00	Assessment of the use and impact of a molecular identification assay in the diagnosis and management of bloodstream infections in healthcare settings in low- and middle- income countries
10 SD - MAY BE Meso Scale Diagnostics LLC 1601 Research Boulevard,Rockville,Maryland 20850		164,447.84	Managing testing activities
11 National Jewish Health 1400 Jackson Street, Denver, CO 80206	501 C (3)	19,600.00	Quality control, extraction and shipment of glycerol and genomic DNA
12 OpenClinica LLC, 460 Totten Pond Road, Suite 200, Waltham, MA 02451 , Waltham, US		15,810.00	Clinical data management, storage and provision of electronic data capture tools
13 Rutgers, The State University of 65 Davidson Road - Room 306, Piscataway, New Jersey,08854-5602, Piscataway, US	501 C (3)	45,750.00	TB diagnostics including sample preparation and novel molecular tests for diagnosis
14 Sachin Silva, 24 Peabody Terrace Apt 1401, US Cambridge MA 02138		47,150.00	Gather information on the use of molecular tools for Chagas diagnosis in endemic coutries, LMIC diagnostics development and manufacturing landscape
15 TAG - 90 Broad Street Suite 2503 NY		75,467.49	Outline and slide deck of the Activist Guide on HCV Diagnostics
16 UCSD -9500 Gilman 1401 Drive MC0602 LA JOLLA		66,249.00	Validation trialing and implementation of next generation sequencing rapid drug susceptibility testing
17 UPCH	501 C (3)	99,984.99	Clinical trial
18 VEEVA - 4280 Hacienda Drive US Pleasanton CA 94588		7,963.16	Software provision and data storage
19 Vitalant Research Institute, 270 Masonic Avenue, San Francisco, CA 94118-4417		63,591.47	Collection of samples and distribution of samplers including logistical support.
20 Wolf Greenfield and Sacks P.C. 600 Atlantic Avenue, MA-02210-2206, BOSTON, US		29,443.50	Intellectual property advisory relating to freedom to operate study
21 ZeptoMetrix 872 Main Street, NY 14202 Buffalo, USA		278,417.32	Storage of specimen samples
Grand Total		3,679,749.66	

## Question 2

Question z	
Total number of 501 (c)(3)	and government organisations

Question 3 Total number of organisations 5

21

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Section references are to the Internal Revenue Code unless otherwise noted.

## **General Instructions**

Future developments. For the latest information about developments related to Schedule I (Form 990), such as legislation enacted after the schedule was published, go to www.irs.gov/Form990.

Note. Terms in **bold** are defined in the *Glossary* of the Instructions for Form 990.

#### Purpose of Schedule

Schedule I (Form 990) is used by an organization that files Form 990 to provide information on grants and other assistance made by the filing organization during the tax year to domestic organizations, domestic governments, and domestic individuals. Report activities conducted by the organization directly. Also, report activities conducted by the organization indirectly through a disregarded entity or a joint venture treated as a partnership.

Grants and other assistance include awards, prizes, contributions, noncash assistance, cash allocations, stipends, scholarships, fellowships, research grants, and similar payments and distributions made by the organization during the tax year. For purposes of Schedule I, grants and other assistance don't include:

• Salaries or other compensation to employees, or payments to independent contractors if the primary purpose of such payments is to serve the direct and immediate needs of the organization (such as legal, accounting, or fundraising services).

• The payment of any benefit by a 501(c)(9) voluntary employees' beneficiary association (VEBA) to employees of a sponsoring organization or contributing employer, if such payment is made under the terms of the VEBA trust and in compliance with section 505.

• Grants to affiliates that aren't organized as legal entities separate from the filing organization, or payments made to branch offices, accounts, or employees of the organization located in the **United States**.

A domestic organization includes a corporation or partnership created or organized in the United States or under the law of the United States or of any state or possession. A trust is a domestic organization if a court within the United States or a U.S. possession is able to exercise primary supervision over the administration of the trust, and one or more U.S. persons (or persons in U.S. possessions) have the authority to control all substantial decisions of the trust.

A domestic government is a state, a U.S. possession, a political subdivision of a state or U.S. possession, the United States, or the District of Columbia. A grant to a U.S. government agency must be included on this schedule regardless of where the agency is located or operated.

A domestic individual is a person, including a foreign citizen, who lives or resides in the United States (or a U.S. possession) and not outside of the United States (or a U.S. possession). Parts II and III of this schedule may be duplicated to list additional grantees (Part II) or types of grants/assistance (Part III) that don't fit on the first page of these parts. Number each page of each part.

Don't report on this schedule foreign grants or assistance, including grants or assistance provided to **domestic organizations**, **domestic governments**, or **domestic individuals** for the purpose of providing grants or other assistance to a designated foreign organization, foreign government, or foreign individual. Instead, report them on Schedule F (Form 990), Statement of Activities Outside the United States.

## Who Must File

An organization that answered "Yes" on Form 990, Part IV, *Checklist of Required Schedules*, line 21 or 22, must complete Part I and either Part II or Part III of this schedule and attach it to Form 990.

If an organization isn't required to file Form 990 but chooses to do so, it must file a complete return and provide all of the information requested, including the required schedules.

## **Specific Instructions**

## Part I. General Information on Grants and Assistance

Complete this part if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Lines 1 and 2. On line 1, indicate "Yes" or "No" regarding whether the organization maintains records to substantiate amounts, eligibility, and selection criteria used for grants. In general terms, describe how the organization monitors its grants to ensure that such grants are used for proper purposes and aren't otherwise diverted from the intended use. For example, the organization can describe the periodic reports required or field investigations conducted. Use Part IV for the organization's narrative response to line 2.

## Part II. Grants and Other Assistance to Domestic Organizations and Domestic Governments

Line 1. Complete line 1 if the organization answered "Yes" on Form 990, Part IV, line 21. A "Yes" response means that the organization reported more than \$5,000 on Form 990, Part IX, line 1, column (A). Enter information only for each recipient **domestic organization** or **domestic government** that received more than \$5,000 aggregate of grants or assistance from the organization during the tax year.

Enter the details of each organization or entity on a separate line of Part II. If there are more organizations or entities to report in Part II than space available, report the additional organizations or entities on duplicate copies of Part II. Use as many duplicate copies as needed, and number each page. Use Part IV if additional space is needed for descriptions of particular column entries. **Column (a).** Enter the full legal name and mailing address of each recipient organization or government entity.

*Column (b).* Enter the employer identification number (EIN) of the grant recipient.

**Column (c).** Enter the section of the Internal Revenue Code under which the organization receiving the assistance is tax exempt, if applicable (for example, a school described in section 501(c)(3) or a social club described in section 501(c)(7)). If a recipient is a government entity, enter the name of the government entity. If a recipient is neither a tax-exempt nor a government entity, leave column (c) blank.

**Column (d).** Enter the total dollar amount of cash grants to each recipient organization or entity for the tax year. Cash grants include grants and allocations paid by cash, check, money order, electronic fund or wire transfer, and other charges against funds on deposit at a financial institution.

*Columns (e) and (f).* Enter the fair market value of noncash property. Describe the method of valuation. Report property with a readily determinable market value (for example, market quotations for securities) at its fair market value. For marketable securities registered and listed on a recognized securities exchange, measure market value on the date the property is distributed to the grantee by the average of the highest and lowest quoted selling prices or the average between the bona fide bid and asked prices. When fair market value can't be readily determined, use an appraised or estimated value.

**Column (g).** For noncash property or assistance, enter a description of the property or assistance. List all that apply. Examples of noncash assistance include medical supplies or equipment, pharmaceuticals, blankets, and books or other educational supplies.

*Column (h).* Describe the purpose or ultimate use of the grant funds or other assistance. Don't use general terms, such as charitable, educational, religious, or scientific. Use more specific descriptions, such as general support, payments for nursing services, or laboratory construction. Enter the type of assistance, such as medical, dental, or free care for indigent hospital patients. In the case of disaster assistance, include a description of the disaster and the assistance provided (for example, "Food, shelter, and clothing for Organization A's assistance to victims of Colorado wildfires"). Use Part IV if additional space is needed for descriptions.

TIP

If the organization checks "Accrual" on Form 990, Part XII, line 1; follows **Financial** Accounting Standards Board

Accounting Standards Codification (FASB ASC 958) (formerly "SFAS 116") (see instructions for Form 990, Part IX); and makes a grant during the tax year to be paid in future years to a domestic organization or domestic government, it should report the grant's present value in Part II, line 1, column (d) or (e), and report any accruals of present value increments in future years. Line 2. Add the number of recipient organizations listed on Schedule I (Form 990), Part II, line 1, that (a) have been recognized by the Internal Revenue Service as exempt from federal income tax as described in section 501(c)(3); (b) are churches, including synagogues, temples, and mosques; (c) are integrated auxiliaries of churches and conventions or association of churches; or (d) are **domestic governments**. Enter the total.

Line 3. Add the number of recipient organizations listed on Schedule I (Form 990), Part II, line 1, that aren't described on line 2. This number should include both organizations that aren't tax-exempt and organizations that are tax-exempt under section 501(c) but not section 501(c)(3).

#### Part III. Grants and Other Assistance to Domestic Individuals

Complete Part III if the organization answered "Yes" on Form 990, Part IV, line 22. A "Yes" response means that the organization reported more than \$5,000 on Form 990, Part IX, line 2, column (A).

Enter information for grants and other assistance made to or for the benefit of individual recipients. Don't complete Part III for grants or assistance provided to individuals through another organization or entity, unless the grant or assistance is earmarked by the filing organization for the benefit of one or more specific domestic individuals. Instead. complete Part II. earlier. For example, report a payment to a hospital designated to cover the medical expenses of particular domestic individuals in Part III and report a contribution to a hospital designated to provide some service to the general public or to unspecified domestic charity patients in Part II

Enter the details of each type of assistance to individuals on a separate line of Part III. If there are more types of assistance than space available, report the types of assistance on duplicate copies of Part III. Use as many duplicate copies as needed, and number each page. Use Part IV if additional space is needed for descriptions of particular column entries.

**Column (a).** Specify type(s) of assistance provided, or describe the purpose or use of grant funds. Don't use general terms, such as charitable, educational, religious, or scientific. Use more specific descriptions, such as scholarships for students attending a particular school; provision of books or other educational supplies; food, clothing, and shelter for indigents, or direct cash assistance to indigents; etc. In the case of specific disaster assistance, include a description of the type of assistance provided and identify the disaster (for example, "Food, shelter, and clothing for immediate relief for victims of Colorado wildfires").

**Column (b).** Enter the number of recipients for each type of assistance. If the organization is unable to determine the actual number, provide an estimate of the number. Explain in Part IV how the organization arrived at the estimate.

**Column (c).** Enter the aggregate dollar amount of cash grants for each type of grant or assistance. Cash grants include grants and allocations paid by cash, check, money order, electronic fund or wire transfer, and other charges against funds on deposit at a financial institution.

Columns (d) and (e). Enter the fair market value of noncash property. Describe the method of valuation. Report property with a readily determinable market value (for example, market quotations for securities) at its fair market value. For marketable securities registered and listed on a recognized securities exchange, measure market value by the average of the highest and lowest quoted selling prices or the average between the bona fide bid and asked prices, on the date the property is distributed to the grantee. When fair market value can't be readily determined, use an appraised or estimated value.

**Column (f).** For noncash grants or assistance, enter descriptions of property. List all that apply. Examples of noncash assistance include medical supplies or equipment, pharmaceuticals, blankets, and books or other educational supplies.



If the organization checks "Accrual" on Form 990, Part XII, line 1; follows **Financial** Accounting Standards Board

Accounting Standards Codification (FASB ASC 958) (formerly "SFAS 116") (see instructions for Form 990, Part IX); and makes a grant during the tax year to be paid in future years to a domestic individual, it should report the grant's present value in Part III, column (c) or (d), and report any accruals of present value increments in future years.

## Part IV. Supplemental Information

Use Part IV to provide narrative information required in Part I, line 2, regarding monitoring of funds, and in Part III, column (b), regarding how the organization estimated the number of recipients for each type of grant or assistance. Also use Part IV to provide other narrative explanations and descriptions, as needed. Identify the specific part and line(s) that the response supports. Part IV can be duplicated if more space is needed.

SCH	EDULE J	Compo	nsation Informatio	<b></b>	OME	3 No. 1	545-00	047
(Form	990)	For certain Officers, Dire	ctors, Trustees, Key Employ		G	20	10	) )
		Co ► Complete if the organizati	mpensated Employees on answered "Yes" on Form	990, Part IV, line 23.		en to		, Strassi
	ent of the Treasury Revenue Service	Go to www.irs.gov/Form	Attach to Form 990. 990 for instructions and the	latest information.		nspe		
_	f the organization			Employer identif			11. January 18.	
-		tive New Diagnostics			98040755	3		
Pari	Questic	ons Regarding Compensation	/				<u>,                                     </u>	
19	Check the ann	propriate box(es) if the organization pro	ovided any of the following :	to or for a person listed o	n Form		Yes	No
14		ection A, line 1a. Complete Part III to p			in ronn			
	First-class	or charter travel	Housing allowance or I	residence for personal us	e			
	✓ Travel for c	•	Payments for business	•	e			
		nification and gross-up payments	Health or social club d		-			
	Discretiona	ry spending account	Personal services (suc	h as maid, chauffeur, che	t)			
b	If any of the l	ooxes on line 1a are checked, did t	he organization follow a w	ritten policy regarding pa	avment			
		ment or provision of all of the ex					FI SCOULDES	DESIGN SIDE
	explain .					1b	✓	
•					1000000			
2		nization require substantiation pric tees, and officers, including the CE						
	•					2	✓	
3		n, if any, of the following the organiza						
		CEO/Executive Director. Check all the			dbya			
		zation to establish compensation of t		-				
	•	tion committee nt compensation consultant	<ul> <li>✓ Written employment co</li> <li>✓ Compensation survey</li> </ul>					
		of other organizations	Approval by the board	-	tee			
		-						
4		ar, did any person listed on Form 990	, Part VII, Section A, line 1a	a, with respect to the filing	)			
_	-	r a related organization:	l noviment?			10		
a b		erance payment or change-of-contro or receive payment from, a supplem			•••	4a 4b		1
č	•	or receive payment from, an equity-l	•	•		4c		$\overline{\checkmark}$
		of lines 4a-c, list the persons and p			11.			
5		<b>501(c)(3), 501(c)(4), and 501(c)(29)</b> c listed on Form 990, Part VII, Sect			ie anv			
5		contingent on the revenues of:		rganization pay of acci				
а		ion?				5a		✓
b		ganization?			[	5b		✓
	If "Yes" on line	e 5a or 5b, describe in Part III.						
6	For persons	listed on Form 990, Part VII, Sect	ion A line ta did the o	rganization pay or accr	ie anv			
U		contingent on the net earnings of:		rganization pay of abor	ac any			
а	-	ion?				6a		✓
b		ganization?				6b	-	executive of the
	If "Yes" on line	e 6a or 6b, describe in Part III.						
7	For persons I	isted on Form 990, Part VII, Section	on A line 1a did the ora	anization provide any p	onfixed			
•		described on lines 5 and 6? If "Yes,"				7	✓	
8		ounts reported on Form 990, Part VII,						
		contract exception described in	-					
	in Part III .	<i>.</i>				8		<b>√</b>
9	lf "Yes" on li	ne 8, did the organization also fo	llow the rebuttable presur	notion procedure descri	bed in			
J						9		
For Pa		tion Act Notice, see the Instructions for		Cat. No. 50053T	Schedule		rm 990	) 2019

For each individual whose compens	sation	must be reported o	on Schedule J. repc	ort compensation fr	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	n row (i) and from	related organization	ns. described in the
instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.	iny inc	lividuals that aren't	listed on Form 990,	Part VII.				
Note: The sum of columns (B)(i)-(iii) for each listed individual must	or each	Iisted individual mu		ount of Form 990, P <sub>i</sub>	equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual	a, applicable columi	(D) and (E) amount:	s for that individual.
		(B) Breakdown of	f W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontavahla		(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
Catharina Boehme,	(1)	318,982	51,050		58,317	7,246	435,595	
1 CEO	Ē			****				
Joseph Ndung'u	(i)	308,892			67,182	19,832	395,906	
2 Head of NTD Programme & FIND	(II)							
Rangarajan Sampath <sub>3</sub> Chief Scientific Officer	e e	271,306	17,868		60,239	17,284	366,697	
Cassandra Kelly Cirino	( <u>)</u>	208,639	13,336		45,680	11,127	278,782	
4 Director of Emerging Threat	(II)					******	**********	*******************
Zachary Katz	(i)	214,836	9,358		38,214	11,492	273,900	
<sub>5</sub> Chief Access Officer	(ii)							
Louisa Chaubert	(i)	197,198	16,792		44,679	6,032	264,701	
6 Director of Finance	(ii)							
Jon Bastow	(I)	209,146			44,877	10,548	264,571	
$_7$ Director of Business Dev.	(ii)							
Sharon Saacks	9	189,824	8,073		41,289	9,916	249,102	
8 Director of Operations	€							
Stefano Ongarello	9	164,752	13,613		29,057	8,933	216,355	
g Head of Data Services & Biobank	<b>(()</b>							
Sylvain Bieler	e	176,804		*****	30,361	***************	207,165	*****
10 Senior Project Manager	(II)							
Elena Ivanova	(E)	155,770	20,420		28,314		204,504	
Sahine Dittrich		160 125	6 802		28.481	8 467	203 975	
12 Head of Malaria & Fever	: (2)			************				
Anita Suresh	Ξ	167,676			28,362	5,524	201,562	
<sub>13</sub> Head of Sequencing	€		********	****				
Béatrice Mouton	Θ	150,542	12,354		34,000		196,896	
<sub>14</sub> Head of Human Resources	(			, , , , , , , , , , , , , , , , , , ,				
Samuel Schumacher	Ξ	156,312	12,337		27,399		196,048	
15 Evidence & Policy Lead	(ii)							
Sarah-Jane Loveday	0	150,496	9,572		26,708	7,992	194,768	
<sub>16</sub> Head of Communications	(ii)							
							Sch	Schedule J (Form 990) 2019

Page 2

Schedule J (Form 990) 2019

e: The sum of columns (B)(ŋ–(iii) for each list (A) Name and Title Pamela Nabeta Senior Manager Quality (i) Heidi Albert (i) Heidi Albert (i) Head of South Africa FIND (i) Hrancesco Marinucci, Head of (i) HCV and HIV (i) HCV and HIV (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i) (i		C compensation C compensation (iii) Other reportable compensation	(C) Retirement and other deferred compensation 1,832 8,127	1a, applicable colum         (D) Nontaxable         benefits         9,271	equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.       /-2 and/or 1099-MISC compensation       (C) Retirement and (D) Nontaxable (D) and (E) amounts for that individual.         /-2 and/or 1099-MISC compensation       (D) Nontaxable (D)	(F) Compensation (F) Compensation in column (B) reported as deferred on prior Form 990
(A) Name and Title         Pamela Nabeta       (i)         Pamela Nabeta       (i)         Senior Manager Quality       (i)         Heidi Albert       (i)         Head of South Africa FIND       (i)         Francesco Marinucci, Head of       (i)         HCV and HIV       (i)         HCV and HIV       (i)         (ii)       (i)         (iii)       (i)         (iii)       (i)         (i)       (i)         (i)       (i)         (ii)       (i)         (iii)       (i)         (i)       (i)         (i)       (i)         (i)       (i)         (i)       (i)         (ii)       (i)         (i)       (i)         (ii)       (i)         (ii)       (i)         (ii)       (ii)	n of W-2 and/or 1099-MIS (ii) Bonus & incentive compensation 30 30 30 30 5,906	6C compensation (iii) Other compensation compensation	(C) Retirement and other deferred compensation 1,832 8,127	(D) Nontaxat benefits	(E) Total of columns (B)(h-(D) 189,476 173,648 33,678 	(F) Compensation in column (B) reported as deferred on prior Form 990
(A) Name and Title     (0) Bas       Pamela Nabeta     (1)       Pamela Nabeta     (1)       Senior Manager Quality     (1)       Heidi Albert     (1)       Head of South Africa FIND     (1)       Francesco Marinucci, Head of     (1)       HCV and HIV     (1)       HCV and HIV     (1)       HCV and HIV     (1)       Image: Comparison of the state of th	(ii) Bonus & ince compensatio		other deferred compensation 1,832 8,127	benefits	113,648 33,678 	in column (B) reported as deferred on prior Form 990
Pamela Nabeta       (1)         Senior Manager Quality       (1)         Heidi Albert       (1)         Head of South Africa FIND       (1)         Francesco Marinucci, Head of       (1)         Francesco Marinucci, Head of       (1)         HCV and HIV       (1)         HCV			27,081 1,832 8,127		189,476 173,648 33,678 	
Heidi Albert       (1)         Heidi Albert       (1)         Francesco Marinucci, Head of       (1)         HUCV and HIV       (1)         HCV and HIV       (1)         HIV       (1)         HIV       (1)         HIV       (1)         HIV       (1)         HIV	80 19		1,832 8,127		33,678	
Head of South Africa FIND (i) (i) (ii) (ii) (ii) (ii) (ii) (ii)			9,127 8,127		33,678	
Francesco Marinucci, Head of () () () () () () () () () () () () ()	8		8,127	9,271	33,678	
HCV and HIV (i)						
			**********			
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-12 (ii)						
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13 (ii)						
14 (ii)						
15 (ii)						
16 (ii)						

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# SCHEDULE M (Form 990)

# **Noncash Contributions**

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

OMB No. 1545-0047

**Open to Public** 

Inspection

Department of the Treasury Internal Revenue Service

Foundation for Innovative New Diagnostics

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

► Attach to Form 990.

Name of the organization

Employer identification number

	98-04	075	53

Pari	Types of Property				
		<b>(a)</b> Check if applicable	<b>(b)</b> Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art—Works of art				
2	Art-Historical treasures				
3	Art-Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities-Publicly traded				
10	Securities—Closely held stock .				
11	Securities—Partnership, LLC, or trust interests				
12	Securities-Miscellaneous				
13	Qualified conservation contribution—Historic structures				
14	Qualified conservation contribution—Other				
15	Real estate-Residential				
16	Real estate—Commercial				
17	Real estate-Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ► (Scientific Research)			3,848,823	
26	Other ► ()				
27	Other ► ()				
28	Other ► ( )			<u> </u>	
29	Number of Forms 8283 received which the organization completed				29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?
b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

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

30a

31

32a

1

Yes No

Schedule M (Form 990) 2019 Page 2						
Part II	<b>Supplemental Information.</b> Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.					
Non cash c	ontributions are not reported as revenue nor expenditure in the organisation's financial satements. Donations in kind are					
described i	n note 5 in the financial statements.					

Schedule M (Form 990) 2019

# **General Instructions**

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Schedule M (Form 990), such as legislation enacted after the schedule and its instructions were published, go to *www.irs.gov/Form990*.

**Note:** Terms in **bold** are defined in the *Glossary* of the Instructions for Form 990.

## Purpose of Schedule

Schedule M (Form 990) is used by an organization that files Form 990 to report the types of noncash contributions received during the year by the organization and certain information regarding such contributions. The schedule requires reporting of the quantity and the reported financial statement amount of noncash contributions received by type of property. Report noncash donated items even if sold immediately after received. Don't report noncash contributions received by the organization in a prior year. Don't report donations of services or the donated use of facilities. equipment, or materials donated.

## Who Must File

An organization that answered "Yes" to Form 990, Part IV, lines 29 or 30, must complete Schedule M (Form 990) and attach it to Form 990. This means an organization that reported more than \$25,000 of aggregate **noncash contributions** on Form 990, Part VIII, line 1g, or that during the year received **contributions** of **art**, **historical treasures**, or other similar assets, or **qualified conservation contributions**, regardless of whether it reported any revenues for such contributions in Part VIII.

If an organization isn't required to file Form 990 but chooses to do so, it must file a complete return and provide all of the information requested, including the required schedules.

# **Specific Instructions**

# Part I. Types of Property

**Column (a).** Check the box if during the year the organization received any contributions of the property type identified.

**Column (b).** For each type of property received during the year, enter the number of **contributions** or the number of items contributed, determined in accordance with the organization's recordkeeping practices. Explain in Part

Il of this schedule whether the organization is reporting the number of contributions or the number of items received, or a combination of both methods. As described below, for contributions of securities, such as publicly traded stock, treat each separate gift (rather than each share received) as an item for this purpose.

Organizations that receive contributions of books, publications, clothing, and household goods aren't required to complete column (b) for those items reported on lines 4 and 5.

**Columns (c)-(d).** In column (c), enter the revenues reported on Form 990, Part VIII, line 1g, for the appropriate property type. If none were reported, enter "0."

In column (d), describe the method used to determine the amount reported on Form 990, Part VIII, line 1g (for example, cost or selling price of the donated property, sale of comparable properties, replacement cost, opinions of experts, etc.). See Pub. 561, Determining the Value of Donated Property, for more information.

Example 1. A used car in poor condition is donated to a local high school for use by students studying car repair. A used car guide shows the dealer retail value for this type of car in poor condition is \$1,600. However, the guide shows the price for a private party sale of the car is only \$750. The fair market value of the car is considered to be \$750, which is the amount the organization reported on Form 990, Part VIII, line 1g. In column (c), the organization should enter \$750. In column (d), the organization should enter "sale of comparable properties and/or opinion of expert" as the method used to determine fair market value.

Example 2. An organization primarily receives bulk donations of clothing, household goods, and other similar items, intended for resale. Under its permitted financial reporting practices, it doesn't recognize or record revenue at the time of receipt of the contribution, but instead records such items in inventory and reports contribution revenues at the time of sale based on prior inventory turnover experience. In column (c), the organization can enter the amount that represents the total estimated amount of annual sales revenue for each type of property received under its permitted financial reporting method, and in column (d), enter "resale value or annual sales revenue" as the method of determining revenue.

Museums and other organizations that don't report contributions of **art**, **historical treasures**, and other similar items as revenue, as permitted under generally accepted accounting principles, enter "0" in column (c) and leave column (d) blank. The organization can explain in Part II that a zero amount was reported on Form 990, Part VIII, line 1g, because the museum did not capitalize its collections, as allowed under Financial Accounting Standards Board Accounting Standards Codification 958-360-25 (ASC 958-360-25) (formerly SFAS 116).

An organization that received **qualified conservation contributions** or **conservation easements** must report column (c) revenue consistent with how it reports revenue from such contributions in its books, records, and financial statements. The organization must also report revenue from such qualified conservation contributions and conservation easements consistently with how it reports such revenue in Form 990, Part VIII.

Line 1. Works of art include paintings, sculptures, prints, drawings, ceramics, antiques, decorative arts, textiles, carpets, silver, photography, film, video, installation and multimedia arts, rare books and manuscripts, historical memorabilia, and other similar objects. Works of art don't include **collectibles** reported on line 18 or taxidermy reported on line 21.

Line 2. An historical treasure is a building, structure, area, or property with recognized cultural, aesthetic, or historical value that is significant in the history, architecture, archeology, or culture of a country, state, or city.

Line 3. A contribution of a fractional interest in art is a contribution, not in trust, of an undivided portion of a donor's entire interest in a work of art. A contribution of the donor's entire interest must consist of a part of each substantial interest or right the donor owns in such work of art and must extend over the entire term of the donor's interest in the property. A gift generally is treated as a gift of an undivided portion of a donor's entire interest in property if the donee is given the right, as a tenant in common with the donor, to possession, dominion, and control of the property for a portion of each year appropriate to its interest in such property. For each work of art or item, report in column (b) the fractional interest for each year an interest in the property is received for the underlying work of art or item. See section 170(o) for special rules for fractional gifts.

Line 4. Enter information about contributions of all books and publications. Don't include rare books and manuscripts reported on line 1, collectibles reported on line 18, and archival records reported on lines 25 through 28.

Page 3

Line 5. Enter information about clothing items and household goods which were in good used condition or better. Clothing items and household goods which weren't in good used condition or better are to be reported as a separate type in "Other" beginning with line 25.

Lines 6–7. On line 6, include only contributions of motor vehicles manufactured primarily for use on public streets, roads, and highways. Don't include on lines 6 or 7 contributions of the donor's stock in trade or property held by the donor primarily for sale to customers in the ordinary course of a trade or business. The organization is required to file Form 1098-C, Contributions of Motor Vehicles, Boats, and Airplanes, with the donor and the IRS for contributions reported on these lines. See Form 990, Part V, line 7h.

Line 8. Intellectual property is any patent, copyright (other than a copyright described in section 1221(a)(3) or 1231(b)(1)(C)), trademark, trade name, trade secret, know-how, software (other than software described in section 197(e)(3)(A)(i)), or similar property. Certain **contributions** of intellectual property require the organization to file Form 8899, Notice of Income From Donated Intellectual Property, with the donor and the IRS. See Form 990, Part V, line 7g.

Line 9. Publicly traded securities means securities for which (as of the date of the contribution) market quotations are readily available on an established securities market. For each security, treat each separate gift (rather than each share received) as a contribution for this purpose. Include on this line interests in publicly traded partnerships, limited liability companies or trusts, and publicly traded corporations.

Line 10. Closely held stock means shares of stock issued by a corporation that isn't publicly traded. For each security, treat each separate gift (rather than each share received) as a contribution for this purpose.

Line 11. Enter information about contributions of interests in a partnership, limited liability company, or trust, that isn't publicly traded. For each security, treat each separate gift (rather than each share received) as a contribution for this purpose.

Line 12. Enter information about contributions of securities that aren't reported on lines 9 through 11. For each security, treat each separate gift (rather than each share received) as a contribution for this purpose. Lines 13–14. A qualified conservation contribution is a contribution of a qualified real property interest to a qualified organization exclusively for conservation purposes. A qualified real property interest means any of the following interests in real property.

1. The entire interest of the donor,

2. A remainder interest, or

3. A restriction (an easement), granted in perpetuity, on the use which may be made of the real property.

A *qualified organization* means an organization which is:

1. A governmental unit described in section 170(c)(1);

2. A publicly supported charitable organization described in sections 501(c)(3) and 170(b)(1)(A)(vi) or section 509(a)(2) (see the instructions for Parts II and III of Schedule A (Form 990 or 990-EZ)); or

3. A **supporting organization** described in sections 501(c)(3) and 509(a)(3) that is controlled by a governmental unit or a publicly supported charitable organization.

In addition, a qualified organization must have a commitment to protect the conservation purposes of a qualified conservation contribution, and have the resources to enforce those restrictions.

A conservation purpose means:

1. The preservation of land areas for outdoor recreation used by, or for the education of, the general public;

2. The protection of a relatively natural habitat of fish, wildlife, plants, or similar ecosystems;

3. The preservation of open space (including farmland and forest land) where such preservation is for the scenic enjoyment of the general public or pursuant to a clearly delineated federal, state, or local governmental conservation policy; or

4. The preservation of an historically important land area or a certified historic structure.

See section 170(h) for additional information, including special rules for the conservation purpose requirement for buildings in registered historic districts.

On line 13, enter information about contributions of a qualified real property interest that is a restriction for the exterior of a certified historic structure. A **certified historic structure** is any building or structure listed on the National Register of Historic Places as well as any building certified as being of historic significance to a registered historic district. See section 170(h)(4)(B) for special rules that apply to contributions made after August 17, 2006.

On line 14, enter information about qualified conservation contributions other than those entered on line 13. This includes **conservation easements** to preserve land areas for outdoor recreation used by, or for the education of, the general public; to protect a relatively natural habitat or ecosystem; to preserve open space; or to preserve an historically important land area.

Line 15. Enter information about contributions of residential real estate. Include information about contributions (not in trust) of a remainder interest in a personal residence which wasn't the donor's entire interest in the property. The term personal residence includes any property used by the donor as a personal residence but isn't limited to the donor's principal residence. The term personal residence also includes stock owned by the donor as a tenantstockholder in a cooperative housing corporation if the dwelling the donor is entitled to occupy as a tenantstockholder is used by the donor as a personal residence. Don't enter information about contributions of the use of facilities or property, as such contributions aren't reportable on Form 990, Part VIII.

Line 16. Enter information about contributions of commercial real estate, such as a commercial office building. Include information about contributions (not in trust) of a remainder interest in a farm which wasn't the donor's entire interest in the property. The term farm refers to land used for the production of crops, fruits, or other agricultural products, or for the maintenance of livestock. A farm includes the improvements located on the farm property.

Line 17. Enter information about real estate interests not reported on lines 15 or 16.

Line 18. Collectibles include autographs, sports memorabilia, dolls, stamps, coins, books (other than books and publications reported on line 4), gems, and jewelry (other than costume jewelry reported on line 5), but not art reported on lines 1 through 3, or historical artifacts or scientific specimens reported on lines 22 or 23.

Line 19. Enter information about food items, including food inventory contributed by corporations and other businesses.

Line 20. Enter information about drugs, medical supplies, and similar items contributed by corporations and other businesses that manufactured or distributed such items.

Line 21. Taxidermy property means any work of art that is the reproduction or preservation of an animal, in whole or in part; is prepared, stuffed, or mounted to recreate one or more characteristics of the animal; and contains a part of the body of the dead animal.

Line 22. Enter information about historical artifacts such as furniture, fixtures, textiles, and household items of an historic nature. Don't include Art reported on lines 1 through 3, or any archeological artifacts reported on line 24.

Line 23. Scientific specimens include living plant and animal specimens, natural and physical sciences specimens (such as rocks and minerals), and objects or materials that relate to, or exhibit, the methods or principles of science.

Line 24. Enter information about archeological and ethnographical artifacts, other than Art reported on lines 1 through 3, and historical artifacts reported on line 22. An archaeological artifact is any object over 250 years old and is normally discovered as a result of scientific excavation, clandestine or accidental digging for exploration on land, or under water. Ethnological artifacts are objects which are the product of a tribal or nonindustrial society, and important to the cultural heritage of a people because of its distinctive characteristics, comparative rarity, or its contribution to the knowledge of the origins, development, or history of that people.

Lines 25–28. Use lines 25 through 28 to separately report other types of property not described above or reported on previous lines. These include items that didn't satisfy specific charitable deduction requirements applicable to the contribution of such type of property, but which were contributed to the organization, such as clothing and household goods that weren't in good used or better condition, and conservation easements that the organization knows don't constitute qualified conservation contributions.

Self-created items, such as personal papers and manuscripts, including archival records, are to be listed separately as a type. Archival records are materials of any kind created or received by any person, family, or organization in the conduct of their affairs that are preserved because of the enduring value of the information they contain or as evidence of the functions and responsibilities of their creator.

Donations of items used by the organization at a charitable auction (other than goods sold by the charity at the auction, which should be reported on lines 1 through 24, as appropriate), such as food served at the event or floral centerpieces, can be reported separately on lines 25 through 28. Noncash contributions don't include donations of services or donated use of materials, equipment, or facilities, which may be reported in the narrative section of Form 990, Part III, line 4.

Line 29. Enter the number of Forms 8283, Noncash Charitable Contributions, received by the organization during the year for contributions for which the organization completed Form 8283, Part IV.

Lines 30a–30b. Answer "Yes" to line 30a if the organization received during the year a noncash contribution reportable on lines 1 through 28 for which the organization is required, by the terms of the gift or otherwise, to hold the property for at least three years from the date of the contribution and which property is not required to be used for exempt purposes for the entire holding period. An organization that answers "Yes" to line 30a must describe the arrangement in Part II.

Line 31. Answer "Yes" if the organization has a gift acceptance policy that requires the review of any nonstandard contributions. A nonstandard contribution includes a contribution of an item that isn't reasonably expected to be used to satisfy or further the organization's exempt purposes (aside from the need of such organization for income or funds) and for which (a) there is no ready market to which the organization can go to liquidate the contribution and convert it to cash, and (b) the value of the item is highly speculative or difficult to ascertain. For example, the contribution of a taxpayer's successor member interest of the type described in Notice 2007-72, 2007-36 I.R.B. 544 available at https://www.irs.gov/pub/irs-irbs/ irb07-36.pdf, is a nonstandard contribution for this purpose.

Lines 32a–32b. Answer "Yes" to line 32a if the organization hires or uses third parties or related organizations to solicit, process, or sell noncash contributions. Answer "No" if the only third party used by the organization to solicit, process, or sell noncash contributions is a broker who sells publicly traded securities received by the organization as a gift. An organization that answers "Yes" to line 32a must describe these arrangements in Part II.

Line 33. If applicable, describe in Part II why the organization didn't report revenue in column (c) for a type of property for which column (a) is checked.

# Part II. Supplemental Information

Use Part II to provide narrative information required in Part I, column (b), and Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also use Part II to provide other narrative explanations and descriptions, as needed. Identify the specific line number that the response supports. Part II can be duplicated if more space is needed.

Paperwork Reduction Act Notice. We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to give us the information. We need it to ensure that you are complying with these laws and to allow us to figure and collect the right amount of tax.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103. However, certain returns and return information of tax exempt organizations and trusts are subject to public disclosure and inspection, as provided by section 6104.

The time needed to complete and file this form will vary depending on individual circumstances. The estimated burden for tax exempt organizations filing this form is approved under OMB control number 1545-0047 and is included in the estimates shown in the instructions for their information return.

SCHEDULE O	Supplemental Information to Form 990 or 990-EZ	OMB No. 1545-0047					
(Form 990 or 990-EZ)	Complete to provide information for responses to specific questions or Form 990 or 990-EZ or to provide any additional information.	· 20 <b>19</b>					
Department of the Treasury Internal Revenue Service	Attach to Form 990 or 990-EZ.	Open to Public					
Name of the organization	Go to www.irs.gov/Form990 for the latest information.	Inspection Employer identification number					
FIND - Foundation for I	nnovative New Diagnostics	98-0407553					
1. Part III, line 4d. This I	epresents programe service activities for AMR & Outbreaks, Fever and Malaria, and	d Neglected Tropical diseases					
2. Part VI line 12c. FINI	Os conflict of interest policy requires directors, officers and key employees (as well	as other staff members to disclose					
actual or potential conflicts of interest when they arise.							
3. Part VI, line 15a. A review by an independent consultant of the CEO's remuneration package was done by the Board and forms the basis of							
written employment co	ntract.						
4. Part VI, line 15b. Ren	nuneration terms for officers and key employees are based on market rates for simi	lar positions and are					
recommended by the C	EO and for approval by Board and Compensation Committee						
5. Part VI, line 19. Upon	request FIND's governing documents (Statutes and By-Laws) Conflict of Interest p	olicy and Financial Statements are					
available for inspection	at FIND's offices in Geneva.						
For Paperwork Reduction	on Act Notice see the Instructions for Form 900 or 900-F7						

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Cat. No. 51056K

Schedule O (Form 990 or 990-EZ) (2019)

Schedule O (Form 990 or 990-EZ) (2019)	Page 2
Name of the organization	Employer identification number

Schedule O (Form 990 or 990-EZ) (2019)

## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Schedule O (Form 990 or 990-EZ), such as legislation enacted after the schedule and its instructions were published, go to www.irs.gov/Form990.

## **Purpose of Schedule**

An organization should use Schedule O (Form 990 or 990-EZ), rather than separate attachments, to provide the IRS with narrative information required for responses to specific questions on Form 990 or 990-EZ, and to explain the organization's operations or responses to various questions. It allows organizations to supplement information reported on Form 990 or 990-EZ.

Don't use Schedule O to supplement responses to questions in other schedules of the Form 990 or 990-EZ. Each of the other schedules includes a separate part for supplemental information.

## Who Must File

All organizations that file Form 990 and certain organizations that file Form 990-EZ must file Schedule O (Form 990 or 990-EZ). At a minimum, the schedule must be used to answer Form 990, Part VI, lines 11b and 19. If an organization isn't required to file Form 990 or 990-EZ but chooses to do so, it must file a complete return and provide all of the information requested, including the required schedules.

## Specific Instructions

Use as many continuation sheets of Schedule O (Form 990 or 990-EZ) as needed.

Complete the required information on the appropriate line of Form 990 or 990-EZ prior to using Schedule O (Form 990 or 990-EZ)

Identify clearly the specific part and line(s) of Form 990 or 990-EZ to which each response relates. Follow the part and line sequence of Form 990 or 990-EZ.

Late return. If the return isn't filed by the due date (including any extension granted), attach a separate statement giving the reasons for not filing on time. Don't use this schedule to provide the late-filing statement.

Amended return. If the organization checked the Amended return box on Form 990, Heading, item B, or Form 990-EZ, Heading, item B, use Schedule O (Form 990 or 990-EZ) to list each part or schedule and line item of the Form 990 or 990-EZ that was amended.

Group return. If the organization answered "Yes" to Form 990, line H(a), but "No" to line H(b), use a separate

attachment to list the name, address, and EIN of each affiliated organization included in the group return. Don't use this schedule. See the instructions for Form 990, I. Group Return.

Form 990, Parts III, V, VI, VII, IX, XI, and XII. Use Schedule O (Form 990 or 990-EZ) to provide any narrative information required for the following questions in the Form 990.

1. Part III, Statement of Program Service Accomplishments.

a. "Yes" response to line 2.

b. "Yes" response to line 3.

c. Other program services on line 4d.

2. Part V, Statements Regarding Other IRS Filings and Tax Compliance.

a. "No" response to line 3b.

b. "Yes" or "No" response to line 13a.

c. "No" response to line 14b.

3. Part VI, Governance, Management, and Disclosure.

a. Material differences in voting rights among members of the governing body in line 1a.

b. Delegation of governing board's authority to executive committee in line 1a.

c. "Yes" responses to lines 2 through 7b.

d. "No" responses to lines 8a, 8b, and 10b.

e. "Yes" response to line 9.

f. Description of process for review of Form 990, if any, in response to line 11b.

g. "Yes" response to line 12c.

h. Description of process for determining compensation, in response to lines 15a and 15b.

i. If applicable, in response to line 18, an explanation as to why the organization checked the Other box or didn't make any of Forms 1023, 1024, 1024-A, 990, or 990-T publicly available.

j. Description of public disclosure of documents, in response to line 19.

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

a. Explain if reporting of compensation paid by a related organization is provided only for the period during which the related organization was related, not the entire calendar year ending with or within the tax year, and state the period during which the related organization was related

b. Description of reasonable efforts undertaken to obtain information on compensation paid by related organizations, if the organization is unable to obtain such information to report in column (E).

5. Explanation for Part IX, Statement of Functional Expenses, line 11g (other fees

for services), including the type and amount of each expense included in line 11g, if the amount in Part IX, line 11g, exceeds 10% of the amount in Part IX, line 25 (total functional expenses).

6. Explanation for Part IX, Statement of Functional Expenses, line 24e (all other expenses), including the type and amount of each expense included in line 24e, if the amount on line 24e exceeds 10% of the amount in Part IX, line 25 (total functional expenses).

7. Part XI, Reconciliation of Net Assets. Explain any other changes in net assets or fund balances reported on line 9.

8. Part XII, Financial Statements and Reporting.

a. Change in accounting method or description of other accounting method used on line 1.

b. Change in committee oversight review from prior year on line 2c.

c. "No" response to line 3b.

Form 990-EZ, Parts I, II, III, and V. Use Schedule O (Form 990 or 990-EZ) to provide any narrative information required for the following questions.

1. Part I, Revenue, Expenses, and Changes in Net Assets or Fund Balances.

a. Description of other revenue, in response to line 8

b. List of grants and similar amounts paid, in response to line 10.

c. Description of other expenses, in response to line 16.

d. Explanation of other changes in net assets or fund balances, in response to line 20.

2. Part II, Balance Sheets.

a. Description of other assets. in response to line 24.

b. Description of total liabilities, in response to line 26.

3. Description of other program services, in response to Part III, Statement of Program Service Accomplishments, line 31.

4. Part V, Other Information.

- a. "Yes" response to line 33.
- b. "Yes" response to line 34.

c. Explanation of why organization didn't report unrelated business gross income of \$1,000 or more to the IRS on Form 990-T, in response to line 35b.

d. "No" response to line 44d.

Other. Use Schedule O (Form 990 or 990-EZ) to provide narrative explanations and descriptions in response to other specific questions. The narrative provided should refer and relate to a particular line and response on the form.



Don't include on Schedule O (Form 990 or 990-EZ) any social security number(s), because this schedule will be made available