

Form 990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A For the 2021 calendar year, or tax year beginning and ending

B Check if applicable: C Name of organization BIOTECHNOLOGY INNOVATION ORGANIZATION D Employer identification number 52-1224577 E Telephone number 202-962-9200 G Gross receipts \$ 99,740,284. H(a) Is this a group return for subordinates? H(b) Are all subordinates included? I Tax-exempt status: J Website: WWW.BIO.ORG K Form of organization: L Year of formation: 1993 M State of legal domicile: DC

Part I Summary

Table with 3 columns: Description, Prior Year, Current Year. Rows include: 1-7a Activities & Governance, 8-12 Revenue, 13-19 Expenses, 20-22 Net Assets or Fund Balances.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Sign Here: Signature of officer STEPHEN JASKO, CFO. Date. Paid: Preparer's name LAURA J. KENNEY, Preparer's signature LAURA J. KENNEY, Date 11/15/22, PTIN P00202198. Preparer Use Only: Firm's name CLIFTONLARSONALLEN LLP, Firm's address TWO INTERNATIONAL PLACE, 22ND FLOOR BOSTON, MA 02110, Firm's EIN 41-0746749, Phone no. 617-717-0831.

May the IRS discuss this return with the preparer shown above? See instructions [X] Yes [] No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: THE BIOTECHNOLOGY INNOVATION ORGANIZATION (BIO) REPRESENTS APPROXIMATELY 1,000 COMPANIES AND ORGANIZATIONS IN WASHINGTON DC, STATE CAPITALS, AND INTERNATIONAL FORA. BIO IS FOUNDED ON THE PRINCIPLE THAT POLICY MUST NURTURE INNOVATION IN THE LIFE SCIENCES TO

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ including grants of \$) (Revenue \$) ADVOCACY: BIOTECHNOLOGY INNOVATION ORGANIZATION (BIO)'S ADVOCACY EFFORTS REFLECT THE PRIORITIES IDENTIFIED BY THE BIO BOARD OF DIRECTORS AND THE FOUR SECTION GOVERNING BOARDS.

THE BOARD OF DIRECTORS FOCUSES ON ISSUES OF IMPORTANCE TO ALL BIO MEMBERS, REGARDLESS OF THEIR SIZE OR TECHNOLOGY. THESE CROSS-CUTTING ADVOCACY ACCOMPLISHMENTS IN 2021 ARE LISTED BELOW:

- SAFEGUARDED AND ADVANCED INTELLECTUAL PROPERTY PROTECTIONS, DOMESTICALLY AND INTERNATIONALLY.
- FOSTERED A DIALOGUE ABOUT BIOETHICS AND PROACTIVELY ADVANCED THE SOCIALLY RESPONSIBLE USE OF BIOTECHNOLOGY.
- PROMOTED INVESTMENT IN GOVERNMENT AND ACADEMIC RESEARCH.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$) SERVICES: BIO'S SERVICES INCLUDE CONFERENCES AND ACTIVITIES THAT BRING TOGETHER INDUSTRY STAKEHOLDERS AND INVESTORS FOR EVENTS RANGING FROM THE BIO INTERNATIONAL CONVENTION TO CONFERENCES FOR BUSINESS DEVELOPMENT EXECUTIVES.

THE BIO INTERNATIONAL CONVENTION ATTRACTS THE MOST INFLUENTIAL BIOTECH AND PHARMA ATTENDEES FROM 76 COUNTRIES AND 48 U.S. STATES, AS WELL AS THE DISTRICT OF COLUMBIA, PUERTO RICO AND THE US VIRGIN ISLANDS AND OFFERS PROFESSIONAL AND BUSINESS DEVELOPMENT OPPORTUNITIES. THE NET INCOME FROM THE CONVENTION SUPPORTS OUR ADVOCACY, PUBLIC OUTREACH, AND OTHER MEMBER SERVICE ACTIVITIES.

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

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

4e Total program service expenses

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>		X
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
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? <i>If "Yes," complete Schedule C, Part II</i>		
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 Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>	X	
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? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
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>		X
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>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
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? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
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>	X	
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
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>		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
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>	X	
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	X	
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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
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? <i>If "Yes," complete Schedule G, Part I.</i> See instructions		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
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>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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>	X	

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
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>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		
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>		
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>		X
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? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>	X	
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
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>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
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>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	X	

Note: All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No columns. Includes questions 2a through 17 regarding employee counts, tax returns, business income, foreign accounts, prohibited transactions, and charitable contributions.

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
	1a 96		
b	Enter the number of voting members included on line 1a, above, who are independent		
	1b 95		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
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?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
10b			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		X
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	X	
12c		X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		
16b			

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **NONE**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **STEPHEN JASKO - 202-962-9200**
1201 NEW YORK AVE, NW SUITE 1300, WASHINGTON, DC 20005

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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 the 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.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MICHELLE MCMURRY-HEATH PRESIDENT AND CEO	40.00			X				2,050,133.	0.	264,622.
(2) THOMAS DILENGE PRESIDENT, ADVOCACY/LAW/PUBLIC POLIC	40.00				X			1,355,976.	0.	39,096.
(3) RICH MASTERS CHIEF PUBLIC AFFAIRS OFFICER	40.00					X		643,726.	0.	45,694.
(4) ELIZABETH ESHAM CHIEF SCIENCE OFFICER	40.00					X		605,569.	0.	43,889.
(5) PETER MCHUGH CHIEF LEGAL OFFICER	40.00					X		558,879.	0.	56,671.
(6) JOSEPH DAMOND DEPUTY CHIEF POLICY OFFICER & EVP IN	40.00					X		533,658.	0.	77,891.
(7) SHAYE MANDLE COO	40.00					X		522,185.	0.	33,551.
(8) STEPHEN JASKO CHIEF FINANCIAL OFFICER	40.00			X				506,022.	0.	33,551.
(9) JULIE GERBERDING SECRETARY	2.00	X		X				0.	0.	0.
(10) JEREMY LEVIN IMMEDIATE PAST CHAIR	2.00	X		X				0.	0.	0.
(11) ELIZABETH LEWIS SECRETARY	2.00	X		X				0.	0.	0.
(12) JOHN MARAGANORE IMMEDIATE PAST CHAIR	2.00	X		X				0.	0.	0.
(13) HELEN TORLEY (UNTIL 1/21) SECRETARY	2.00	X		X				0.	0.	0.
(14) BRADFORD ZAKES TREASURER	2.00	X		X				0.	0.	0.
(15) STEVE ALBERS DIRECTOR	2.00	X						0.	0.	0.
(16) ANNE ALONZO (UNTIL 9/21) DIRECTOR	2.00	X						0.	0.	0.
(17) BONNIE ANDERSON DIRECTOR	2.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) STUART ARBUCKLE DIRECTOR	2.00	X						0.	0.	0.
(19) MARTIN BABLER DIRECTOR	2.00	X						0.	0.	0.
(20) DUANE BARNES (UNTIL 1/21) DIRECTOR	2.00	X						0.	0.	0.
(21) LAURA BEREZIN (UNTIL 1/21) DIRECTOR	2.00	X						0.	0.	0.
(22) DOUG BERVEN DIRECTOR	2.00	X						0.	0.	0.
(23) JEAN-JACQUES BIENAIME DIRECTOR	2.00	X						0.	0.	0.
(24) FRITZ BITTENBENDER DIRECTOR	2.00	X						0.	0.	0.
(25) CHRISTOPHER BOERNER DIRECTOR	2.00	X						0.	0.	0.
(26) CHRISTOPHE BOURDON (UNTIL 3/21) DIRECTOR	2.00	X						0.	0.	0.
1b Subtotal								6,776,148.	0.	594,965.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								6,776,148.	0.	594,965.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **97**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
THE HERALD GROUP LLC, 1800 M STREET NW SUITE 450 SOUTH, WASHINGTON, DC 20036	CONVENTION CENTER RENTAL	2,100,000.
SIDLEY AUSTIN LLP PO BOX 0642, CHICAGO, IL 60690	CONSULTING	1,247,540.
PUBLIC GOOD PROJECTS, 2308 MOUNT VERNON AVENUE, SUITE 758, ALEXANDRIA, VA 22301	CONSULTING	883,000.
KEYBRIDGE COMMUNICATIONS, 1722-A WISCONSIN AVENUE, NW SUITE 21, WASHINGTON, DC 20007	CONSULTING	879,787.
360 LIVE MEDIA, LLC, 2001 K STREET NW 3RD FLOOR NORTH, WASHINGTON, DC 20006	CONSULTING	832,500.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **61**

SEE PART VII, SECTION A CONTINUATION SHEETS

(A) Name and title		(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
			Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27)	CARRIE BOURDOW DIRECTOR	2.00	X						0.	0.	0.
(28)	CARINE BOUSTANY DIRECTOR	2.00	X						0.	0.	0.
(29)	BRIAN BRAZEAU (UNTIL 8/21) DIRECTOR	2.00	X						0.	0.	0.
(30)	STEPHANIE BROWN (UNTIL 11/21) DIRECTOR	2.00	X						0.	0.	0.
(31)	VICTOR BULTO DIRECTOR	2.00	X						0.	0.	0.
(32)	EMMANUEL CAEYMAEX DIRECTOR	2.00	X						0.	0.	0.
(33)	KAY CHANDLER DIRECTOR	2.00	X						0.	0.	0.
(34)	IVAN CHEUNG DIRECTOR	2.00	X						0.	0.	0.
(35)	MEENU CHHABRA KASON (UNTIL 3/2) DIRECTOR	2.00	X						0.	0.	0.
(36)	GIACOMO CHIESI DIRECTOR	2.00	X						0.	0.	0.
(37)	JEFFREY CLELAND DIRECTOR	2.00	X						0.	0.	0.
(38)	RON COHEN DIRECTOR	2.00	X						0.	0.	0.
(39)	GRACE COLON DIRECTOR	2.00	X						0.	0.	0.
(40)	BRUCE COZADD DIRECTOR	2.00	X						0.	0.	0.
(41)	JOHN CROWLEY DIRECTOR	2.00	X						0.	0.	0.
(42)	ROGER CRYSTAL DIRECTOR	2.00	X						0.	0.	0.
(43)	DOUGLAS DOERFLER DIRECTOR	2.00	X						0.	0.	0.
(44)	MARK DROZDOWSKI (UNTIL 6/21) DIRECTOR	2.00	X						0.	0.	0.
(45)	ERIC DUBE DIRECTOR	2.00	X						0.	0.	0.
(46)	MARK ENYEDY DIRECTOR	2.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c											

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(47) BARRY FLANNELLY DIRECTOR	2.00	X						0.	0.	0.
(48) ALEXANDRIA FORBES DIRECTOR	2.00	X						0.	0.	0.
(49) CEDRIC FRANCOIS DIRECTOR	2.00	X						0.	0.	0.
(50) BRIAN GOFF (UNTIL 7/21) DIRECTOR	2.00	X						0.	0.	0.
(51) KEVIN GORMAN DIRECTOR	2.00	X						0.	0.	0.
(52) JUSTIN GOVER (UNTIL 5/21) DIRECTOR	2.00	X						0.	0.	0.
(53) PATRICK GRUBER DIRECTOR	2.00	X						0.	0.	0.
(54) CHIRFI GUINDO DIRECTOR	2.00	X						0.	0.	0.
(55) SEBASTIAN GUTH DIRECTOR	2.00	X						0.	0.	0.
(56) STEVEN HARR DIRECTOR	2.00	X						0.	0.	0.
(57) PAUL HASTINGS DIRECTOR	2.00	X						0.	0.	0.
(58) RACHEL HAURWITZ DIRECTOR	2.00	X						0.	0.	0.
(59) CHRISTOPHER HEALEY DIRECTOR	2.00	X						0.	0.	0.
(60) JENNIFER HOLMGREN DIRECTOR	2.00	X						0.	0.	0.
(61) SCOTT HOLMSTROM (UNTIL 9/21) DIRECTOR	2.00	X						0.	0.	0.
(62) PATRIK JONSSON DIRECTOR	2.00	X						0.	0.	0.
(63) ALEX KARNAL DIRECTOR	2.00	X						0.	0.	0.
(64) DANIEL KEIL DIRECTOR	2.00	X						0.	0.	0.
(65) DAVID KETTNER DIRECTOR	2.00	X						0.	0.	0.
(66) JEFFREY KINDLER (UNTIL 6/21) DIRECTOR	2.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(67) RACHEL KING DIRECTOR	2.00	X						0.	0.	0.
(68) SCOTT KOENIG DIRECTOR	2.00	X						0.	0.	0.
(69) SAMARTH KULKARNI DIRECTOR	2.00	X						0.	0.	0.
(70) JOSEPH LAROSA DIRECTOR	2.00	X						0.	0.	0.
(71) JOHN LEPORE DIRECTOR	2.00	X						0.	0.	0.
(72) NICK LESCHLY (UNTIL 12/21) DIRECTOR	2.00	X						0.	0.	0.
(73) TED LOVE DIRECTOR	2.00	X						0.	0.	0.
(74) SANDY MACRAE DIRECTOR	2.00	X						0.	0.	0.
(75) GAIL MADERIS DIRECTOR	2.00	X						0.	0.	0.
(76) PAIGE MAHANEY (UNTIL 5/21) DIRECTOR	2.00	X						0.	0.	0.
(77) AAMIR MALIK DIRECTOR	2.00	X						0.	0.	0.
(78) AMEET MALLIK (UNTIL 4/21) DIRECTOR	2.00	X						0.	0.	0.
(79) SHARON MATES DIRECTOR	2.00	X						0.	0.	0.
(80) THOMAS MATHERS DIRECTOR	2.00	X						0.	0.	0.
(81) JOHN MELO DIRECTOR	2.00	X						0.	0.	0.
(82) BOB MORE DIRECTOR	2.00	X						0.	0.	0.
(83) MICHAEL MORRISSEY DIRECTOR	2.00	X						0.	0.	0.
(84) MICHAEL NARACHI DIRECTOR	2.00	X						0.	0.	0.
(85) AMIR NASHAT DIRECTOR	2.00	X						0.	0.	0.
(86) WILLIAM NEWELL DIRECTOR	2.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(87) JULIA OWENS DIRECTOR	2.00	X					0.	0.	0.	
(88) JOHN OYLER DIRECTOR	2.00	X					0.	0.	0.	
(89) RICHARD PAULSON (UNTIL 5/21) DIRECTOR	2.00	X					0.	0.	0.	
(90) ADELENE PERKINS DIRECTOR	2.00	X					0.	0.	0.	
(91) MARK PLATT DIRECTOR	2.00	X					0.	0.	0.	
(92) RICHARD POBS DIRECTOR	2.00	X					0.	0.	0.	
(93) MARK PRUZANSKI DIRECTOR	2.00	X					0.	0.	0.	
(94) SOFIE QIAO DIRECTOR	2.00	X					0.	0.	0.	
(95) MICHAEL RAAB DIRECTOR	2.00	X					0.	0.	0.	
(96) ANNA RATH DIRECTOR	2.00	X					0.	0.	0.	
(97) ELENA RICE DIRECTOR	2.00	X					0.	0.	0.	
(98) HOWARD ROBIN DIRECTOR	2.00	X					0.	0.	0.	
(99) MICHAEL RUGGIERO DIRECTOR	2.00	X					0.	0.	0.	
(100) AMBER SALZMAN (UNTIL 6/21) DIRECTOR	2.00	X					0.	0.	0.	
(101) JAMES SAPIRSTEIN DIRECTOR	2.00	X					0.	0.	0.	
(102) GEORGE SCANGOS (UNTIL 6/21) DIRECTOR	2.00	X					0.	0.	0.	
(103) CHRISTOPHE SCHILLING DIRECTOR	2.00	X					0.	0.	0.	
(104) DIANE SHANAHAN (UNTIL 9/21) DIRECTOR	2.00	X					0.	0.	0.	
(105) CHRISTI SHAW DIRECTOR	2.00	X					0.	0.	0.	
(106) JEFFREY SHERMAN DIRECTOR	2.00	X					0.	0.	0.	
Total to Part VII, Section A, line 1c										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(107) BILL SIBOLD DIRECTOR	2.00	X						0.	0.	0.
(108) NANCY SIMONIAN DIRECTOR	2.00	X						0.	0.	0.
(109) DUANE SIMPSON DIRECTOR	2.00	X						0.	0.	0.
(110) ERIKA SMITH DIRECTOR	2.00	X						0.	0.	0.
(111) JULIE ANNE SMITH (UNTIL 8/21) DIRECTOR	2.00	X						0.	0.	0.
(112) ELAINE SORG DIRECTOR	2.00	X						0.	0.	0.
(113) CHRISTOPHER STANDLEE (UNTIL 1/ DIRECTOR	2.00	X						0.	0.	0.
(114) EDDIE SULLIVAN DIRECTOR	2.00	X						0.	0.	0.
(115) JENNIFER TAUBERT (UNTIL 1/21) DIRECTOR	2.00	X						0.	0.	0.
(116) IAN THOMPSON DIRECTOR	2.00	X						0.	0.	0.
(117) LINDA TROLINDER DIRECTOR	2.00	X						0.	0.	0.
(118) MARK TRUDEAU DIRECTOR	2.00	X						0.	0.	0.
(119) RICK TURNER (UNTIL 11/21) DIRECTOR	2.00	X						0.	0.	0.
(120) GIL VAN BOKKELEN (UNTIL 5/21) DIRECTOR	2.00	X						0.	0.	0.
(121) TIMOTHY WALBERT (UNTIL 5/21) DIRECTOR	2.00	X						0.	0.	0.
(122) OLIVER WALKER DIRECTOR	2.00	X						0.	0.	0.
(123) HENRIK WAREBORN DIRECTOR	2.00	X						0.	0.	0.
(124) NEIL WARMA DIRECTOR	2.00	X						0.	0.	0.
(125) SUE WASHER DIRECTOR	2.00	X						0.	0.	0.
(126) FRANK WATANABE DIRECTOR	2.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	154,941.			
	g	Noncash contributions included in lines 1a-1f	1g	\$			
	h	Total. Add lines 1a-1f		154,941.			
Program Service Revenue	2 a	MEMBERSHIP DUES	900003	32,415,003.	32415003.		
	b	CONFERENCE/MEETING REVENUE	541800	11,316,867.	10939822.	377,045.	
	c	SPECIAL INITIATIVES	900003	7,457,234.	7,457,234.		
	d	CBI LOBBYING FUND	900003	1,062,280.	1,062,280.		
	e	LEGAL & POLICY SUPPORT	900003	533,218.	533,218.		
	f	All other program service revenue	900003	135,812.	135,812.		
	g	Total. Add lines 2a-2f		52,920,414.			
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		1,939,051.		1939051.
4		Income from investment of tax-exempt bond proceeds					
5		Royalties		19,182,040.	766,643.	18415397.	
6 a		Gross rents	(i) Real				
			(ii) Personal				
6 b		Less: rental expenses					
6 c		Rental income or (loss)					
d		Net rental income or (loss)					
7 a		Gross amount from sales of assets other than inventory	(i) Securities				
			(ii) Other				
				23,070,916.			
7 b		Less: cost or other basis and sales expenses		18,829,444.			
7 c		Gain or (loss)		4,241,472.			
d	Net gain or (loss)		4,241,472.		4241472.		
8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18						
8 b	Less: direct expenses						
c	Net income or (loss) from fundraising events						
9 a	Gross income from gaming activities. See Part IV, line 19						
9 b	Less: direct expenses						
c	Net income or (loss) from gaming activities						
10 a	Gross sales of inventory, less returns and allowances						
10 b	Less: cost of goods sold						
c	Net income or (loss) from sales of inventory						
Miscellaneous Revenue	11 a	INSURANCE CLAIMS REVENUE	524298	2,373,400.		2373400.	
	b	TAX REFUND	900003	89,522.		89,522.	
	c	BIONEWS ADS INCOME	900003	10,000.	10,000.		
	d	All other revenue					
	e	Total. Add lines 11a-11d		2,472,922.			
	12	Total revenue. See instructions		80,910,840.	52543369.	1153688.	27058842.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	2,097,401.			
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	6,064.			
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	7,466,183.			
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	28,315.			
7 Other salaries and wages	22,960,292.			
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	90,132.			
9 Other employee benefits	3,113,155.			
10 Payroll taxes	1,324,367.			
11 Fees for services (nonemployees):				
a Management				
b Legal	458,376.			
c Accounting	78,271.			
d Lobbying	5,204,776.			
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	48,027.			
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	13,011,664.			
12 Advertising and promotion	1,392,500.			
13 Office expenses	490,851.			
14 Information technology	1,178,794.			
15 Royalties				
16 Occupancy	6,940,556.			
17 Travel	492,326.			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	3,846,620.			
20 Interest	1,380.			
21 Payments to affiliates	8,147,829.			
22 Depreciation, depletion, and amortization	518,945.			
23 Insurance	170,219.			
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.)				
a DUES & SUBSCRIPTIONS	339,980.			
b TAXES PAID	338,787.			
c OUTREACH	264,890.			
d BIO LEGISLATIVE DAY/FLY	38,940.			
e All other expenses	8,478.			
25 Total functional expenses. Add lines 1 through 24e	80,058,118.			
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	15,487,112.	1	8,880,294.
	2 Savings and temporary cash investments	967,224.	2	4,248,582.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	4,288,721.	4	5,336,669.
	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	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	2,624,031.	9	3,636,584.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 19,151,472.		
	b Less: accumulated depreciation	10b 8,092,576.	776,734.	10c 11,058,896.
	11 Investments - publicly traded securities	52,400,651.	11	52,911,446.
	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	0.	15	27,593,848.
16 Total assets. Add lines 1 through 15 (must equal line 33)	76,544,473.	16	113,666,319.	
Liabilities	17 Accounts payable and accrued expenses	18,997,300.	17	18,109,640.
	18 Grants payable		18	
	19 Deferred revenue	12,264,522.	19	10,845,666.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other 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		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	1,540,177.	25	40,455,368.
	26 Total liabilities. Add lines 17 through 25	32,801,999.	26	69,410,674.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	43,742,474.	27	44,255,645.
	28 Net assets with donor restrictions		28	
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	43,742,474.	32	44,255,645.
	33 Total liabilities and net assets/fund balances	76,544,473.	33	113,666,319.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	80,910,840.
2	Total expenses (must equal Part IX, column (A), line 25)	2	80,058,118.
3	Revenue less expenses. Subtract line 2 from line 1	3	852,722.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	43,742,474.
5	Net unrealized gains (losses) on investments	5	-339,551.
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.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	44,255,645.

Part XII Financial Statements and Reporting

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

- 1 Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

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

Form 990 (2021)

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2021

Name of the organization

BIOTECHNOLOGY INNOVATION ORGANIZATION

Employer identification number

52-1224577

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(6) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

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 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), 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 (entering "N/A" in column (b) instead of the contributor name and address), 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), 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).

Name of organization BIOTECHNOLOGY INNOVATION ORGANIZATION	Employer identification number 52-1224577
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/>	\$ 100,479.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ 46,713.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization BIOTECHNOLOGY INNOVATION ORGANIZATION	Employer identification number 52-1224577
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____

Name of organization BIOTECHNOLOGY INNOVATION ORGANIZATION	Employer identification number 52-1224577
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(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 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 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 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

SCHEDULE C
(Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527
 ▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
 ▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

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

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

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

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

Name of organization BIOTECHNOLOGY INNOVATION ORGANIZATION	Employer identification number 52-1224577
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

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

- 2 Political campaign activity expenditures ▶ \$ _____
- 3 Volunteer hours for political campaign activities _____

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

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

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

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

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

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule C (Form 990) 2021

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grassroots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures														
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)														
h	Subtract line 1g from line 1a. If zero or less, enter -0-														
i	Subtract line 1f from line 1c. If zero or less, enter -0-														
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)
 (Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
 See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		X
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		X
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	X	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	32,415,003.
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	10,444,118.
b Carryover from last year	2b	305,942.
c Total	2c	10,750,060.
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	13,290,151.
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures. See instructions	5	-2,540,091.

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization BIOTECHNOLOGY INNOVATION ORGANIZATION Employer identification number 52-1224577

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two Yes/No questions regarding donor property and grant fund usage.

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Form with multiple sections: 1. Purpose(s) of conservation easements (checkboxes for land, habitat, open space, historic area, structure). 2. Conservation contribution details (2a-2d table). 3-7. Monitoring and enforcement details. 8-9. Reporting requirements.

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.

Form with sections 1a-1b and 2. 1a: Reporting on revenue and assets for public exhibition. 1b: Reporting on revenue and assets for public exhibition. 2: Reporting on revenue and assets for financial gain.

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):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided 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					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____%
 - b Permanent endowment _____%
 - c Term endowment _____%
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|--------|----|
| (i) Unrelated organizations | 3a(i) | |
| (ii) Related organizations | 3a(ii) | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		17,146,255.	6,235,809.	10,910,446.
d Equipment		276,745.	276,746.	-1.
e Other		1,728,472.	1,580,021.	148,451.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				11,058,896.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

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

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) RIGHT OF USE ASSET - OPERATING	27,593,848.
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	27,593,848.

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) LEASE LIABILITY - OPERATING	40,194,879.
(3) BIO-PAC	260,489.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	40,455,368.

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

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990.

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

OMB No. 1545-0047

2021

Open to Public
Inspection

Name of the organization BIOTECHNOLOGY INNOVATION ORGANIZATION	Employer identification number 52-1224577
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Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

- 1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in 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 in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM			GRANT-MAKING	CONFERENCES, ADVOCACY AND EDUCATION	6,064.
SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,			PROGRAM SERVICES	ADVOCACY	18,389.
EUROPE (INCLUDING ICELAND & GREENLAND)			PROGRAM SERVICES	ADVOCACY	145,071.
3 a Subtotal	0	0			169,524.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			169,524.

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to 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
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* Yes No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* Yes No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* Yes No

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 2:

THE ORGANIZATION HAS SUPPORTING DOCUMENTATION FOR THE AMOUNT THAT IS
INVOICED FROM THE COMPANIES.

Multiple horizontal lines for supplemental information input.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Name of the organization **BIOTECHNOLOGY INNOVATION ORGANIZATION** Employer identification number **52-1224577**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
ALLIANCE FOR AGING RESEARCH 1700 K STREET, NW, SUITE 740 WASHINGTON, DC 20006	54-1379174	501(C)(3)	15,000.	0.			SPONSORSHIP
ALLIANCE TO PROTECT MEDICAL INNOVATION - 1220 L ST NW, SUITE 100 #488 - WASHINGTON, DC 20005	83-1354631	501(C)(4)	50,000.	0.			CONTRIBUTION
AMERICAN BONE HEALTH 4208 SIX FORKS RD. SUITE 1000 RALEIGH, NC 27609	93-1022954	501(C)(3)	10,000.	0.			SUPPORT
AMERICAN BRAIN COALITION PO BOX 1549 MAPLE GROVE, MN 55311	20-1852597	501(C)(3)	10,000.	0.			SUPPORT
AMERICAN CANCER SOCIETY ACTION NETWORK, INC. - 555 11TH STREET, SUITE 300 - WASHINGTON, DC 20004	52-2340031	501(C)(4)	25,000.	0.			SPONSORSHIP
AMERICAN LUNG ASSOCIATION 55 W WACKER DRIVE SUITE 1150 CHICAGO, IL 60601	13-1632524	501(C)(3)	15,000.	0.			SUPPORT

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ **59.**
- 3** Enter total number of other organizations listed in the line 1 table ▶ **80.**

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

Schedule I (Form 990) 2021

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ARTHRTIS FOUNDATION, INC. 1355 PEACHTREE ST. #600 ATLANTA, GA 30309	58-1341679	501(C)(3)	15,000.	0.			SUPPORT
ASIAN AND PACIFIC ISLANDER AMERICAN HEALTH FORUM - ONE KAISER PLAZA, SUITE 850 - OAKLAND, CA 94612	94-3030866	501(C)(3)	20,000.	0.			GIFT/SUPPORT
ASSOCIATION OF ASIAN PACIFIC COMMUNITY HEALTH ORGANIZATIONS - 2140 SHATTUCK AVE., SUITE 203 - BERKELEY, CA 94704	94-3050247	501(C)(3)	60,000.	0.			GIFT
BIONJ, INC 1255 WHITEHORSE-MERCERVILLE RD, BUILDING B - SUITE 514 - TRENTON, NJ 08619	22-3284393	501(C)(6)	45,000.	0.			SPONSORSHIP
BIOUTAH P.O. BOX 58531 SALT LAKE CITY, UT 84158	90-0899204	501(C)(6)	6,500.	0.			SUPPORT
CALIFORNIA LIFE SCIENCES ASSOCIATION - 9191 TOWNE CENTRE DRIVE, SUITE 450 - SAN DIEGO, CA 92122	47-3226523	501(C)(6)	200,000.	0.			SUPPORT
CANCER SUPPORT COMMUNITY 734 15TH STREET, NW, SUITE 300 WASHINGTON, DC 20005	95-4163931	501(C)(3)	30,000.	0.			SUPPORT
CAPITAL CLUBHOUSE, INC 1517 18TH ST. NW WASHINGTON, DC 20036	45-4366185	501(C)(3)	15,000.	0.			SUPPORT
CENTER FOR FOOD INTEGRITY 2900 NE BROOKTREE LANE, SUITE 200 GLADSTONE, MO 64119	20-4662713	501(C)(4)	50,000.	0.			SPONSORSHIP

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENTER FORWARD 1214A INGLESIDE AVE. MCLEAN, VA 22101	27-2429741	501(C)(4)	35,000.	0.			2021 ANNUAL STAKEHOLDER PROGRAM
COLORADO BIOSCIENCE ASSOCIATION 600 GRANT STREET, SUITE 306 DENVER, CO 80203	84-1363258	501(C)(6)	15,000.	0.			SPONSORSHIP
COMMUNITY LIVER ALLIANCE 100 W. STATION SQUARE DR. SUITE 194 PITTSBURGH, PA 15219	46-1909171	501(C)(3)	15,000.	0.			SUPPORT
COPD FOUNDATION INC 3300 PONCE DE LEON BLVD. MIAMI, FL 33134	20-1048322	501(C)(3)	15,000.	0.			SUPPORT
CYSTIC FIBROSIS RESEARCH FUND, INC 100 ST GEORGES RD., UNIT G1 ARDMORE, PA 19003	45-3768161	501(C)(3)	10,000.	0.			SUPPORT
DELAWARE BIOSCIENCE ASSOCIATION 1 INNOVATION WAY, SUITE 300 NEWARK, DE 19711	20-4147195	501(C)(6)	8,000.	0.			SUPPORT
DEPRESSION AND BIPOLAR SUPPORT ALLIANCE - 55 E JACKSON BLVD. SUITE 490 - CHICAGO, IL 60604	36-3379124	501(C)(3)	10,000.	0.			SUPPORT
DUP15Q ALLIANCE 1207 LINDEN AVE. PARK RIDGE, IL 60068	20-0751232	501(C)(3)	10,000.	0.			SUPPORT
EPILEPSY FOUNDATION 8301 PROFESSIONAL PLACE EAST, SUITE LANDOVER, MD 20785	52-0856660	501(C)(3)	15,000.	0.			SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EVERYLIFE FOUNDATION FOR RARE DISEASES - 1012 14TH ST., NW, SUITE 500 - WASHINGTON, DC 20005	26-4614274	501(C)(3)	50,000.	0.			SUPPORT/CONTRIBUTION
FARMERS ALLIANCE FOR INTEGRATED RESOURCES - 1260 COUNTY ROAD, 20 1/2 - LONGMONT, CO 80504	45-4591729	501(C)(5)	20,000.	0.			SUPPORT
FATTY LIVER FOUNDATION 3938 E. SHADY GLEN CT. BOISE, ID 83706	81-4492542	501(C)(3)	10,000.	0.			SUPPORT
FOUNDATION FOR SARCOIDOSIS RESEARCH - 1820 WEST WEBSTER AVENUE SUITE 304 - CHICAGO, IL 60614	36-4378232	501(C)(3)	16,500.	0.			SUPPORT
GENETIC ALLIANCE 4301 CONNECTICUT AVENUE, N.W. SUITE WASHINGTON, DC 20008	52-1571905	501(C)(3)	15,000.	0.			SUPPORT
GEORGE MASON UNIVERSITY FOUNDATION, INC - 3301 FAIRFAX DRIVE, MSN 1G3 - ARLINGTON, VA 22201	54-1603842	501(C)(3)	10,000.	0.			DONATION
GEORGIA BIO 999 PEACHTREE AVE. NE ATLANTA, GA 30309	58-1849665	501(C)(3)	15,000.	0.			SPONSORSHIP
GLOBAL DOWN SYNDROME FOUNDATION 3239 E 2ND AVE DENVER, CO 80206	26-4431001	501(C)(3)	6,000.	0.			SUPPORT
GO2 FOUNDATION FOR LUNG CANCER 1100 INDUSTRIAL ROAD, SUITE 1 SAN CARLOS, CA 94070	20-4417327	501(C)(3)	10,000.	0.			SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HAWAII CROP IMPROVEMENT ASSOCIATION - PO BOX 126 - AIEA, HI 96701	99-0258882	501(C)(6)	25,000.	0.			SUPPORT
HEALTHYWOMEN 1 HARDING RD. SUITE 102A RED BANK, NJ 77010	52-1624846	501(C)(3)	8,500.	0.			SUPPORT
HEPATITIS B FOUNDATION 3805 OLD EASTON ROAD DOYLESTOWN, PA 18902	23-2655669	501(C)(3)	15,000.	0.			SUPPORT
HIV AND HEPATITIS POLICY INSTITUTE 1602B BELMONT ST NW WASHINGTON, DC 20009	84-4147678	501(C)(3)	7,500.	0.			SUPPORT
HUNTER'S HOPE FOUNDATION, INC P.O. BOX 643, 6368 W. QUAKER ORCHARD PARK, NY 14127	16-1552315	501(C)(3)	15,000.	0.			SUPPORT
INFORMATION TECHNOLOGY AND INNOVATION FOUNDATION - 700 K ST NW SUITE 600 - WASHINGTON, DC 20001	20-4403497	501(C)(3)	30,000.	0.			SUPPORT
LIFE SCIENCE WASHINGTON 1551 EASTLAKE AVE. E, SUITE 300 SEATTLE, WA 98102	91-1453398	501(C)(6)	10,000.	0.			SUPPORT
LITTLE HERCULES FOUNDATION 5522 AVERY RD. DUBLIN, OH 43016	46-1427334	501(C)(3)	15,000.	0.			SUPPORT
LULAC INSTITUTE, INC 1133 19TH ST. NW SUITE 1000 WASHINGTON, DC 20036	52-2072106	501(C)(3)	150,000.	0.			GIFT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LUPUS FOUNDATION OF AMERICA INC. 2121 K STREET NW., SUITE 200 WASHINGTON, DC 20037	43-1131436	501(C)(3)	7,500.	0.			SPONSORSHIP
LUPUS RESEARCH ALLIANCE, INC 275 MADISON AVE., 10TH FLOOR NEW YORK, NY 10016	58-2492929	501(C)(3)	15,000.	0.			SUPPORT
MASSACHUSETTS BIOTECH. COUNCIL 300 TECHNOLOGY SQUARE, 5TH FLOOR CAMBRIDGE, MA 02139	22-2693047	501(C)(6)	6,000.	0.			SPONSORSHIP
MONTANA BIOSCIENCE ALLIANCE P O BOX 1773 BILLINGS, MT 59106	20-1647600	501(C)(3)	20,000.	0.			SUPPORT
NATIONAL ALLIANCE ON MENTAL ILLNESS - 3803 N FAIFAX DR SUITE 100 - ARLINGTON, VA 22203	43-1201653	501(C)(3)	15,000.	0.			SUPPORT
NATIONAL BLACK CHURCH INITIATIVE P.O.BOX 65177 WASHINGTON, DC 20035	52-2169774	501(C)(3)	91,400.	0.			SUPPORT/GIFT
NATIONAL BLOOD CLOT ALLIANCE P.O. BOX 825687 PHILADELPHIA, PA 19182	56-2425135	501(C)(3)	10,000.	0.			SUPPORT
NATIONAL CAUCUS AND CENTER ON BACK AGING - 1220 L ST. NW, SUITE 800 - WASHINGTON, DC 20005	23-7455377	501(C)(3)	30,000.	0.			SUPPORT
NATIONAL CONFERENCE OF STATE LEGISLATURES - 7700 EAST FIRST PLACE - DENVER, CO 80230	84-0772595	170(C)(1)	10,000.	0.			SPONSORSHIP

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL COUNCIL OF ASIAN PACIFIC ISLANDER PHYSICIANS - 2144 BEACH STREET - SAN FRANCISCO, CA 94123	27-3429376	501(C)(3)	50,000.	0.			SUPPORT
NATIONAL COUNCIL ON AGING 251 18TH ST. SOUTH, SUITE 500 ARLINGTON, VA 22202	13-1932384	501(C)(3)	45,000.	0.			SPONSORSHIP
NATIONAL HEALTH COUNCIL 1730 M STREET, NW SUITE 500 WASHINGTON, DC 20036	13-1624107	501(C)(3)	49,000.	0.			SPONSORSHIP
NATIONAL HISPANIC MEDICAL ASSOCIATION - 1920 L STREET, NW, SUITE 725 - WASHINGTON, DC 20036	52-1884446	501(C)(6)	30,000.	0.			AWARD
NATIONAL PSORIASIS FOUNDATION 6600 SW 92ND AVE. SUITE 300 PORTLAND, OR 97223	93-0571472	501(C)(3)	15,000.	0.			SUPPORT
NATIONAL URBAN LEAGUE, INC 80 PINE STREET 9TH FLOOR NEW YORK, NY 10005	13-1840489	501(C)(3)	150,000.	0.			GIFT
NCSL FOUNDATION FOR STATE LEGISLATURES - 7700 EAST FIRST PLACE - DENVER, CO 80230	74-2232576	501(C)(3)	7,500.	0.			SPONSORSHIP
NUS AMERICA FOUNDATION, INC 440 NORTH WOLFE ROAD SUNNYVALE, CA 94085	20-2368621	501(C)(3)	16,000.	0.			DONATION
OREGONIANS FOR FOOD AND SHELTER 1149 COURT ST NE, SUITE 110 SALEM, OR 97301	93-0775640	501(C)(6)	17,500.	0.			SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PREVENT BLINDNESS 225 WEST WACKER DRIVE, SUITE 400 CHICAGO, IL 60606	36-3667121	501(C)(3)	15,500.	0.			SUPPORT
PREVENT CANCER FOUNDATION 1600 DUKE ST, SUITE 500 ALEXANDRIA, VA 22314	52-1429544	501(C)(3)	8,000.	0.			SPONSORSHIP
RESEARCH!AMERICA 241 18TH STREET SOUTH, SUITE 501 ARLINGTON, VA 22202	52-1609875	501(C)(3)	6,000.	0.			SUPPORT
SERVICES AND ADVOCACY FOR GAY, LESBIAN, BISEXUAL AND TRANSGENDER ELDERS, INC - 305 7THAVE., 15TH FLOOR - NEW YORK, NY 10001	13-2947657	501(C)(3)	20,000.	0.			SUPPORT
SICK CELLS 4512 RIVER DRIVE LISLE, IL 60532	81-3481633	501(C)(3)	65,000.	0.			SUPPORT
ST. BALDRICK'S FOUNDATION 1333 S. MAYFLOWER AVE. SUITE 400 MONROVIA, CA 91016	20-1173824	501(C)(3)	15,000.	0.			SUPPORT
SYNGAP1 FOUNDATION 15319 REDBUD BERRY WAY CYPRESS, TX 77433	47-2459997	501(C)(3)	15,000.	0.			SUPPORT
THE BRIGHAM AND WOMEN'S HOSPITAL, INC. - 75 FRANCIS ST., MAIL CODE 300 FENWAY R - BOSTON, MA 02115	04-2312909	501(C)(3)	10,000.	0.			SPONSORSHIP
THE CONGRESSIONAL INSTITUTE, INC 1700 DIAGONAL RD. SUITE 300 ALEXANDRIA, VA 22314	52-1504189	501(C)(4)	15,000.	0.			SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE GERONTOLOGICAL SOCIETY OF AMERICA - 1220 L STREET, NW, #901 - WASHINGTON, DC 20005	52-1256181	501(C)(3)	10,000.	0.			SUPPORT
THE GLOBAL FOUNDATION FOR PEROXISOMAL DISORDERS - P.O. BOX 33238 - TULSA, OK 74135	27-3646193	501(C)(3)	15,000.	0.			SUPPORT
THE GLOBAL WOMEN'S INNOVATION NETWORK - 233 PENNSYLVANIA AVENUE, SE 2ND FLOOR - WASHINGTON, DC 20003	27-1428117	501(C)(3)	50,000.	0.			SUPPORT
THE GOVERNING MAJORITY EDUCATION FUND - 606 W. WISCONSIN AVE #1202 - MILWAUKEE, WI 53203	85-0549304	501(C)(4)	25,000.	0.			CONTRIBUTION
THE NATIONAL HEMOPHILIA FOUNDATION 7 PENN PLAZA SUITE 1204 NEW YORK, NY 10001	13-5641857	501(C)(3)	15,000.	0.			SUPPORT
THE ULMAN CANCER FUND OF YOUNG ADULTS, INC - 2118 E. MADISON ST - BALTIMORE, MD 21205	52-2057636	501(C)(3)	15,000.	0.			SUPPORT
U.S. CHAMBER OF COMMERCE 1615 H STREET NW, P O BOX 1200 WASHINGTON, DC 20062	53-0045720	501(C)(6)	25,000.	0.			SUPPORT
UNITED SPINAL ASSOCIATION 120-34 QUEENS BLVD. SUITE 320 KEW GARDENS, NY 11415	13-5612621	501(C)(3)	10,000.	0.			SUPPORT
US CHAMBER OF COMMERCE 1615 H STREET NW, PO BOX 1200 WASHINGTON, DC 20062	53-0045720	501(C)(6)	25,000.	0.			SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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WOMEN OF COLOR IN PHARMA PO BOX 6172 SOMERSET, NJ 08875	81-3871261	501(C)(6)	10,000.	0.			SPONSORSHIP
ZERO - THE PROJECT TO END PROSTATE CANCER - 515 KING STREET, SUITE 420 - ALEXANDRIA, VA 22314	59-3400922	501(C)(3)	15,000.	0.			SUPPORT

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

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

PART I, LINE 2:

BIO RELIES ON THE REQUIRED QUALIFICATIONS OF THE GRANT RECIPIENTS TO
 PROVIDE ASSURANCE OF PROPER USAGE. IN SOME CASES, BIO PERSONNEL ATTEND
 EVENTS AND RECEIVE ACKNOWLEDGEMENTS RELATED TO THE FUNDS GRANTED.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ▶ Attach to Form 990.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

BIOTECHNOLOGY INNOVATION ORGANIZATION

Employer identification number

52-1224577

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input checked="" type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		X
2	X	
4a	X	
4b	X	
4c		X
5a		
5b		
6a		
6b		
7		
8		
9		

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

Schedule J (Form 990) 2021

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) MICHELLE MCMURRY-HEATH PRESIDENT AND CEO	(i)	1,197,646.	851,887.	600.	233,700.	30,922.	2,314,755.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) THOMAS DILENGE PRESIDENT, ADVOCACY/LAW/PUBLIC POLIC	(i)	210,960.	522,501.	622,515.	8,700.	30,396.	1,395,072.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) RICH MASTERS CHIEF PUBLIC AFFAIRS OFFICER	(i)	488,126.	155,000.	600.	8,700.	36,994.	689,420.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) ELIZABETH ESHAM CHIEF SCIENCE OFFICER	(i)	479,958.	125,011.	600.	8,700.	35,189.	649,458.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) PETER MCHUGH CHIEF LEGAL OFFICER	(i)	448,606.	109,673.	600.	8,700.	47,971.	615,550.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) JOSEPH DAMOND DEPUTY CHIEF POLICY OFFICER & EVP IN	(i)	409,070.	123,988.	600.	26,200.	51,691.	611,549.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) SHAYE MANDLE COO	(i)	471,585.	50,000.	600.	0.	33,551.	555,736.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) STEPHEN JASKO CHIEF FINANCIAL OFFICER	(i)	450,422.	55,000.	600.	0.	33,551.	539,573.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

PART I, LINES 4A-B:

THE ORGANIZATION HAS A NONQUALIFIED DEFERRED COMPENSATION PLAN. UNDER THE TERMS OF THE PLAN, THE PARTICIPANTS ARE ENTITLED TO BENEFITS IF THEY REMAIN EMPLOYED BY THE ORGANIZATION UNTIL A PREDETERMINED TIME. THE PLAN IS INTENDED TO BE A NONQUALIFIED, UNFUNDED PROGRAM FOR THE BENEFIT OF A SELECT GROUP OF MANAGEMENT OR HIGHLY COMPENSATED EMPLOYEES OF BIO WITHIN THE MEANING OF ERISA.

THE FOLLOWING WERE CONTRIBUTIONS MADE DURING 2021:

MICHELLE MCMURRY-HEATH: \$225,000

THOMAS DILENGE RECEIVED A ONE-TIME SEVERANCE PAYMENT OF \$622,515 UPON SEPARATION OF SERVICE DURING THE TAX YEAR.

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
LILY DOEFLER	DAUGHTER OF A BOARD	28,315.	EMPLOYMENT		X

Part V Supplemental Information.

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

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: LILY DOEFLER

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

DAUGHTER OF A BOARD MEMBER

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public
Inspection

Name of the organization

BIOTECHNOLOGY INNOVATION ORGANIZATION

Employer identification number

52-1224577

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

OVERCOME CHALLENGES IN HEALTH CARE, AGRICULTURE, INDUSTRY, AND THE ENVIRONMENT. OUR MEMBERS REPRESENT COMPANIES OFFERING A SPECTRUM OF BIOTECHNOLOGY APPLICATIONS ACROSS MAJOR SECTORS OF THE ECONOMY. BIO MEMBERS ALSO INCLUDE UNIVERSITIES, NONPROFITS, PATIENT GROUPS, AND OTHER ORGANIZATIONS THAT PLAY AN IMPORTANT ROLE IN THE FUTURE OF THE LIFE SCIENCES. BIO'S ACTIVITIES ARE BROKEN DOWN INTO TWO PROGRAMS - ADVOCACY AND SERVICES.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

- EXPANDED OUTREACH TO FOREIGN GOVERNMENTS AND INTERNATIONAL ENTITIES TO EDUCATE ON POLICY ISSUES OF IMPORTANCE TO THE BIOTECHNOLOGY INDUSTRY AND TO IMPROVE THE INVESTMENT AND REGULATORY CLIMATE FOR BIOTECH PRODUCTS.

THE HEALTH SECTION 2021 ADVOCACY ACCOMPLISHMENTS:

- PROMOTED HEALTHCARE POLICIES THAT RECOGNIZE BOTH THE PROMISE AND VALUE OF INNOVATION.
- ADVOCATED FOR A SAFE AND PREDICTABLE REGULATORY ENVIRONMENT FOR VALUE-BASED PAYMENT ARRANGEMENTS FOR DRUGS AND BIOLOGICS.
- ENHANCED AND PROTECTED PATIENT ACCESS TO INNOVATIVE THERAPIES AND PROMOTED THE NEED FOR GREATER NONDISCRIMINATION ENFORCEMENT AGAINST INSURANCE BENEFIT DESIGNS.

- ADVOCATED FOR BIOSIMILARS POLICIES THAT PROTECT PATIENT SAFETY, PROMOTE BIOMEDICAL INNOVATION, AND ADVANCE THE SCIENCE-BASED REVIEW AND

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

Schedule O (Form 990) 2021

132211 11-11-21

Name of the organization BIOTECHNOLOGY INNOVATION ORGANIZATION	Employer identification number 52-1224577
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APPROVAL OF BIOSIMILARS AND INTERCHANGEABLE BIOLOGICAL PRODUCTS.

- PROMOTED THE VALUE OF U.S. GOVERNMENT INVESTMENTS IN PROGRAMS THAT IMPROVE ACCESS TO IMMUNIZATIONS AND FOSTER VACCINE INNOVATION, STRENGTHENED OUR ABILITY TO RESPOND TO BIOTERROR THREATS OR EMERGING INFECTIOUS DISEASES, AND ENCOURAGED DEVELOPMENT OF NEW PRODUCTS TO FIGHT ANTIMICROBIAL RESISTANCE (AMR).

- INFLUENCED IMPROVEMENTS TO THE INTERNATIONAL ENVIRONMENT FOR BIOMEDICAL INNOVATION AND GLOBAL PUBLIC HEALTH PREPAREDNESS.

-ADVOCATED FOR THE MODERNIZATION OF THE CLINICAL DEVELOPMENT PARADIGM THE EMERGING COMPANIES SECTION 2021 ADVOCACY ACCOMPLISHMENTS:

- ADVANCED THE INTEREST OF EMERGING COMPANIES IN CAPITAL FORMATION AND FINANCIAL SERVICES POLICY.

- ADVOCATED FOR FISCAL POLICIES SUPPORTING INNOVATIVE EMERGING COMPANIES AND INVESTMENT IN GROUNDBREAKING R&D; ENHANCED THE VOICE OF PRE-REVENUE, R&D-INTENSIVE BUSINESSES

- ADVOCATED FOR THE REMOVAL OF BURDENSOME FINANCIAL REPORTING REGULATIONS ON EMERGING COMPANIES.

THE FOOD & AGRICULTURE SECTION 2021 ADVOCACY ACCOMPLISHMENTS:

- WORKED WITH THE ADMINISTRATION AND CONGRESS TO ADVANCE IMPROVEMENTS TO THE U.S. AND GLOBAL REGULATORY SYSTEMS FOR AG-BIOTECH PRODUCTS.

- WORKED WITH MEMBERS OF THE AGRICULTURAL VALUE CHAIN TO ADDRESS TRADE ISSUES IN AGRICULTURAL EXPORT MARKETS SUCH AS CHINA AND EUROPE.

- ADVOCATED IN LEGISLATURES AND COURTS TO PRESERVE THE RIGHTS OF FARMERS TO PLANT GENETICALLY ENGINEERED CROPS.

Name of the organization BIOTECHNOLOGY INNOVATION ORGANIZATION	Employer identification number 52-1224577
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THE INDUSTRIAL & ENVIRONMENTAL SECTION 2021 ADVOCACY ACCOMPLISHMENTS:

- SUPPORTED A RENEWABLE CHEMICALS REPORT.
- ADVOCATED FOR EPA TO TREAT ALL SUSTAINABLY SOURCED BIOMASS AS ELIGIBLE MEASURES FOR EMISSIONS REDUCTION CREDIT (ERC) GENERATION.
- ADVOCATED REGARDING THE IMPLEMENTATION OF THE TOXIC SUBSTANCES CONTROL ACT (TSCA) AS AMENDED BY CONGRESS, AS WELL AS ISSUES RELATING TO THE NATIONAL BIOENGINEERED FOOD DISCLOSURE ACT.
- ENGAGED WITH THE ADMINISTRATION'S REVIEW OF THE COORDINATED FRAMEWORK FOR BIOTECHNOLOGY, INCLUDING WITH RESPECT TO THE REGULATION OF GENETICALLY ENGINEERED (GE) ALGAE.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

THE KEY ELEMENTS OF THE BIO INTERNATIONAL CONVENTION ARE EDUCATIONAL PROGRAMMING, EXHIBITION, THE BIO BUSINESS FORUM, AND NETWORKING EVENTS. THESE ELEMENTS PROVIDE AN OPPORTUNITY FOR BIOTECHNOLOGY AND PHARMACEUTICAL COMPANIES, ACADEMIC RESEARCH INSTITUTIONS, AND INVESTORS FROM AROUND THE WORLD TO LEARN ABOUT RECENT SCIENTIFIC AND POLICY DEVELOPMENTS, AND SCHEDULE ONE-ON-ONE MEETINGS TO DISCUSS POTENTIAL BUSINESS OPPORTUNITIES. THE BIO BUSINESS FORUM AT THE CONVENTION HOSTS TENS OF THOUSANDS OF PARTNERING MEETINGS AMONG A FEW THOUSAND COMPANIES, ALONG WITH A COUPLE HUNDRED COMPANY PRESENTATIONS. THE CONVENTION HOSTS HUNDREDS OF SPEAKERS, AND OVER A THOUSAND EXHIBITIONS WITH INTERNATIONAL, REGIONAL AND STATE PAVILIONS (AND A NUMBER OF PRODUCT FOCUS ZONES).

BEYOND THE CONVENTION, BIO HOSTS OR CO-HOSTS A NUMBER OF NATIONAL AND INTERNATIONAL CONFERENCES THAT PROVIDE VENUES FOR MEMBER AND NON-MEMBER COMPANIES TO PRESENT NEW DATA, MEET WITH FELLOW BIOTECH COMPANIES, AND

Name of the organization BIOTECHNOLOGY INNOVATION ORGANIZATION	Employer identification number 52-1224577
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ATTRACT FUNDING FROM INVESTORS AND OTHER ORGANIZATIONS.

FORM 990, PART VI, SECTION A, LINE 1A:

THE BOARD OF DIRECTORS SHALL DESIGNATE BY RESOLUTION AND WITH A QUORUM PRESENT, NOT MORE THAN TWENTY-THREE (23) DIRECTORS OF THE BOARD TO ACT AS AN EXECUTIVE COMMITTEE. THE EXECUTIVE COMMITTEE SHALL CONSIST OF THE SEVEN (7) ELECTED OFFICERS OF THE ORGANIZATION; THE IMMEDIATE PAST CHAIR OF THE ORGANIZATION; THE VICE CHAIRS OF EACH SECTION'S GOVERNING BOARD; AND THE BALANCE BEING AT-LARGE DIRECTORS FROM THE FULL BOARD. IF THE IMMEDIATE PAST CHAIR IS NO LONGER ELIGIBLE TO SERVE ON THE FULL BOARD, AN ADDITIONAL AT-LARGE DIRECTOR FROM THE FULL BOARD SHALL BE SELECTED FOR THE EXECUTIVE COMMITTEE. THE EXECUTIVE COMMITTEE SHALL HAVE, AND BE AUTHORIZED TO EXERCISE, ALL POWERS OF THE FULL BOARD, EXCEPT: (A) THE POWER TO ELECT OR REMOVE ELECTED OFFICERS OR DIRECTORS, TO CHANGE THE SIZE OF THE BOARD, TO CHANGE ELIGIBILITY, QUALIFICATIONS OR RIGHTS OF MEMBERSHIP, OR TO MAKE DETERMINATIONS AS TO DIRECTOR AND OFFICER COMPENSATION, WHERE APPLICABLE; AND (B) THE POWER TO AMEND THE ARTICLES OF INCORPORATION OR THE BYLAWS OF THE ORGANIZATION.

FORM 990, PART VI, SECTION A, LINE 6:

THE MEMBERS OF THE ORGANIZATION SHALL BE DIVIDED INTO FOUR CLASSES; CORE MEMBERS, ASSOCIATE MEMBERS, AFFILIATE MEMBERS, AND CENTER MEMBERS, DEFINED AS FOLLOWS:

(A) CORE MEMBERS: ANY CORPORATION, PARTNERSHIP, ASSOCIATION, OR OTHER ENTITY ORGANIZED FOR PROFIT, A SUBSTANTIAL PERCENTAGE OF WHOSE BUSINESS ACTIVITIES INVOLVE BIOTECHNOLOGY, GENOMICS, BIOINFORMATICS OR RELATED NEW TECHNOLOGIES, IS ELIGIBLE FOR MEMBERSHIP. CORE MEMBERS ARE THOSE ENTITIES

Name of the organization BIOTECHNOLOGY INNOVATION ORGANIZATION	Employer identification number 52-1224577
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THAT UTILIZE BIOTECHNOLOGY, GENOMICS, BIOINFORMATICS OR OTHER RELATED NEW TECHNOLOGIES IN RESEARCH, DEVELOPMENT, TESTING, MANUFACTURING, OR SALES OF PRODUCT OR INFORMATION, AS WELL AS OTHER FIRMS THE BOARD SO CHARACTERIZES AND PLACES IN THIS CATEGORY. CORE MEMBERS SHALL BE GROUPED IN THE FOLLOWING SUBCATEGORIES: (I) EMERGING COMPANIES, WHICH ARE FIRMS THAT EMPLOY LESS THAN 350 PERSONS AND THAT DO NOT HAVE A THERAPEUTIC OR DIAGNOSTIC PRODUCT APPROVED FOR SALE IN THE U.S. MARKET; (II) ESTABLISHED FIRMS, WHICH ARE THOSE FIRMS THAT EMPLOY 350 OR MORE PERSONS OR THAT HAVE A THERAPEUTIC OR DIAGNOSTIC PRODUCT APPROVED FOR SALE IN THE U.S. MARKET; AND (III) LARGE FIRMS, WHICH ARE ESTABLISHED FIRMS THAT HAVE ANNUAL WORLDWIDE SALES OF BIOTECHNOLOGY PRODUCTS IN EXCESS OF \$1.5 BILLION; AND (IV) NON-DOMESTIC COMPANIES, WHICH ARE CORE MEMBERS WITHOUT SIGNIFICANT OPERATIONS IN THE UNITED STATES OR SIGNIFICANT COLLABORATIONS WITH A U.S. ENTITY.

(B) ASSOCIATE MEMBERS: ANY CORPORATION, PARTNERSHIP, ASSOCIATION, OR OTHER ENTITY ORGANIZED FOR PROFIT, A SUBSTANTIAL PORTION OF WHOSE ACTIVITIES INVOLVE PROVIDING SERVICES OR PRODUCTS OF BENEFIT TO COMPANIES WHOSE PRINCIPAL BUSINESS IS BIOTECHNOLOGY, IS ELIGIBLE FOR ASSOCIATE MEMBERSHIP. ASSOCIATE MEMBERS ARE THOSE COMMERCIAL ENTITIES WHICH DO NOT NECESSARILY UTILIZE BIOTECHNOLOGY; E.G. TECHNICAL SUPPORT, EQUIPMENT, CONSTRUCTION, ACCOUNTING, AND LAW FIRMS THAT SERVICE THE BIOTECHNOLOGY INDUSTRY, AS WELL AS OTHER FIRMS THAT THE BOARD CHARACTERIZES AND PLACES IN THIS CATEGORY.

(C) AFFILIATE MEMBERS: ANY GOVERNMENTAL OR NONPROFIT ENTITY OR COUNTRY, STATE OR REGIONAL INDUSTRY, TRADE OR PROFESSIONAL ASSOCIATION WITH AN INTEREST IN, OR A MANDATE TO PROMOTE THE DEVELOPMENT OF, BIOTECHNOLOGY IS ELIGIBLE FOR AFFILIATE MEMBERSHIP. THERE SHALL BE NO SIZE TESTS APPLIED TO AFFILIATE MEMBER APPLICANTS.

Name of the organization BIOTECHNOLOGY INNOVATION ORGANIZATION	Employer identification number 52-1224577
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(D) CENTER MEMBERS: ANY INSTITUTION, NOT GENERALLY ELIGIBLE FOR CORE MEMBERSHIP THAT IS SPONSORED BY A STATE, REGION, OR ACADEMIC INSTITUTION AND WORKS IN SUPPORT OF COMMERCIAL BIOTECHNOLOGY MAY BE ELIGIBLE FOR CONSIDERATION AS A CENTER MEMBER.

FORM 990, PART VI, SECTION A, LINE 7A:

AT ALL MEMBERSHIP MEETINGS OF THE ORGANIZATION, EACH CURRENT MEMBER SHALL HAVE ONE (1) VOTE AND MAY TAKE PART IN THE VOTING IN PERSON OR BY PROXY.

FOR EACH SECTION IN WHICH THE MEMBER PARTICIPATES, EACH MEMBER SHALL HAVE THE RIGHT TO VOTE ON THE ELECTION OF DIRECTORS FOR THE SECTION GOVERNING BOARD, BUT SHALL HAVE NO OTHER VOTING RIGHTS EXCEPT ON MATTERS BROUGHT TO THE MEMBERSHIP BY ANY SUCH GOVERNING BOARD OR THE ORGANIZATION'S BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 AND RELATED SCHEDULES ARE PREPARED BY THE ORGANIZATION'S CERTIFIED PUBLIC ACCOUNTANTS WITH INFORMATION PROVIDED BY AND UNDER THE GUIDANCE OF THE CHIEF FINANCIAL OFFICER (CFO). THE CFO AND THE CONTROLLER THOROUGHLY REVIEW ALL CALCULATIONS AND SCHEDULES TO CONFIRM THEY REFLECT THE ACTUAL FINANCIAL RESULTS OF THE ORGANIZATION. THE COMPLETE FORM 990 IS THEN REVIEWED INTERNALLY BY THE CFO, AND CONTROLLER IN CONSULTATION WITH LEGAL COUNSEL AND, AS APPROPRIATE, FURTHER CONSULTATION WITH THE ORGANIZATION'S CERTIFIED PUBLIC ACCOUNTANTS. ALL REVIEWS ARE COMPLETED BEFORE THE FORM IS FILED WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

Name of the organization BIOTECHNOLOGY INNOVATION ORGANIZATION	Employer identification number 52-1224577
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BIOTECHNOLOGY INNOVATION ORGANIZATION (BIO) TAKES SEVERAL STEPS TO ADDRESS COMPLIANCE BY KEY EMPLOYEES, OFFICERS AND DIRECTORS WITH ITS CONFLICTS OF INTEREST POLICY. BIO TRAINS ALL NEW EMPLOYEES AND DIRECTORS ON VARIOUS ASPECTS OF BIO'S COMPLIANCE PROGRAM, INCLUDING CONFLICTS OF INTEREST, AND BIO'S WRITTEN CONFLICTS OF INTEREST POLICY REQUIRES ALL EMPLOYEES TO DISCLOSE ANY OUTSIDE PERSONAL BUSINESS INTERESTS TO THEIR SUPERVISOR. BIO'S GENERAL COUNSEL REGULARLY ADVISES BIO'S EXECUTIVES AND SUPERVISORS ON SUCH MATTERS. BIO ALSO CONTRACTS WITH AN INDEPENDENT ORGANIZATION TO PROVIDE EMPLOYEES AND OTHERS WITH THE ABILITY TO FILE ANONYMOUS REPORTS CONCERNING THE VIOLATION OF ANY LAWS OR BIO POLICIES, INCLUDING ALLEGATIONS OF POTENTIAL CONFLICTS OF INTEREST, AND BIO HAS A PROCESS IN PLACE TO FOLLOW UP ON ANY SUCH COMPLAINTS IN A TIMELY AND THOROUGH MANNER. FURTHER, BIO UNDERTAKES A QUESTIONNAIRE SENT TO EACH DIRECTOR ON ITS BOARD OF DIRECTORS SEEKING DISCLOSURE OF ANY POTENTIAL CONFLICTS OF INTERESTS THEY MAY HAVE, OR THEIR FAMILY MEMBERS MAY HAVE, ASSOCIATED WITH BUSINESSES OR ORGANIZATIONS THAT DO BUSINESS WITH BIO. POTENTIAL CONFLICTS ARE MONITORED AND REVIEWED AT THE MANAGEMENT AND SENIOR MANAGEMENT LEVEL OF THE ORGANIZATION, AND DEPENDING ON THE CONFLICT, DETERMINATIONS MAY BE MADE AT THE BOARD OR SENIOR MANAGEMENT LEVEL. A CONFLICT AT THE BOARD LEVEL WILL NORMALLY RESULT IN RECUSAL OF THE INDIVIDUAL FROM PARTICIPATION OR ACTIVITIES WITH RESPECT TO THE RELEVANT SUBJECT MATTER. AT THE STAFF LEVEL, THE APPLICABLE BIO SUPERVISOR IS INFORMED OF THE POTENTIAL CONFLICT AND IS REQUIRED TO TAKE ALL APPROPRIATE STEPS TO ENSURE THAT THE INDIVIDUAL DOES NOT PARTICIPATE IN, OR RECEIVE CONFIDENTIAL INFORMATION RELATING TO, ANY BIO ACTIVITY RELATED TO THE SUBJECT MATTER OF THE CONFLICT, UP TO AND INCLUDING, WHERE APPROPRIATE, TERMINATION OF SUCH EMPLOYEE.

FORM 990, PART VI, SECTION B, LINE 15:

Name of the organization	BIOTECHNOLOGY INNOVATION ORGANIZATION	Employer identification number	52-1224577
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FOR 2021, THE PRESIDENT AND CHIEF EXECUTIVE OFFICER (CEO) OF BIO (BIOTECHNOLOGY INNOVATION ORGANIZATION 52-1224577) WAS COMPENSATED PER THE TERMS OF A MULTI-YEAR CONTRACT THAT WAS DETERMINED WITH INDEPENDENT REVIEW, COMPARABILITY DATA, AND CONTEMPORANEOUS SUBSTANTIATION OF THE DELIBERATION AND DECISION, AS INDICATED IN PRIOR FORM 990 SUBMISSIONS. IN ADDITION, BASED ON THE EXECUTIVE COMMITTEE'S EVALUATION OF THE PRESIDENT AND CEO'S PERFORMANCE FOR 2021, THE COMMITTEE DETERMINED THE APPROPRIATE AMOUNT FOR THE DISCRETIONARY COMPONENT OF COMPENSATION FOR THAT YEAR, IN ACCORDANCE WITH THE RELEVANT PROVISION OF THE EXECUTIVE AGREEMENT. DECISIONS REGARDING THE COMPENSATION FOR OFFICERS AND KEY EMPLOYEES OF THE ORGANIZATION ARE NEGOTIATED INDIVIDUALLY AND ARE PERFORMANCE-BASED, IN ACCORDANCE WITH AN ANNUAL WRITTEN EVALUATION PROCESS THAT HAS BEEN ESTABLISHED FOR ALL EMPLOYEES OF THE ORGANIZATION. AN INDEPENDENT CONSULTANT PROVIDES COMPARATIVE BENCHMARKING SERVICES FOR SENIOR MANAGEMENT POSITIONS, AND OTHER INFORMATION ON COMPENSATION ISSUES, TRENDS, POLICIES, AND BEST PRACTICES FOR USE BY THE ORGANIZATION. THE ORGANIZATION ALSO HAS AN ESTABLISHED COMPENSATION POLICY FOR ALL OF ITS EMPLOYEES, WHICH SETS FORTH THE GENERAL PARAMETERS GOVERNING BIO'S COMPENSATION PRACTICES.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC.

FORM 990, PART IX, LINE 11G, OTHER FEES:

BIO-PAC ADMINISTRATIVE	29,094.
BUSINESS STRATEGIES	4,034.
CONSULTANTS AND OTHER PROFESSIONAL FEES	3,664,915.
EC EMERGING PRIORITIES	-38,110.

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization **BIOTECHNOLOGY INNOVATION ORGANIZATION** Employer identification number **52-1224577**

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
EXCELLENCE THROUGH STEWARDSHIP - 26-3021330 1201 MARYLAND AVE SW SUITE 900 WASHINGTON, DC 20024	TO SUPPORT THE PURSUIT OF LIFELONG LEARNING ABOUT THE PROMISE, ACHIEVEMENTS	DISTRICT OF COLUMBIA	501(C)(4)				X
BIOTECHNOLOGY INSTITUTE - 25-1716917 1201 MARYLAND AVE SW SUITE 900 WASHINGTON, DC 20024	TO SUPPORT THE PURSUIT OF LIFELONG LEARNING ABOUT THE CHALLENGES OF BIOTECH.	DISTRICT OF COLUMBIA	501(C)(3)	LINE 7			X

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

Schedule R (Form 990) 2021

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

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

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

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

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)	X	
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)	X	
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
o Sharing of paid employees with related organization(s)		X
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses	X	
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) EXCELLENCE THROUGH STEWARDSHIP	B	54,996.	
(2) EXCELLENCE THROUGH STEWARDSHIP	Q	38,371.	
(3) THE BIOTECHNOLOGY INSTITUTE	D	84,004.	
(4) THE BIOTECHNOLOGY INSTITUTE	B	55,240.	
(5)			
(6)			

