

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form 990

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

2023

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 **2023** calendar year, or tax year beginning **APR 1, 2023** and ending **MAR 31, 2024**

B Check if applicable: Address change Name change Initial return Final return/terminated Amended return Application pending	C Name of organization BRIGHTFOCUS FOUNDATION		D Employer identification number 23-7337229
	Doing business as		E Telephone number (301) 948-3244
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 99,554,872.
	22512 GATEWAY CENTER DRIVE		H(a) Is this a group return for subordinates? Yes <input checked="" type="checkbox"/> No
City or town, state or province, country, and ZIP or foreign postal code CLARKSBURG, MD 20871		H(b) Are all subordinates included? Yes No	If "No," attach a list. See instructions
F Name and address of principal officer: STACY PAGOS HALLER SAME AS C ABOVE		H(c) Group exemption number	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527			
J Website: WWW.BRIGHTFOCUS.ORG			
K Form of organization: <input checked="" type="checkbox"/> Corporation Trust Association Other			L Year of formation: 1973 M State of legal domicile: DC

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: BRIGHTFOCUS FOUNDATION (BRIGHTFOCUS) SEEKS A WORLD FREE FROM DISEASES OF MIND AND SIGHT.		
	2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	11
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	11
	5 Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	69
	6 Total number of volunteers (estimate if necessary)	6	70
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 43,451,535.	Current Year 43,373,203.
	9 Program service revenue (Part VIII, line 2g)	0.	0.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-268,284.	4,702,264.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	710,546.	587,403.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	43,893,797.	48,662,870.
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	14,321,603.
14 Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		6,392,782.	6,876,671.
16a Professional fundraising fees (Part IX, column (A), line 11e)		942,971.	952,781.
b Total fundraising expenses (Part IX, column (D), line 25)		12,200,813.	
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		26,850,858.	27,683,861.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	48,508,214.	46,217,406.	
19 Revenue less expenses. Subtract line 18 from line 12	-4,614,417.	2,445,464.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 58,626,477.	End of Year 63,464,652.
	21 Total liabilities (Part X, line 26)	35,064,709.	37,245,915.
	22 Net assets or fund balances. Subtract line 21 from line 20	23,561,768.	26,218,737.

Part II Signature Block

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

Sign Here	<i>Stacy Pagos Haller</i> Signature of officer		December 5, 2024 Date		
	STACY PAGOS HALLER, PRESIDENT/CEO Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed	PTIN
	FRANK SMITH	FRANK SMITH	12/04/24	<input type="checkbox"/>	P00639053
Firm's name CBIZ ADVISORS, LLC			Firm's EIN 88-1478669		
Firm's address 1899 L STREET, NW #850 WASHINGTON, DC 20036			Phone no. 202-227-4000		

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

LHA For Paperwork Reduction Act Notice, see the separate instructions.

332001 12-21-23

Form **990** (2023)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

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: BRIGHTFOCUS FOUNDATION FUNDS EXCEPTIONAL RESEARCH WORLDWIDE TO DEFEAT ALZHEIMER'S DISEASE, MACULAR DEGENERATION, AND GLAUCOMA AND PROVIDES EXPERT INFORMATION ON THESE HEARTBREAKING DISEASES. PLEASE REFER TO SCHEDULE O FOR A COMPLETE OVERVIEW OF OUR MISSION.

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 \$ 17,770,389. including grants of \$ 6,604,227.) (Revenue \$) ALZHEIMER'S DISEASE RESEARCH (ADR)

PLEASE REFER TO SCHEDULE O FOR A COMPLETE DESCRIPTION OF THE ACCOMPLISHMENTS FOR ALZHEIMER'S DISEASE RESEARCH.

4b (Code:) (Expenses \$ 8,973,678. including grants of \$ 3,334,998.) (Revenue \$) MACULAR DEGENERATION RESEARCH (MDR)

PLEASE REFER TO SCHEDULE O FOR A COMPLETE DESCRIPTION OF THE ACCOMPLISHMENTS FOR MACULAR DEGENERATION RESEARCH.

4c (Code:) (Expenses \$ 2,058,076. including grants of \$ 764,868.) (Revenue \$) NATIONAL GLAUCOMA RESEARCH (NGR)

PLEASE REFER TO SCHEDULE O FOR A COMPLETE DESCRIPTION OF THE ACCOMPLISHMENTS FOR NATIONAL GLAUCOMA RESEARCH.

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

4e Total program service expenses 28,802,143.

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>	X	
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>		X
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>		X
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 noncash 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>		X
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 response boxes. Includes questions 2a through 17 regarding employee counts, tax returns, gross 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 [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (11); 1b Enter the number of voting members included on line 1a, above, who are independent (11); 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); 7b 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.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? (X); 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? (X); 11b 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); 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (X); 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done (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); 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed AK, AL, AR, CA, CT, FL, GA, HI, IL, KS, KY, ME
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. [X] Own website [X] Another's website [X] 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
JONATHAN WALSH - 301-556-9385
22512 GATEWAY CENTER DRIVE, CLARKSBURG, MD 20871

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, box 6 of 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) STACY PAGOS HALLER PRESIDENT/CEO	45.00			X			410,407.	0.	57,485.	
(2) NANCY LYNN SR. VP STRATEGIC PARTNERSHIPS	45.00				X		261,148.	0.	61,492.	
(3) R. BRIAN ELDETON SR. VP, DEVELOPMENT	45.00				X		253,852.	0.	48,328.	
(4) DIANE BOVENKAMP, PHD VP, SCIENTIFIC AFFAIRS	45.00				X		190,217.	0.	22,240.	
(5) DAVID F. MARKS, CPA, CMA VP, FINANCE & ADMIN TILL 10/2023	45.00				X		156,941.	0.	54,684.	
(6) KACI BAEZ VP, INTEGRATED MKTING & COMM.	45.00				X		172,602.	0.	26,649.	
(7) SHARYN ROSSI, PHD, DIR. OF SCIENT. PROGRAMS, NEUROSCIENCE	40.00					X	125,361.	0.	43,832.	
(8) LISA MORGAN DIRECTOR OF ANNUAL GIVING	40.00					X	128,316.	0.	33,647.	
(9) AYO ABRAHAM, CPA, CGMA CONTROLLER UNTIL 8/2023	40.00					X	138,926.	0.	21,356.	
(10) JEFFREY HONAKER SR. MGR. OPS AND BUILDING	40.00					X	112,157.	0.	44,404.	
(11) PREETI SUBRAMANIAN, PHD, DIR. OF SCIENT. PROGRAMS, VISION SCIENCE	40.00					X	135,115.	0.	15,657.	
(12) PATRICIA M. STEWART CHAIR	10.00	X		X			0.	0.	0.	
(13) CECILIA ARRADAZA VICE CHAIR	6.00	X		X			0.	0.	0.	
(14) SCOTT KAISER, MD, DIRECTOR UNTIL 10/2023 THEN SECRETARY	6.00	X		X			0.	0.	0.	
(15) EDWARD FINLEY TREASURER - UNTIL 12/2023	8.00	X		X			0.	0.	0.	
(16) SHAWA GOTTLIEB TREASURER - AS OF 12/2023	6.00	X		X			0.	0.	0.	
(17) PAUL CAMPBELL DIRECTOR	5.00	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) HERBERT L. DRAYTON III DIRECTOR - AS OF 6/2023	5.00	X						0.	0.	0.
(19) DANA GRIFFIN DIRECTOR	5.00	X						0.	0.	0.
(20) TONYA MATTHEWS, PHD DIRECTOR	5.00	X						0.	0.	0.
(21) ANN SECLOW DIRECTOR	5.00	X						0.	0.	0.
(22) JAN M. STOUFFER, PHD DIRECTOR	6.00	X						0.	0.	0.
(23) THOMAS F. FREDDO, OD, PHD DIRECTOR - AS OF 6/2023	5.00	X						0.	0.	0.
1b Subtotal							2,085,042.	0.	429,774.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							2,085,042.	0.	429,774.	

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 11

	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>		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>	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>		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
RKD GROUP, 35 PARKWOOD DRIVE, SUITE 160, HOPKINTON, MA 01748	PUBLIC AWARENESS CONSULTING & MATERIA	9,668,749.
ADSTRA LLC, 750 COLLEGE ROAD EAST, STE 201, PRINCETON, NJ 08540	MAIL LIST RENTAL	1,382,715.
ALLEGIANCE GROUP, 2300 CLARENDON BLVD., SUITE 925, ARLINGTON, VA 22201	ONLINE PUBLIC AWARENESS CONSULTING	622,303.
THREESIXTYEIGHT, 212 S 14TH STREET, SUITE B, BATON ROUGE, LA 70802	ONLINE MARKETING CONSULTING	352,659.
DATA MANAGEMENT, INC. 160 STONE STREET, STONEVILLE, NC 27048	DATABASE MANAGEMENT	273,722.

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 17

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 144,175.				
	b	Membership dues	1b				
	c	Fundraising events	1c 250,290.				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above ...	1f 42978738.				
	g	Noncash contributions included in lines 1a-1f	1g \$ 87,848.				
	h	Total. Add lines 1a-1f		43373203.			
Program Service Revenue	2 a	_____	Business Code				
	b	_____					
	c	_____					
	d	_____					
	e	_____					
	f	All other program service revenue					
	g	Total. Add lines 2a-2f					
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		798,230.		798,230.	
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties		453,517.		453,517.	
	6 a	Gross rents	(i) Real	6a 658,538.			
			(ii) Personal	6b 190,252.			
				6c 468,286.			
	d	Net rental income or (loss)		468,286.		468,286.	
	7 a	Gross amount from sales of assets other than inventory	(i) Securities	7a 54207314			
			(ii) Other	7b 50303280			
				7c 3904034.			
	d	Net gain or (loss)		3,904,034.		3904034.	
	8 a	Gross income from fundraising events (not including \$ 250,290. of contributions reported on line 1c). See Part IV, line 18		8a 64,000.			
				8b 398,470.			
	c	Net income or (loss) from fundraising events		-334,470.		-334,470.	
9 a	Gross income from gaming activities. See Part IV, line 19		9a				
			9b				
c	Net income or (loss) from gaming activities						
10 a	Gross sales of inventory, less returns and allowances		10a				
			10b				
c	Net income or (loss) from sales of inventory						
Miscellaneous Revenue	11 a	OTHER INCOME	Business Code	90099	70.	70.	
	b	_____					
	c	_____					
	d	All other revenue					
	e	Total. Add lines 11a-11d		70.			
12	Total revenue. See instructions		48662870.	0.	0.	5289667.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	7,478,202.	7,478,202.		
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	3,225,891.	3,225,891.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,673,188.	1,075,672.	284,661.	312,855.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	3,983,008.	1,920,677.	1,463,124.	599,207.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	219,886.	105,789.	83,997.	30,100.
9 Other employee benefits	663,765.	344,647.	218,083.	101,035.
10 Payroll taxes	336,824.	177,521.	105,575.	53,728.
11 Fees for services (nonemployees):				
a Management				
b Legal	75,990.	38,302.	27,836.	9,852.
c Accounting	81,938.	41,300.	30,015.	10,623.
d Lobbying				
e Professional fundraising services. See Part IV, line 17	952,781.			952,781.
f Investment management fees	273,750.		273,750.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	1,594,728.	1,474,665.	120,063.	
12 Advertising and promotion	1,079,425.	596,196.		483,229.
13 Office expenses	970,677.	337,172.	453,550.	179,955.
14 Information technology	831,368.	533,749.	195,594.	102,025.
15 Royalties				
16 Occupancy	450,550.	263,051.	141,343.	46,156.
17 Travel	333,566.	258,676.	36,837.	38,053.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	1,447,219.	1,387,712.	15,731.	43,776.
20 Interest	335,181.		335,181.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	611,056.	324,229.	207,081.	79,746.
23 Insurance	89,387.	38,558.	29,158.	21,671.
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 PUB. AWARENESS POSTAGE	8,449,837.	4,024,943.	525,953.	3,898,941.
b PUB. AWARENESS PRINTING	7,323,026.	3,404,221.	456,105.	3,462,700.
c PUB. AWARENESS COMP.	2,088,455.	996,071.	108,658.	983,726.
d LIST RENTAL	1,647,708.	754,899.	102,155.	790,654.
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	46,217,406.	28,802,143.	5,214,450.	12,200,813.
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 <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720)	18,479,592.	7,878,147.	1,129,037.	9,472,408.

Part X Balance Sheet

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

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash - non-interest-bearing	205,653.	1	829,628.
	2 Savings and temporary cash investments	3,889,254.	2	8,516,562.
	3 Pledges and grants receivable, net	6,522,988.	3	6,199,054.
	4 Accounts receivable, net	165,585.	4	23,832.
	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	51,738.	8	28,325.
	9 Prepaid expenses and deferred charges	50,244.	9	998,282.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 13,397,952.		
	b Less: accumulated depreciation	10b 5,550,668.	10c	7,847,284.
	11 Investments - publicly traded securities	39,542,541.	11	31,237,150.
	12 Investments - other securities. See Part IV, line 11		12	7,784,535.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	70,195.	15	0.
16 Total assets. Add lines 1 through 15 (must equal line 33)	58,626,477.	16	63,464,652.	
Liabilities	17 Accounts payable and accrued expenses	1,112,727.	17	2,580,327.
	18 Grants payable	33,119,925.	18	24,991,458.
	19 Deferred revenue	116,500.	19	0.
	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	0.	23	9,000,000.
	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	715,557.	25	674,130.
	26 Total liabilities. Add lines 17 through 25	35,064,709.	26	37,245,915.
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	10,360,299.	27	12,270,789.
	28 Net assets with donor restrictions	13,201,469.	28	13,947,948.
	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	23,561,768.	32	26,218,737.
33 Total liabilities and net assets/fund balances	58,626,477.	33	63,464,652.	

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	48,662,870.
2	Total expenses (must equal Part IX, column (A), line 25)	2	46,217,406.
3	Revenue less expenses. Subtract line 2 from line 1	3	2,445,464.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	23,561,768.
5	Net unrealized gains (losses) on investments	5	-94,500.
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	306,005.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	26,218,737.

Part XII Financial Statements and Reporting

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

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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?		X
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:		
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
b Were the organization's financial statements audited by an independent accountant?	X	
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:		
<input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> 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?	X	
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 Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		X
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		

Form 990 (2023)

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	35740875.	48502473.	46522410.	43451535.	43373203.	217590496
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	35740875.	48502473.	46522410.	43451535.	43373203.	217590496
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						431,008.
6 Public support. Subtract line 5 from line 4.						217159488

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4	35740875.	48502473.	46522410.	43451535.	43373203.	217590496
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	2176998.	1887633.	2074361.	1972869.	1910285.	10022146.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)			7,500.		70.	7,570.
11 Total support. Add lines 7 through 10						227620212
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f))	14	95.40	%
15 Public support percentage from 2022 Schedule A, Part II, line 14	15	95.30	%
16a 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input checked="" type="checkbox"/>
b 33 1/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions			<input type="checkbox"/>

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2022 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2022 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2023. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2022. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? Sub-rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? Row 2: Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? Row 2: Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? Row 3: By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year?

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). Sub-rows a, b, c. Row 2: Activities Test. Answer lines 2a and 2b below. Sub-rows a, b. Row 3: Parent of Supported Organizations. Answer lines 3a and 3b below. Sub-rows a, b.

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

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

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

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2023 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1 Distributable amount for 2023 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2023 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2023			
a From 2018			
b From 2019			
c From 2020			
d From 2021			
e From 2022			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2023 distributable amount			
i Carryover from 2018 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2023 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2023 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2024. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2019			
b Excess from 2020			
c Excess from 2021			
d Excess from 2022			
e Excess from 2023			

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

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

SAVINGS BOND PAYOUT

2021 AMOUNT: \$ 7,500.

MISCELLANEOUS

2023 AMOUNT: \$ 70.

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2023

Name of the organization

BRIGHTFOCUS FOUNDATION

Employer identification number

23-7337229

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (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).

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

Schedule B (Form 990) (2023)

Name of organization BRIGHTFOCUS FOUNDATION	Employer identification number 23-7337229
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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/>	\$ <u>1,801,293.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ <u>1,412,000.</u>	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 BRIGHTFOCUS FOUNDATION	Employer identification number 23-7337229
---	---

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
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	

Name of organization BRIGHTFOCUS FOUNDATION	Employer identification number 23-7337229
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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	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(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

2023

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.

Table with 2 columns: Name of organization (BRIGHTFOCUS FOUNDATION) and Employer identification number (23-7337229)

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.

Table with 5 columns: (a) Name, (b) Address, (c) EIN, (d) Amount paid from filing organization's funds, (e) Amount of political contributions received and promptly and directly delivered to a separate political organization.

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

Schedule C (Form 990) 2023

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)	0.													
b Total lobbying expenditures to influence a legislative body (direct lobbying)	0.													
c Total lobbying expenditures (add lines 1a and 1b)	0.													
d Other exempt purpose expenditures	45,579,597.													
e Total exempt purpose expenditures (add lines 1c and 1d)	45,579,597.													
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000.													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%; text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">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)	250,000.													
h Subtract line 1g from line 1a. If zero or less, enter -0-	0.													
i Subtract line 1f from line 1c. If zero or less, enter -0-	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) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.
c Total lobbying expenditures					
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
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
<i>For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.</i>			
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 not be 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?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3	

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

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

Part IV Supplemental Information

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

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

2023

Open to Public Inspection

Name of the organization BRIGHTFOCUS FOUNDATION Employer identification number 23-7337229

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 about donor property and grant fund usage.

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of easements, a table for 2a-2d (Total number, acreage, certified historic structures, and non-certified historic structures), and questions about monitoring, expenses, and 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.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include questions about reporting requirements for art and historical treasures, and a table for revenue and assets included.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2023

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 in Part XIII

Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	310,022.	325,000.	302,000.	302,000.	302,000.
b Contributions	23,199.	14,978.	13,634.	14,744.	14,778.
c Net investment earnings, gains, and losses	-23,199.	-14,978.	23,000.		
d Grants or scholarships					
e Other expenditures for facilities and programs	23,199.	14,978.	13,634.	14,744.	14,778.
f Administrative expenses					
g End of year balance	286,823.	310,022.	325,000.	302,000.	302,000.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment .0000 %
 - b Permanent endowment 100 %
 - c Term endowment .0000 %
- 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? | X | |
| (ii) Related organizations? | | X |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | | |
- 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	2,800,000.	1,147,363.		3,947,363.
b Buildings	1,629,400.	5,422,721.	4,283,276.	2,768,845.
c Leasehold improvements				
d Equipment		2,181,715.	1,068,672.	1,113,043.
e Other		216,753.	198,720.	18,033.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				7,847,284.

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) MAKENA PERPETUAL PRIVATE		
(B) EQUITY FUND	3,717,628.	END-OF-YEAR MARKET VALUE
(C) MAKENA PERPETUAL VENTURE		
(D) CAPITAL FUND	4,066,907.	END-OF-YEAR MARKET VALUE
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))	7,784,535.	

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, line 13, col. (B))		

Part IX Other Assets

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

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

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) CHARITABLE GIFT ANNUITIES	536,350.
(3) CAPITAL LEASE OBLIGATIONS	112,780.
(4) RENTAL DEPOSITS	25,000.
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	674,130.

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 ...

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	73,443,828.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	a Net unrealized gains (losses) on investments	2a	-94,500.	
	b Donated services and use of facilities	2b	24,713,985.	
	c Recoveries of prior year grants	2c	435,223.	
	d Other (Describe in Part XIII.)	2d		
	e Add lines 2a through 2d	2e	25,054,708.	
3	Subtract line 2e from line 1		3	48,389,120.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a	273,750.	
	b Other (Describe in Part XIII.)	4b		
	c Add lines 4a and 4b	4c	273,750.	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	48,662,870.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	70,786,859.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	a Donated services and use of facilities	2a	24,713,985.	
	b Prior year adjustments	2b		
	c Other losses	2c		
	d Other (Describe in Part XIII.)	2d		
	e Add lines 2a through 2d	2e	24,713,985.	
3	Subtract line 2e from line 1		3	46,072,874.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a	273,750.	
	b Other (Describe in Part XIII.)	4b	-129,218.	
	c Add lines 4a and 4b	4c	144,532.	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	46,217,406.

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART V, LINE 4:

THE EARNINGS ON THIS ENDOWMENT ARE AVAILABLE FOR THE ALZHEIMER'S DISEASE RESEARCH PROGRAM, ARE RECORDED AS TEMPORARILY RESTRICTED INVESTMENT INCOME, AND ARE RELEASED AS SPENT.

PART X, LINE 2:

BRIGHTFOCUS PERFORMED AN EVALUATION OF UNCERTAINTY IN INCOME TAXES FOR THE YEAR ENDED MARCH 31, 2024, AND DETERMINED THAT THERE WERE NO MATTERS THAT WOULD REQUIRE RECOGNITION IN THE CONSOLIDATED FINANCIAL STATEMENTS OR THAT MAY HAVE ANY EFFECT ON ITS TAX-EXEMPT STATUS.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

Part XIII Supplemental Information (continued)

CHANGE IN PRESENT VALUE OF GRANTS -129,218.

Multiple horizontal lines for supplemental information.

**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

2023

Open to Public
Inspection

Name of the organization

Employer identification number

BRIGHTFOCUS FOUNDATION

23-7337229

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
EAST ASIA AND THE PACIFIC	0	0	GRANTMAKING		499,924.
EUROPE	0	0	GRANTMAKING		2,067,294.
NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	0	0	GRANTMAKING		658,672.
3 a Subtotal	0	0			3,225,890.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			3,225,890.

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

Schedule F (Form 990) 2023

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	MACULAR DEGENERATION RESEARCH BY BRITTANY CARR, PHD, ENTITLED: (M2024011N)	450,000.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	MACULAR DEGENERATION RESEARCH BY MAXIMILIAN PFAU, PHD, ENTITLED: (M2024009N)	330,400.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	ALZHEIMER'S DISEASE RESEARCH BY MARIA LLORENS-MARTN, PHD, ENTITLED: (A2024021S)	300,000.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	ALZHEIMER'S DISEASE RESEARCH BY EMANUELA PASCIUTO, PHD, ENTITLED: (A2024020S)	300,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	ALZHEIMER'S DISEASE RESEARCH BY GUOJUN BU, PHD, ENTITLED: (A2024019S)	300,000.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	ALZHEIMER'S DISEASE RESEARCH BY RAFFAELLA NATIVIO, PHD, ENTITLED: (A2024018S)	299,943.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	BIRAX RESEARCH FUNDING, ENTITLED: (CA2023002)	202,027.	WIRE TRANSFER	0.		
		NORTH AMERICA	ALZHEIMER'S DISEASE RESEARCH BY JULIE OTTOY, PHD, ENTITLED: (A2024012F)	200,000.	WIRE TRANSFER	0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 14

3 Enter total number of other organizations or entities 0

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND AND GREENLAND)	ALZHEIMER'S DISEASE RESEARCH BY GEMMA SALVAD, PHD, ENTITLED: (A2024007F)	200,000.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	ALZHEIMER'S DISEASE RESEARCH BY HELENA GELLERSEN, PHD, ENTITLED: (A2024013F)	199,967.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	NATIONAL GLAUCOMA RESEARCH BY JENNIFER FAN GASKIN, MBCHB, MD, FRANZCO,	199,924.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	ALZHEIMER'S DISEASE RESEARCH BY MARTIN J. DAHL, PHD, PHD, ENTITLED: (A2024006F)	199,130.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	NATIONAL GLAUCOMA RESEARCH BY DARRYL OVERBY, PHD, ENTITLED: (CG2020003)	35,828.	WIRE TRANSFER	0.		
		NORTH AMERICA	MIND AND SIGHT DISEASES RESEARCH FUNDING, ENTITLED: (CA2023003)	6,672.	WIRE TRANSFER	0.		

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

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 the 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 the 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 the 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 the 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 the 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 the 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:

BRIGHTFOCUS INTERACTS WITH ALL GRANTEES AT LEAST QUARTERLY BY E-MAIL OR AT SCIENTIFIC MEETINGS. IN ADDITION TO THESE INTERACTIONS, EACH GRANT RECIPIENT IS REQUIRED TO SUBMIT SEPARATE DETAILED ANNUAL SCIENTIFIC PROGRESS AND FINANCIAL REPORTS TO BRIGHTFOCUS. THESE ARE RECEIVED BY THE BRIGHTFOCUS SCIENTIFIC AFFAIRS DEPARTMENT, AND REVIEWED BY SCIENTIFIC STAFF WITH BROAD EXPERTISE, INCLUDING IMAGING, MOLECULAR BIOLOGY AND SIGNALING PATHWAYS, CELL BIOLOGY, ANGIOGENESIS, BIOCHEMISTRY, NEUROSCIENCE, AND GENETICS. SENIOR STAFF REVIEWS EACH PROGRESS REPORT AND EVALUATES THE PROJECT FOR SUFFICIENT PROGRESS TOWARDS THE SPECIFIC AIMS PROPOSED IN THE ORIGINAL APPLICATION OR ANY BUDGETARY CONCERNS. THIS EFFORT IS SUPPORTED BY ADDITIONAL SCIENTIFIC COUNSEL FROM MEMBERS OF THE BRIGHTFOCUS SCIENTIFIC REVIEW COMMITTEES, WHEN REQUIRED. IN ADDITION TO STATEMENTS OF EXPERIMENTAL PROGRESS, ALL GRANTEES ARE ASKED TO REPORT ANY TECHNICAL PUBLICATIONS, MEDIA REPORTS, OR PATENT APPLICATIONS IN WHICH BRIGHTFOCUS-SPONSORED RESEARCH IS DESCRIBED. IF SIGNIFICANT CONCERNS RELATED TO PROGRESS ON THE AWARDS ARE DISCOVERED, AND NOT RESOLVED AFTER INTERACTION WITH THE AWARD GRANTEE, THE BRIGHTFOCUS STAFF RECOMMENDS APPROPRIATE ACTIONS TO THE CHAIR OF THE SCIENTIFIC AFFAIRS COMMITTEE OF THE BOARD OF DIRECTORS. IN ACCORDANCE WITH THE GRANT AGREEMENT TERMS AND CONDITIONS, BRIGHTFOCUS MAY WITHHOLD FUNDING, OR DISCONTINUE AN AWARD, FOR ANY GRANTEE THAT FAILS TO ACHIEVE SUFFICIENT PROGRESS OR SUBMIT REQUIRED REPORTS.

AT THE CONCLUSION OF THE GRANT AWARD PERIOD, EACH GRANTEE MUST COMPLETE AND SUBMIT A FINAL REPORT THAT IS ALSO REVIEWED BY THE BRIGHTFOCUS SENIOR SCIENTIFIC STAFF. EVALUATION OF THE WORK OF EACH GRANTEE IS QUALITATIVELY

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.

AND QUANTITATIVELY ASSESSED THROUGH VARIOUS METRICS RELATED TO THE IMPACT OF THE GRANT ON ITS TARGETED DISEASE FIELD. SUCH IMPACT METRICS HAVE REVEALED THAT 95% OF BRIGHTFOCUS-SUPPORTED RESEARCH RESULTS IN RESEARCH PUBLICATIONS THAT ADVANCE THE FIELDS SERVED BY BRIGHTFOCUS. THIS IMPACT IS FURTHER SUPPORTED BY ANNUAL CATEGORY NORMALIZED CITATION IMPACT ANALYSIS THAT COMPARES BRIGHTFOCUS-SUPPORTED WORKS TO AN UNBIASED COMPARISON OF IMPACT PERFORMANCE VERSUS THE WORLD AVERAGE. BRIGHTFOCUS-SUPPORTED PUBLICATIONS WERE RECENTLY CITED AT 2 TIMES THE FREQUENCY OF THE WORLD AVERAGE. A FINAL EXAMPLE OF IMPACT ASSESSMENT REVEALED THAT THE SUCCESSES OF BRIGHTFOCUS GRANTEES CONTINUE LONG AFTER THE GRANT EXPIRES. ON AVERAGE, EACH GRANTEE RECEIVES ADDITIONAL GRANTS FOR FOLLOW-ON PROJECTS SPAWNED BY THE BRIGHTFOCUS GRANT, WITH VALUES UP TO 10 TIMES THE LEVEL OF THE INITIAL BRIGHTFOCUS INVESTMENT.

BRIGHTFOCUS SOLICITS FEEDBACK FROM ITS GRANTEES, AND PROVIDES AN ANONYMOUS FORUM FOR COLLECTING SUCH INFORMATION. THROUGH THE BRIGHTFOCUS FOUNDATION WEBSITE AND WITHIN THE SCIENTIFIC PROGRESS REPORTS, THERE ARE DESIGNATED SECTIONS WHERE AWARDEES ARE ASKED TO PROVIDE FEEDBACK TO THE FOUNDATION. THROUGH THIS MECHANISM, THEY ARE GIVEN THE ABILITY TO ANONYMOUSLY PROVIDE FEEDBACK OR COMMUNICATE THEIR CONCERNS TO PROGRAM STAFF OR THE BRIGHTFOCUS' COMPLIANCE OFFICE. ANY SUGGESTIONS, CONCERNS, COMPLAINTS, OR POSITIVE EXPERIENCES CAN BE OUTLINED AND BROUGHT TO THE ATTENTION OF BRIGHTFOCUS IN THIS MANNER, SO THAT BRIGHTFOCUS CAN ADDRESS ANY AREAS NEEDING IMPROVEMENT, REAFFIRM PRAISE-WORTHY POLICIES, OR OTHERWISE ASSESS NEEDS FOR PROGRAMMATIC CHANGE. THE SENIOR LEADERSHIP PRESENTS AND SUMMARIZES THE STATUS AND PROGRESS ON GRANTS TO THE BRIGHTFOCUS BOARD OF DIRECTORS AT EACH OF THEIR QUARTERLY BOARD MEETINGS.

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 3:

BRIGHTFOCUS REPORTED THE EXPENDITURES BASED ON THE ACCOUNTING METHOD USED IN ITS AUDITED FINANCIAL STATEMENTS WHICH IS ON AN ACCRUAL BASIS.

PART II, LINE 1:

BRIGHTFOCUS REPORTED THE EXPENDITURES BASED ON THE ACCOUNTING METHOD USED IN ITS AUDITED FINANCIAL STATEMENTS WHICH IS ON AN ACCRUAL BASIS.

PART II, LINE 1, COLUMN (D)

REGION: EUROPE (INCLUDING ICELAND AND GREENLAND) (D) PURPOSE OF GRANT:

ALZHEIMER'S DISEASE RESEARCH BY MARTIN J. DAHL, PHD, ENTITLED:

(A2024006F) SHINING A LIGHT ON HOW EARLY TAU-RELATED BRAIN CHANGES

AFFECT MEMORY LOSS. INVESTIGATOR'S SUMMARY: THIS PROJECT SPOTLIGHTS

PREVIOUSLY UNDERSTUDIED BRAIN REGIONSTINY NUCLEI IN THE BRAINSTEMTHAT

ARE THE STARTING POINT OF ALZHEIMER'S-RELATED TAU ACCUMULATION AND

INVESTIGATES HOW THEIR CHANGES CONTRIBUTE TO MEMORY LOSS. USING

INNOVATIVE BRAIN IMAGING TECHNIQUES, BLOOD-BASED BIOMARKERS, AND MEMORY

ASSESSMENTS COLLECTED OVER A DECADE FROM A LARGE NUMBER OF

PARTICIPANTS, THIS PROJECT IMPROVES OUR UNDERSTANDING OF THE TIME

COURSE OF NEURAL CHANGES IN LATER LIFE AND THEIR MECHANISTIC ROLE IN

THE EARLIEST STAGES OF ALZHEIMER'S DEVELOPMENT. GRANT AWARDED:

\$199,130, MAX PLANCK INSTITUTE FOR HUMAN DEVELOPMENT, BERLIN, GERMANY.

REGION: EUROPE (INCLUDING ICELAND AND GREENLAND) (D) PURPOSE OF GRANT:

ALZHEIMER'S DISEASE RESEARCH BY GEMMA SALVAD, PHD, ENTITLED:

(A2024007F) STAGING ALZHEIMER'S DISEASE WITH BLOOD-BASED MEASURES.

INVESTIGATOR'S SUMMARY: RESEARCHERS WILL DEVELOP A STAGING MODEL FOR

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.

ALZHEIMER'S DISEASE BASED ON PLASMA BIOMARKERS, WHICH WILL HELP CHARACTERIZE PEOPLE ACROSS THE DIFFERENT PHASES OF THE DISEASE. THE STUDY WILL ALSO INVESTIGATE HOW MULTIPLE PROTEIN LEVELS CHANGE ACROSS THESE STAGES TO BETTER UNDERSTAND THE COMPLEX BIOLOGICAL PROCESSES THAT OCCUR DURING THE DISEASE. RESEARCHERS ENVISION THAT THE STAGING MODEL MAY HELP DECIDE, IN AN EASY AND COST-EFFECTIVE WAY, WHO WOULD BENEFIT FROM A TREATMENT AGAINST ALZHEIMER'S DISEASE AND PERFORM A MORE PERSONALIZED MANAGEMENT OF THE INDIVIDUAL. STUDYING PROTEIN CHANGES MAY ALSO UNVEIL NEW DRUG TARGETS FOR ALZHEIMER'S. GRANT AWARDED: \$200,000, LUND UNIVERSITY, LUND, SWEDEN.

REGION: NORTH AMERICA (D) PURPOSE OF GRANT: ALZHEIMER'S DISEASE RESEARCH BY JULIE OTTOY, PHD, ENTITLED: (A2024012F) THE ROLE OF BRAIN VASCULAR-IMMUNE PROCESSES IN ALZHEIMER'S DISEASE. INVESTIGATOR'S SUMMARY: DAMAGE TO THE BRAIN'S BLOOD VESSELS CAN TRIPLE THE RISK OF DEVELOPING ALZHEIMER'S DISEASE, AND OVERACTIVE IMMUNE CELLS MAY FURTHER EXACERBATE THIS DAMAGE. HERE, RESEARCHERS WILL STUDY HOW THESE VASCULAR-IMMUNE RESPONSES AFFECT ALZHEIMER'S PROGRESSION BY ANALYZING BRAIN SCANS AND BLOOD SAMPLES FROM 500+ INDIVIDUALS OVER TIME. STUDY OUTCOMES WILL PRESENT A UNIQUE AND MORE DETAILED PICTURE OF KEY AND UNDERSTUDIED MECHANISMS DRIVING ALZHEIMER'S, THEREBY OPENING NEW PERSPECTIVES ON THE DEVELOPMENT OF PERSONALIZED BIOMARKERS AND TREATMENT STRATEGIES THAT TARGET THE INTERFACE BETWEEN THE VASCULAR SYSTEM, BRAIN IMMUNE CELLS, AND ALZHEIMER'S. GRANT AWARDED: \$200,000, SUNNYBROOK RESEARCH INSTITUTE, TORONTO, CANADA.

REGION: EUROPE (INCLUDING ICELAND AND GREENLAND) (D) PURPOSE OF GRANT: ALZHEIMER'S DISEASE RESEARCH BY HELENA GELLERSEN, PHD, ENTITLED: (A2024013F) IDENTIFYING NEW MEMORY AND BRAIN MARKERS FOR EARLY

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.

ALZHEIMER'S DISEASE. INVESTIGATOR'S SUMMARY: DESPITE NEWLY AVAILABLE TREATMENTS FOR ALZHEIMER'S DISEASE, DEMENTIA SUBTYPE SPECIFICITY IS IMPORTANT TO DETERMINE PRIOR TO TREATMENT TO ENSURE SAFE AND EFFICACIOUS OUTCOMES. OPTIMIZED COGNITIVE ASSESSMENTS AND IMAGING BIOMARKERS ARE ALSO ESSENTIAL FOR EARLY DETECTION AND TO MONITOR DISEASE PROGRESSION. THIS PROJECT WILL ADDRESS THESE CHALLENGES BY DEVELOPING NEW COGNITIVE AND NEURAL MARKERS SENSITIVE TO THE EARLY EFFECTS OF ALZHEIMER'S. THESE MARKERS CAN BE USED TO SCREEN FOR SUBTLE MEMORY CHANGES, CLASSIFY BY SUBTYPE, AND IDENTIFY SIGNATURES OF HEALTHY BRAIN FUNCTION THAT CAN CLARIFY MECHANISMS OF DISEASE-MODIFYING EFFECTS ON MEMORY IN EARLY-PHASE CLINICAL TRIALS. GRANT AWARDED: \$199,967, GERMAN CENTER FOR NEURODEGENERATIVE DISEASES, MAGDEBURG, GERMANY. REGION: EUROPE (INCLUDING ICELAND AND GREENLAND) (D) PURPOSE OF GRANT: ALZHEIMER'S DISEASE RESEARCH BY RAFFAELLA NATIVIO, PHD, ENTITLED: (A2024018S) UNCOVERING HOW GENE REGULATORS PROTECT NEURONS AGAINST ALZHEIMER'S. INVESTIGATOR'S SUMMARY: THIS STUDY WILL FOCUS ON UNDERSTANDING HOW EPIGENETIC FACTORS, ESPECIALLY TRANSCRIPTIONAL REPRESSORS, INFLUENCE GENE EXPRESSION IN NEURONS AND CONTRIBUTE TO ALZHEIMER'S DISEASE. THE RESEARCH AIMS TO IDENTIFY HOW THESE TRANSCRIPTIONAL REPRESSORS PROTECT NEURONS FROM ALZHEIMER'S-RELATED STRESS, POTENTIALLY LEADING TO NEW TREATMENTS FOR ENHANCING BRAIN RESILIENCE AGAINST ALZHEIMER'S. GRANT AWARDED: \$299,943, IMPERIAL COLLEGE OF SCIENCE, TECHNOLOGY, AND MEDICINE, LONDON, UNITED KINGDOM. REGION: EAST ASIA AND THE PACIFIC (D) PURPOSE OF GRANT: ALZHEIMER'S DISEASE RESEARCH BY GUOJUN BU, PHD, ENTITLED: (A2024019S) PERIPHERAL APOE IN ALZHEIMER'S DISEASE. INVESTIGATOR'S SUMMARY: DESPITE ENCOURAGING NEWS ON ANTI-AMYLOID DRUGS, RESEARCHERS ARE STILL FAR FROM

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.

DEVELOPING SAFE AND EFFECTIVE THERAPIES TO PREVENT OR CURE ALZHEIMER'S DISEASE. THE APOE GENE IS A STRONG RISK FACTOR, WITH APOE4 INCREASING AND APOE2 REDUCING RISK. THIS PROJECT WILL STUDY THE PROTECTIVE EFFECT OF APOE2 USING NEW MODEL SYSTEMS AND ADVANCED TECHNOLOGIES. THESE STUDIES WILL ADDRESS HOW APOE2 IN THE BLOOD AFFECTS BRAIN COGNITION AND ALZHEIMER'S DISEASE PATHOLOGY. OUTCOMES FROM THESE STUDIES SHOULD PROVIDE NEW KNOWLEDGE ON HOW DIFFERENT FORMS OF APOE AFFECT ALZHEIMER'S DISEASE AND HOW APOE EXPRESSED IN THE PERIPHERY AFFECTS BRAIN FUNCTION AND NEUROPATHOLOGY. MORE IMPORTANTLY, THE STUDY OUTCOMES WILL GUIDE US TO DESIGN APOE-TARGETED THERAPIES TO DELAY THE ONSET OR SLOW THE PROGRESSION OF ALZHEIMER'S DISEASE. GRANT AWARDED: \$300,000, THE HONG KONG UNIVERSITY OF SCIENCE AND TECHNOLOGY, KOWLOON, HONG KONG.

REGION: EUROPE (INCLUDING ICELAND AND GREENLAND) (D) PURPOSE OF GRANT: ALZHEIMER'S DISEASE RESEARCH BY EMANUELA PASCIUTO, PHD, ENTITLED: (A2024020S) MODULATION OF MICROGLIA-T CELLS CROSS TALK IN ALZHEIMER'S DISEASE. INVESTIGATOR'S SUMMARY: WHILE MICROGLIA ARE IN THE SPOTLIGHT, RESEARCHERS KNOW LITTLE ABOUT HOW ADAPTIVE IMMUNE CELLS INTERACT WITH ALZHEIMER'S AMYLOID PLAQUES. MHCII IS A MICROGLIA-ASSOCIATED ALZHEIMER'S RISK GENE THAT FUNCTIONS TO MEDIATE INTERACTION WITH T CELLS. THE RELEVANCE OF THE MICROGLIA-T CELL INTERACTION IN ALZHEIMER'S IS UNKNOWN. TO STUDY THE CONTRIBUTION OF THIS INTERACTION TO ALZHEIMER'S PATHOLOGY, DR. PASCIUTO AND HER TEAM WILL USE GENETIC MODELS TO MANIPULATE MHC II EXPRESSION IN MICE AND TEST EFFICACY OF T CELL-BASED IMMUNOTHERAPY IN ALZHEIMER'S MICE LACKING MHCII. DR. PASCIUTO'S RESEARCH WILL EXTEND THE CURRENT KNOWLEDGE OF HOW THE IMMUNE SYSTEM CHANGES IN ALZHEIMER'S DISEASE. BY UNCOVERING THESE MECHANISMS, THIS STUDY BUILDS THE BASIS TOWARD MORE PRECISE THERAPIES THAT TARGET

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.

THE IMMUNE SYSTEM TO PROTECT AGAINST THE PROGRESSION OF ALZHEIMER'S.

ADDITIONALLY, THIS RESEARCH WILL ESTABLISH HOW THE ALZHEIMER'S RISK

GENE MHCII INFLUENCES THE DEVELOPMENT OF ALZHEIMER'S AND THE RESPONSE

TO POTENTIAL IMMUNE-BASED TREATMENTS, OFFERING HOPE FOR MORE

PERSONALIZED APPROACHES TO COMBATING THE DISEASE. GRANT AWARDED:

\$300,000, FLANDERS INSTITUTE FOR BIOTECHNOLOGY, ANTWERP, BELGIUM.

REGION: EUROPE (INCLUDING ICELAND AND GREENLAND) (D) PURPOSE OF GRANT:

ALZHEIMER'S DISEASE RESEARCH BY MARIA LLORENS-MARTN, PHD, ENTITLED:

(A2024021S) DOES ALZHEIMERS DISEASE ACCELERATE BRAIN AGING?

INVESTIGATOR'S SUMMARY: THE HIPPOCAMPUS, A BRAIN REGION CRUCIAL FOR

LEARNING AND MEMORY, GENERATES NEW NEURONS THROUGHOUT LIFE. THIS

PROCESS IS DAMAGED IN PEOPLE WITH ALZHEIMER'S DISEASE, BUT THE CAUSE OF

THESE ALTERATIONS IS UNKNOWN. DR. LLORENS-MARTN AND HER TEAM WILL USE

HIGH-QUALITY HUMAN BRAIN SAMPLES AND CUTTING-EDGE GENOMIC AND

MICROSCOPY METHODOLOGIES TO ASSESS THE TOXICITY OF THE ENVIRONMENT THAT

SURROUNDS NEW NEURONS. STUDY FINDINGS WILL IDENTIFY NOVEL MECHANISMS

RESPONSIBLE FOR HIPPOCAMPAL PERTURBATION IN ALZHEIMER'S AND GENERATE

NOVEL RESOURCES THAT ALLOW FASTER AND MORE ACCURATE DIAGNOSIS OF THIS

CONDITION. GRANT AWARDED: \$300,000, SPANISH NATIONAL RESEARCH COUNCIL,

MADRID, SPAIN.

REGION: EUROPE (INCLUDING ICELAND AND GREENLAND) (D) PURPOSE OF GRANT:

MACULAR DEGENERATION RESEARCH BY MAXIMILIAN PFAU, PHD, ENTITLED:

(M2024009N) INNOVATIVE VISION TESTS TO MONITOR TREATMENT EFFECTS IN

AMD. INVESTIGATOR'S SUMMARY: AGE-RELATED MACULAR DEGENERATION (AMD)

CAUSES DEVASTATING VISION LOSS OVER TIME. HOWEVER, BEST-CORRECTED

VISUAL ACUITYTHE MOST COMMON VISION TESTDOES NOT REVEAL DYSFUNCTION IN

EARLY AMD. THUS, CLINICAL TRIALS FOCUS MOSTLY ON LATE AMD, DESPITE THE

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.

LIMITED TREATMENT POTENTIAL. THIS PROJECT WILL ESTABLISH VISION TESTS THAT EVALUATE DARK ADAPTATION FOLLOWING EXPOSURE TO BRIGHT LIGHT. USING RETINA TRACKING, RESEARCHERS WILL TEST SMALL RETINAL REGIONS PRONE TO SUBTLE PHOTORECEPTOR DYSFUNCTION IN AN UNPRECEDENTEDLY ACCURATE MANNER, MAKING DISEASE PROGRESSION MEASURABLE AT THE EARLIEST STAGE. GRANT AWARDED: \$330,400, INSTITUTE OF MOLECULAR AND CLINICAL OPHTHALMOLOGY BASEL, BASEL, SWITZERLAND.

PART II, LINE 1, COLUMN (D) CONTINUED

REGION: NORTH AMERICA (D) PURPOSE OF GRANT: MACULAR DEGENERATION RESEARCH BY BRITTANY CARR, PHD, ENTITLED: (M2024011N) FROG AND FISH MODELS OF AMD-ASSOCIATED RETINAL DEPOSITS. INVESTIGATOR'S SUMMARY: AGE-RELATED MACULAR DEGENERATION (AMD) RESEARCH HAS BEEN HINDERED BY THE LACK OF MODELS THAT ENCAPSULATE ITS COMPLEX FEATURES. AN IMPORTANT FEATURE OF AMD IS RETINAL DEPOSITS OF FAT AND PROTEIN DEBRIS, BUT RESEARCHERS KNOW LITTLE ABOUT WHERE THEY COME FROM AND HOW THEY MAY CONFER AN INCREASED RISK OF SEVERE AMD IN THE PEOPLE WHO HAVE THEM. TO ADDRESS THIS, RESEARCHERS HAVE CREATED TWO ANIMAL MODELS THAT DEVELOP TWO DIFFERENT TYPES OF AMD-ASSOCIATED RETINAL DEPOSITS. THIS WORK WILL PROVIDE SIGNIFICANT INSIGHT INTO THE DEPOSIT ORIGIN, TREATMENTS, AND CAUSATIVE RELATIONSHIP TO SEVERE AMD. THE CHARACTERIZATION OF THESE NEW ANIMAL MODELS WILL HELP THE RESEARCH TEAM BUILD A FOUNDATION OF KNOWLEDGE TO LEARN MORE ABOUT THE CELLULAR PROCESSES THAT UNDERLIE AMD. THEY WILL HELP RESEARCHERS TO ASK QUESTIONS ABOUT CHANGES THAT OCCUR IN EARLY AMD THAT ARE NOT DETECTABLE IN THE CLINIC, POTENTIAL BIOMARKERS OF AMD AND THEIR RELATIONSHIPS WITH SEVERE DISEASE PROGRESSION, AND NEW CELLULAR PATHWAYS THAT THEY CAN EXPLOIT TO DEVELOP NEW AND EFFECTIVE

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.

TREATMENTS FOR AMD. GRANT AWARDED: \$450,000, UNIVERSITY OF ALBERTA,
EDMONTON, CANADA.

REGION: EAST ASIA AND THE PACIFIC (D) PURPOSE OF GRANT: NATIONAL

GLAUCOMA RESEARCH BY JENNIFER FAN GASKIN, MBCHB, MD, FRANZCO, ENTITLED:

(G2024011S) A NEW DRUG TO CONTROL EYE SURGERY SCARRING. INVESTIGATOR'S

SUMMARY: GLAUCOMA FILTRATION SURGERY IS PERFORMED TO PREVENT ONGOING

VISION LOSS FROM GLAUCOMA. THE CURRENT USE OF ANTISCARRING CANCER DRUGS

CARRY SERIOUS LONG-TERM RISKS. THIS PROJECT AIMS TO DEVELOP A MORE

EFFECTIVE AND SAFER ALTERNATIVE TO IMPROVE LONG-TERM SUCCESS OF

GLAUCOMA SURGERY AND TO IMPROVE THE QUALITY OF LIFE FOR GLAUCOMA

PATIENTS WORLDWIDE. GRANT AWARDED: \$199,924, CENTRE FOR EYE RESEARCH

AUSTRALIA LIMITED, EAST MELBOURNE, AUSTRALIA.

REGION: EUROPE (INCLUDING ICELAND AND GREENLAND) (D) PURPOSE OF GRANT:

BIRAX RESEARCH FUNDING, ENTITLED: (CA2023002) HIGH GRANULARITY IMMUNE

PHENOTYPING IN AGEING TOWARDS MOLECULAR MARKERS OF DECLINED IMMUNITY,

CHRONIC INFLAMMATION AND NEURODEGENERATIVE DISEASE. GRANT AWARDED:

\$202,027, THE BRITISH COUNCIL, LONDON, UNITED KINGDOM.

REGION: EUROPE (INCLUDING ICELAND AND GREENLAND) (D) PURPOSE OF GRANT:

NATIONAL GLAUCOMA RESEARCH BY DARRYL OVERBY, PHD, ENTITLED: (CG2020003)

DEVELOPING NEW DRUGS TO LOWER EYE PRESSURE IN GLAUCOMA. INVESTIGATOR'S

SUMMARY: OUR RESEARCH HAS IDENTIFIED A PARTICULAR CELL TYPE (SCHLEMM'S

CANAL CELLS) THAT REGULATE EYE PRESSURE BY CONTROLLING THE DRAINAGE OF

AQUEOUS HUMOR FROM THE EYE. IN THIS PROJECT, WE WILL DEVELOP AND APPLY

NOVEL SCREENING TECHNOLOGIES TO IDENTIFY NEW DRUGS TO LOWER EYE

PRESSURE BY IMPROVING AQUEOUS HUMOR DRAINAGE ACROSS SCHLEMM'S CANAL

CELLS. GRANT AWARDED: \$35,828, IMPERIAL COLLEGE OF SCIENCE, TECHNOLOGY,

AND MEDICINE, LONDON, UNITED KINGDOM.

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.

REGION: NORTH AMERICA (D) PURPOSE OF GRANT: MIND AND SIGHT DISEASES RESEARCH FUNDING, ENTITLED: (CA2023003) SUPPORT THE CANADIAN INSTITUTES OF HEALTH RESEARCH'S EXCELLENCE, DIVERSITY, AND INDEPENDENCE EARLY CAREER TRANSITION AWARD IN THE CATEGORIES OF BRAIN HEALTH AND VISION DISEASES. THESE AWARDS WILL PROVIDE EARLY-CAREER SUPPORT TO RESEARCHERS FROM SPECIFIC UNDERREPRESENTED GROUPS STUDYING TREATMENTS AND CURES FOR ALZHEIMER'S, AGE-RELATED MACULAR DEGENERATION, AND GLAUCOMA. GRANT AWARDED: \$6,672, CANADIAN INSTITUTES OF HEALTH RESEARCH, OTTAWA, CANADA.

Multiple horizontal lines for supplemental information input.

**SCHEDULE G
(Form 990)**

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

2023

Department of the Treasury
Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

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

Name of the organization **BRIGHTFOCUS FOUNDATION** Employer identification number **23-7337229**

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a Mail solicitations
 - b Internet and email solicitations
 - c Phone solicitations
 - d In-person solicitations
 - e Solicitation of non-government grants
 - f Solicitation of government grants
 - g Special fundraising events
- 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No
- b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
RKD GROUP - 35 PARKWOOD DRIVE, STE. 160, HOPKINTON, BEACONFIRE REDENGINE - 2300 CLARENDON BLVD., STE. 925,	FUNDRAISING AND COMMUNICATIONS CONSULTANT		X	30,452,088.	499,942.	29,952,146.
	FUNDRAISING AND COMMUNICATIONS CONSULTANT		X	2,368,623.	452,839.	1,915,784.
Total				32,820,711.	952,781.	31,867,930.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.
AK, AL, AR, AZ, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, LA, MA, MD, ME, MI, MN, MO, MS, NC, ND, NH, NJ, NM, NV, NY, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WI, WV

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		BRIGHTFOCUS 50TH ANNIVER (event type)	(event type)	NONE (total number)	
Revenue	1	Gross receipts	314,290.		314,290.
	2	Less: Contributions	250,290.		250,290.
	3	Gross income (line 1 minus line 2)	64,000.		64,000.
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs	17,300.		17,300.
	7	Food and beverages	149,677.		149,677.
	8	Entertainment	157,317.		157,317.
	9	Other direct expenses	74,176.		74,176.
	10	Direct expense summary. Add lines 4 through 9 in column (d)			398,470.
11	Net income summary. Subtract line 10 from line 3, column (d)			-334,470.	

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1	Gross revenue			
Direct Expenses	2	Cash prizes			
	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
	7	Direct expense summary. Add lines 2 through 5 in column (d)			
	8	Net gaming income summary. Subtract line 7 from line 1, column (d)			

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name _____

Address _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization \$ _____ and the amount of gaming revenue retained by the third party \$ _____
- c If "Yes," enter name and address of the third party:

Name _____

Address _____

16 Gaming manager information:

Name _____

Gaming manager compensation \$ _____

Description of services provided _____

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: RKD GROUP

(I) ADDRESS OF FUNDRAISER:

35 PARKWOOD DRIVE, STE. 160, HOPKINTON, MA 01748

(I) NAME OF FUNDRAISER: BEACONFIRE REDENGINE

(I) ADDRESS OF FUNDRAISER:

2300 CLARENDON BLVD., STE. 925, ARLINGTON, VA 22201

Part IV Supplemental Information (continued)

PART I, LINE 2B, COLUMN (V):

IN THE CONTRACT WITH RKD GROUP, THE MANAGEMENT FEES ARE FIXED AMOUNTS PER MONTH FOR IN-SCOPE SERVICES THAT TOTALS \$1,151,196 PER YEAR OF WHICH \$606,941 HAS BEEN ALLOCATED UNDER PART IX, LINE 11(G) TO PROGRAM AND MANAGEMENT AND ARE NOT CONSIDERED TO BE THE PROFESSIONAL FUNDRAISING CONSULTANT FEE.

**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

2023

**Open to Public
Inspection**

Name of the organization **BRIGHTFOCUS FOUNDATION** Employer identification number **23-7337229**

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
BOSTON CHILDREN'S HOSPITAL 300 LONGWOOD AVENUE BOSTON, MA 02115	04-2774441	501(C)(3)	200,000.	0.			MACULAR DEGENERATION RESEARCH BY NEETU KUSHWAH, PHD, ENTITLED: (M2024002F)
COLUMBIA UNIVERSITY 535 W 116TH STREET NEW YORK, NY 10027	13-5598093	501(C)(3)	166,667.	0.			NATIONAL GLAUCOMA RESEARCH BY SIMON JOHN, PHD, ENTITLED: (CG2020004)
DUKE UNIVERSITY 2200 WEST MAIN STREET, SUITE 820 DURHAM, NC 27705	56-0532129	501(C)(3)	52,325.	0.			NATIONAL GLAUCOMA RESEARCH BY W. DANIEL STAMER, PHD, ENTITLED: (CG2020002)
EMORY UNIVERSITY SCHOOL OF NURSING, 1520 CLIFTON RD ATLANTA, GA 30322	58-0566256	501(C)(3)	300,000.	0.			ALZHEIMER'S DISEASE RESEARCH BY BRITTANY BUTTS, PHD, ENTITLED: (A2024024S)
GEORGIA INSTITUTE OF TECHNOLOGY FERST DRIVE, ROOM 230 ATLANTA, GA 30332	58-6002023	501(C)(3)	85,561.	0.			NATIONAL GLAUCOMA RESEARCH BY C. ROSS ETHIER, PHD, ENTITLED: (CG2020001)
GEORGIA TECH RESEARCH CORPORATION BIOMEDICAL ENGINEERING, 315 FERST D ATLANTA, GA 30332	58-0603146	501(C)(3)	150,000.	0.			NATIONAL GLAUCOMA RESEARCH BY HAIYAN LI, PHD, ENTITLED: (G2024003F)

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **34.**

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

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

Schedule I (Form 990) 2023

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
GEORGIA TECH RESEARCH CORPORATION SCHOOL OF CHEMISTRY AND BIOCHEMISTRY, 311 FERST DRIVE - ATLANTA, GA 30332	58-0603146	501(C)(3)	150,000.	0.			NATIONAL GLAUCOMA RESEARCH BY HANNAH YOUNGBLOOD, PHD, ENTITLED: (G2024001F)
HEBREW REHABILITATION CENTER 1200 CENTRE STREET ROSLINDALE, MA 02131	04-2104298	501(C)(3)	297,336.	0.			ALZHEIMER'S DISEASE RESEARCH BY DAVIDE CAPPON, PHD, ENTITLED: (A2024027S)
ICAHN SCHOOL OF MEDICINE AT MOUNT SINAI - GENETICS AND GENOMIC SCIENCES, 1425 MADISON AVENUE - NEW YORK, NY 10029	13-6171197	501(C)(3)	300,000.	0.			ALZHEIMER'S DISEASE RESEARCH BY ANNA PODLESNY-DRABINIOK, PHD, ENTITLED: (A2024025S)
ICAHN SCHOOL OF MEDICINE AT MOUNT SINAI - NEUROSCIENCE, 1425 MADISON AVENUE, ICAHN 10-52 - NEW YORK, NY 10029	13-6171197	501(C)(3)	193,526.	0.			ALZHEIMER'S DISEASE RESEARCH BY TATSUHIKO NAITO, MD, PHD, ENTITLED: (A2024004F)
INDIANA UNIVERSITY MEDICAL AND MOLECULAR GENETICS, 320 W 15TH ST, NB 408 - INDIANAPOLIS, IN 462	35-6001673	501(C)(3)	150,000.	0.			NATIONAL GLAUCOMA RESEARCH BY SHRUTI PATIL, PHD, ENTITLED: (G2024002F)
JOHNS HOPKINS UNIVERSITY SCHOOL OF MEDICINE - DEPARTMENT OF OPHTHALMOLOGY, 400 N BROADWAY - BALTIMORE, MD 21231	52-0595110	501(C)(3)	200,000.	0.			MACULAR DEGENERATION RESEARCH BY KRISHNA SINGH, PHD, ENTITLED: (M2024003F)
MASSACHUSETTS GENERAL HOSPITAL 55 FRUIT ST. BOSTON, MA 02145	04-2697983	501(C)(3)	200,000.	0.			ALZHEIMER'S DISEASE RESEARCH BY MD JOYNAL ABEDIN, PHD, ENTITLED: (A2024010F)
MASSACHUSETTS GENERAL HOSPITAL 114 16TH STREET BOSTON, MA 02145	04-2697983	501(C)(3)	300,000.	0.			ALZHEIMER'S DISEASE RESEARCH BY JAEHONG SUH, PHD, ENTITLED: (A2024022S)
MAYO CLINIC JACKSONVILLE 4500 SAN PABLO ROAD JACKSONVILLE, FL 32224	59-3337028	501(C)(3)	299,997.	0.			ALZHEIMER'S DISEASE RESEARCH BY MERCEDES PRUDENCIO, PHD, ENTITLED: (A2024017S)

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
OREGON HEALTH & SCIENCE UNIVERSITY 3181 SW SAM JACKSON PARK ROAD PORTLAND, OR 97239	93-1176109	501(C)(3)	200,000.	0.			ALZHEIMER'S DISEASE RESEARCH BY PAULA SANCHEZ-MOLINA, PHD, ENTITLED: (A2024011F)
OREGON HEALTH & SCIENCE UNIVERSITY 3181 SW SAM JACKSON PARK ROAD PORTLAND, OR 97239	93-1176109	501(C)(3)	200,000.	0.			NATIONAL GLAUCOMA RESEARCH BY DIANA LOZANO, PHD, ENTITLED: (G2024009S)
SAINT LOUIS UNIVERSITY INTERNAL MEDICINE, 1402 S GRAND BLV ST. LOUIS, MO 63104	43-0654872	501(C)(3)	300,000.	0.			ALZHEIMER'S DISEASE RESEARCH BY ANDREW D. NGUYEN, PHD, ENTITLED: (A2024028S)
SCHEPENS EYE RESEARCH INSTITUTE, INC. - 20 STANIFORD STREET - BOSTON, MA 02114	04-2129889	501(C)(3)	200,000.	0.			MACULAR DEGENERATION RESEARCH BY SHINTARO SHIRAHAMA, MD, PHD, ENTITLED: (M2024004F)
STANFORD UNIVERSITY NEUROLOGY, 1201 WELCH RD PALO ALTO, CA 94305	94-1156365	501(C)(3)	200,000.	0.			ALZHEIMER'S DISEASE RESEARCH BY HANNAH ENNERFELT, PHD, ENTITLED: (A2024005F)
STANFORD UNIVERSITY 2452 WATSON CT PALO ALTO, CA 94305	94-1156365	501(C)(3)	62,531.	0.			NATIONAL GLAUCOMA RESEARCH BY JEFFREY GOLDBERG, PHD, ENTITLED: (CG2022001)
SUNY UPSTATE MEDICAL UNIVERSITY 505 IRVING AVE, NEUROSCIENCE RESEARCH BLDG ROOM#4609 - SYRACUSE, NY 13210	14-1368361	501(C)(3)	200,000.	0.			NATIONAL GLAUCOMA RESEARCH BY SAMUEL HERBERG, PHD, ENTITLED: (G2024006S)
THE PENNSYLVANIA STATE UNIVERSITY COLLEGE OF MEDICINE - CELLULAR AND MOLECULAR PHYSIOLOGY, 500 UNIVERSITY DRIVE - HERSHEY, PA	24-6000376	501(C)(3)	200,000.	0.			MACULAR DEGENERATION RESEARCH BY SANDEEP MOOTHEDATH SUBRAHMANIAN, PHD, ENTITLED:
TUFTS UNIVERSITY NEUROSCIENCE, 136 HARRISON AVENUE BOSTON, MA 02111	04-2103634	501(C)(3)	300,000.	0.			ALZHEIMER'S DISEASE RESEARCH BY GIUSEPPINA TESCO, MD, PHD, ENTITLED: (A2024016S)

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
UNIVERSITY OF CALIFORNIA, BERKELEY 1608 FOURTH STREET BERKELEY, CA 94710	94-6002123	501(C)(3)	200,000.	0.			ALZHEIMER'S DISEASE RESEARCH BY SANKALP SHUKLA, PHD, ENTITLED: (A2024008F)
UNIVERSITY OF CALIFORNIA, SAN FRANCISCO - OPHTHALMOLOGY, 490 ILLINOIS STREET, 4TH FLOOR - SAN FRANCISCO, CA 94143	94-6036493	501(C)(3)	150,000.	0.			NATIONAL GLAUCOMA RESEARCH BY MENGYA ZHAO, PHD, ENTITLED: (G2024005F)
UNIVERSITY OF CALIFORNIA, SAN FRANCISCO - 513 PARNASSUS AVE - SAN FRANCISCO, CA 94143	94-6036493	501(C)(3)	200,000.	0.			ALZHEIMER'S DISEASE RESEARCH BY SARAH KAUFMAN, MD, PHD, ENTITLED: (A2024001F)
UNIVERSITY OF COLORADO 1800 GRANT STREET DENVER, CO 80203	84-6000555	501(C)(3)	428,935.	0.			MACULAR DEGENERATION RESEARCH BY MIGUEL FLORES-BELIVER, PHD, ENTITLED: (M2024008N)
UNIVERSITY OF GEORGIA RESEARCH FOUNDATION, INC. - 310 E. CAMPUS ROAD - ATHENS, GA 30602	58-1353149	501(C)(3)	449,985.	0.			MACULAR DEGENERATION RESEARCH BY HEIKE KROEGER, PHD, ENTITLED: (M2024010N)
UNIVERSITY OF MICHIGAN MEDICAL CENTER - KELLOGG EYE CENTER, DEPARTMENT OF OPHTHALMOLOGY, 1000 WALL STREET - ANN ARBOR, MI 48105	38-6006309	501(C)(3)	200,000.	0.			MACULAR DEGENERATION RESEARCH BY JOHN HAN, PHD, ENTITLED: (M2024001F)
UNIVERSITY OF PITTSBURGH OPHTHALMOLOGY, 1622 LOCUST ST PITTSBURGH, PA 15260	25-0965591	501(C)(3)	150,000.	0.			NATIONAL GLAUCOMA RESEARCH BY BINGRUI WANG, PHD, ENTITLED: (G2024004F)
UNIVERSITY OF VIRGINIA 1001 N. EMMET STREET CHARLOTTESVILLE, VA 22903	54-6001796	501(C)(3)	200,000.	0.			NATIONAL GLAUCOMA RESEARCH BY XIARONG LIU, PHD, ENTITLED: (G2024008S)
UNIVERSITY OF WASHINGTON BIOLOGICAL STRUCTURE, 4333 BROOKLYN AVE NE BOX 359472 - SEATTLE, WA 98195	91-6001537	501(C)(3)	191,339.	0.			MACULAR DEGENERATION RESEARCH BY JULIETTE WOHLSCHLEGEL, PHD, ENTITLED: (M2024005F)

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
WASHINGTON UNIVERSITY IN ST. LOUIS PSYCHIATRY, 4370 DUNCAN AVENUE ST. LOUIS, MO 63130	43-0653611	501(C)(3)	200,000.	0.			ALZHEIMER'S DISEASE RESEARCH BY DANIRA TORAL-RIOS, PHD, ENTITLED: (A2024002F)
WEILL MEDICAL COLLEGE OF CORNELL UNIVERSITY - 1300 YORK AVE - NEW YORK, NY 10065	13-1623978	C CORP	200,000.	0.			ALZHEIMER'S DISEASE RESEARCH BY WENHUI QU, PHD, ENTITLED: (A2024003F)

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:

BRIGHTFOCUS INTERACTS WITH ALL GRANTEES AT LEAST QUARTERLY BY E-MAIL OR AT SCIENTIFIC MEETINGS. IN ADDITION TO THESE INTERACTIONS, EACH GRANT RECIPIENT IS REQUIRED TO SUBMIT SEPARATE DETAILED ANNUAL SCIENTIFIC PROGRESS AND FINANCIAL REPORTS TO BRIGHTFOCUS. THESE ARE RECEIVED BY THE BRIGHTFOCUS SCIENTIFIC AFFAIRS DEPARTMENT, AND REVIEWED BY SCIENTIFIC STAFF WITH BROAD EXPERTISE, INCLUDING IMAGING, MOLECULAR BIOLOGY AND SIGNALING PATHWAYS, CELL BIOLOGY, ANGIOGENESIS, BIOCHEMISTRY, NEUROSCIENCE, AND GENETICS. SENIOR STAFF REVIEWS EACH PROGRESS REPORT AND EVALUATES THE

Part IV Supplemental Information

PROJECT FOR SUFFICIENT PROGRESS TOWARDS THE SPECIFIC AIMS PROPOSED IN THE ORIGINAL APPLICATION OR ANY BUDGETARY CONCERNS. THIS EFFORT IS SUPPORTED BY ADDITIONAL SCIENTIFIC COUNSEL FROM MEMBERS OF THE BRIGHTFOCUS SCIENTIFIC REVIEW COMMITTEES, WHEN REQUIRED. IN ADDITION TO STATEMENTS OF EXPERIMENTAL PROGRESS, ALL GRANTEEES ARE ASKED TO REPORT ANY TECHNICAL PUBLICATIONS, MEDIA REPORTS, OR PATENT APPLICATIONS IN WHICH BRIGHTFOCUS-SPONSORED RESEARCH IS DESCRIBED. IF SIGNIFICANT CONCERNS RELATED TO PROGRESS ON THE AWARDS ARE DISCOVERED, AND NOT RESOLVED AFTER INTERACTION WITH THE AWARD GRANTEE, THE BRIGHTFOCUS STAFF RECOMMENDS APPROPRIATE ACTIONS TO THE CHAIR OF THE SCIENTIFIC AFFAIRS COMMITTEE OF THE BOARD OF DIRECTORS. IN ACCORDANCE WITH THE GRANT AGREEMENT TERMS AND CONDITIONS, BRIGHTFOCUS MAY WITHHOLD FUNDING, OR DISCONTINUE AN AWARD, FOR ANY GRANTEE THAT FAILS TO ACHIEVE SUFFICIENT PROGRESS OR SUBMIT REQUIRED REPORTS.

AT THE CONCLUSION OF THE GRANT AWARD PERIOD, EACH GRANTEE MUST COMPLETE AND SUBMIT A FINAL REPORT THAT IS ALSO REVIEWED BY THE BRIGHTFOCUS SENIOR SCIENTIFIC STAFF. EVALUATION OF THE WORK OF EACH GRANTEE IS QUALITATIVELY AND QUANTITATIVELY ASSESSED THROUGH VARIOUS METRICS RELATED TO THE IMPACT OF THE GRANT ON ITS TARGETED DISEASE FIELD. SUCH IMPACT METRICS HAVE REVEALED THAT 95% OF BRIGHTFOCUS-SUPPORTED RESEARCH RESULTS IN RESEARCH PUBLICATIONS THAT ADVANCE THE FIELDS SERVED BY BRIGHTFOCUS. THIS IMPACT IS FURTHER SUPPORTED BY ANNUAL CATEGORY NORMALIZED CITATION IMPACT ANALYSIS THAT COMPARES BRIGHTFOCUS-SUPPORTED WORKS TO AN UNBIASED COMPARISON OF IMPACT PERFORMANCE VERSUS THE WORLD AVERAGE. BRIGHTFOCUS-SUPPORTED PUBLICATIONS WERE RECENTLY CITED AT 2 TIMES THE FREQUENCY OF THE WORLD AVERAGE. A FINAL EXAMPLE OF IMPACT ASSESSMENT REVEALED THAT THE SUCCESSES OF BRIGHTFOCUS GRANTEEES CONTINUE LONG AFTER THE GRANT EXPIRES. ON AVERAGE, EACH GRANTEE RECEIVES ADDITIONAL GRANTS FOR FOLLOW-ON PROJECTS SPAWNED BY

Part IV Supplemental Information

THE BRIGHTFOCUS GRANT, WITH VALUES UP TO 10 TIMES THE LEVEL OF THE INITIAL BRIGHTFOCUS INVESTMENT.

BRIGHTFOCUS SOLICITS FEEDBACK FROM ITS GRANTEES, AND PROVIDES AN ANONYMOUS FORUM FOR COLLECTING SUCH INFORMATION. THROUGH THE BRIGHTFOCUS FOUNDATION WEBSITE AND WITHIN THE SCIENTIFIC PROGRESS REPORTS, THERE ARE DESIGNATED SECTIONS WHERE AWARDEES ARE ASKED TO PROVIDE FEEDBACK TO THE FOUNDATION. THROUGH THIS MECHANISM, THEY ARE GIVEN THE ABILITY TO ANONYMOUSLY PROVIDE FEEDBACK OR COMMUNICATE THEIR CONCERNS TO PROGRAM STAFF OR THE BRIGHTFOCUS' COMPLIANCE OFFICE. ANY SUGGESTIONS, CONCERNS, COMPLAINTS, OR POSITIVE EXPERIENCES CAN BE OUTLINED AND BROUGHT TO THE ATTENTION OF BRIGHTFOCUS IN THIS MANNER, SO THAT BRIGHTFOCUS CAN ADDRESS ANY AREAS NEEDING IMPROVEMENT, REAFFIRM PRAISE-WORTHY POLICIES, OR OTHERWISE ASSESS NEEDS FOR PROGRAMMATIC CHANGE. THE SENIOR LEADERSHIP PRESENTS AND SUMMARIZES THE STATUS AND PROGRESS ON GRANTS TO THE BRIGHTFOCUS BOARD OF DIRECTORS AT EACH OF THEIR QUARTERLY BOARD MEETINGS.

PART II, LINE 1(H)

NAME OF ORGANIZATION OR GOVERNMENT: UNIVERSITY OF CALIFORNIA, SAN FRANCISCO (H) PURPOSE OF GRANT: ALZHEIMER'S DISEASE RESEARCH BY SARAH KAUFMAN, MD, PHD, ENTITLED: (A2024001F) IDENTIFYING MECHANISMS OF TAU AGGREGATION & TOXICITY ACROSS TAUOPATHIES. INVESTIGATOR'S SUMMARY: ALZHEIMER'S DISEASE AND FRONTOTEMPORAL DEMENTIA FEATURE THE ACCUMULATION OF MISFOLDED, AGGREGATED TAU PROTEIN IN NEURONS THAT ARE LOST EARLY IN THE COURSE OF THESE DISEASES. THE MECHANISMS THAT UNDERLIE TAU MISFOLDING AND ACCUMULATION, AND ITS ASSOCIATED NEUROTOXICITY, ARE NOT KNOWN. THIS PROJECT EMPLOYS WHOLE-GENOME SCREENING TECHNIQUES TO IDENTIFY THE CELLULAR PATHWAYS THAT REGULATE

Part IV Supplemental Information

TAU AGGREGATION AND TOXICITY IN HUMAN-INDUCED PLURIPOTENT STEM CELL-DERIVED NEURONS. THIS WORK WILL PROVIDE CRITICAL INSIGHT INTO TAU-ASSOCIATED DISEASE MECHANISMS AND IDENTIFY POTENTIAL THERAPEUTIC TARGETS FOR ALZHEIMER'S AND FRONTOTEMPORAL DEMENTIA.

NAME OF ORGANIZATION OR GOVERNMENT: WASHINGTON UNIVERSITY IN ST. LOUIS

(H) PURPOSE OF GRANT: ALZHEIMER'S DISEASE RESEARCH BY DANIRA

TORAL-RIOS, PHD, ENTITLED: (A2024002F) OXYSTEROLS IN INNATE AND

ADAPTIVE IMMUNITY IN A TAUOPATHY MOUSE MODEL. INVESTIGATOR'S SUMMARY: NEURONAL LOSS IN ALZHEIMER'S DISEASE IS LINKED TO BRAIN INFILTRATION OF BLOOD-DERIVED IMMUNE CELLS IN A NEUROTOXIC CASCADE OF TAU PROTEIN ACCUMULATION AND INFLAMMATION IN THE BRAIN. PRELIMINARY STUDIES SHOW EVIDENCE FOR ALTERED BRAIN CHOLESTEROL METABOLISM IN MEDIATING TAU PATHOLOGY AND INFILTRATION OF BLOOD IMMUNE CELLS INTO THE BRAIN. THIS PROJECT AIMS TO INVESTIGATE THIS PATHWAY WITH THE LONG-TERM GOAL OF PHARMACOLOGICAL INTERVENTION TO BLOCK NEURONAL LOSS IN ALZHEIMER'S.

NAME OF ORGANIZATION OR GOVERNMENT: WEILL MEDICAL COLLEGE OF CORNELL

UNIVERSITY (H) PURPOSE OF GRANT: ALZHEIMER'S DISEASE RESEARCH BY WENHUI

QU, PHD, ENTITLED: (A2024003F) UNLOCKING TAU'S SECRETS: HUMAN BRAIN

CELLS IN THE LIVING MOUSE BRAIN. INVESTIGATOR'S SUMMARY: DR. QU HAS PIONEERED MODELING TAU BUILDUP IN HUMAN NEURONS USING DIFFERENT TYPES OF NEURAL CELLS FROM STEM CELLS DERIVED FROM SKIN BIOPSY. THIS STUDY PROPOSES TRANSPLANTING BOTH HUMAN NEURONS AND MICROGLIA THE BRAIN'S IMMUNE CELLS INTO MOUSE BRAINS TO GENERATE A GROUNDBREAKING CHIMERA HUMAN-MOUSE MODEL THAT DEVELOPS TAU ACCUMULATION. USING THIS MODEL, THE STUDY WILL ALSO EXAMINE HOW HUMAN SPECIFIC MOLECULAR PATHWAYS AFFECT THE DISEASE'S PROGRESSION. THIS RESEARCH COULD LEAD TO BREAKTHROUGHS IN UNDERSTANDING AND TREATING ALZHEIMER'S AND OTHER TAU-RELATED DISEASES.

NAME OF ORGANIZATION OR GOVERNMENT: ICAHN SCHOOL OF MEDICINE AT MOUNT

Schedule I (Form 990)

Part IV Supplemental Information

SINAI (H) PURPOSE OF GRANT: ALZHEIMER'S DISEASE RESEARCH BY TATSUHIKO
 NAITO, MD, PHD, ENTITLED: (A2024004F) DECODING ALZHEIMER'S DISEASE
 GENOMES WITH DEEP LEARNING. INVESTIGATOR'S SUMMARY: DR. NAITO'S
 RESEARCH AIMS TO UNRAVEL THE GENETIC COMPLEXITIES OF ALZHEIMER'S
 DISEASE. THIS PROJECT HAS TWO PRIMARY OBJECTIVES: TO DEVELOP A PIPELINE
 TO PREDICT THE IMPACT OF GENETIC MUTATIONS ON RNA PROCESSING IN BRAIN
 CELLS BY STATE-OF-THE-ART MACHINE-LEARNING TECHNOLOGIES AND TO
 INVESTIGATE HOW GENETIC MUTATIONS HAVE AN IMPACT ON INDIVIDUALS WITH
 ALZHEIMER'S VIA RNA PROCESSING BY APPLYING THIS PIPELINE TO HUGE
 GENOMIC DATA. A BETTER UNDERSTANDING OF GENETIC ASSOCIATIONS OF
 ALZHEIMER'S WILL HELP IN DEVELOPING NEW TREATMENTS AND IDENTIFYING
 BIOMARKERS.

NAME OF ORGANIZATION OR GOVERNMENT: STANFORD UNIVERSITY (H) PURPOSE OF
 GRANT: ALZHEIMER'S DISEASE RESEARCH BY HANNAH ENNERFELT, PHD, ENTITLED:
 (A2024005F) THE ROLE OF THE IMMUNE SYSTEM IN DRIVING COGNITIVE DECLINE.
 INVESTIGATOR'S SUMMARY: DURING AGING AND ALZHEIMER'S DISEASE, CERTAIN
 INFLAMMATORY RESPONSES REGULATED BY THE IMMUNE SYSTEM FURTHER
 EXACERBATE THE DISEASE AND CONTRIBUTE TO IMPAIRED COGNITION AND MEMORY.
 THIS STUDY FOCUSES ON DELINEATING THE MACHINERY NECESSARY FOR IMMUNE
 CELLS TO AMPLIFY DAMAGING INFLAMMATION IN THE BODY AND, ULTIMATELY, THE
 BRAIN. USING A NOVEL METHOD TO TARGET A SPECIFIC IMMUNE CELL MECHANISM,
 DR. ENNERFELT AND COLLEAGUES WILL ASSESS HOW IMPEDING ITS ASSOCIATED
 INFLAMMATORY PATHWAYS CAN CURB COGNITIVE DECLINE AND ALZHEIMER'S
 PROGRESSION.

NAME OF ORGANIZATION OR GOVERNMENT: UNIVERSITY OF CALIFORNIA, BERKELEY
 (H) PURPOSE OF GRANT: ALZHEIMER'S DISEASE RESEARCH BY SANKALP SHUKLA,
 PHD, ENTITLED: (A2024008F) UNDERSTANDING THE ROLE OF PROTEIN CLUMPS ON
 MEMBRANE IN ALZHEIMER'S DISEASE. INVESTIGATOR'S SUMMARY:

Part IV Supplemental Information

NEURODEGENERATIVE DISEASES LIKE ALZHEIMER'S DISEASE ARE CAUSED BY THE BUILDUP OF CLUMPS OF PROTEINS THAT SPREAD FROM ONE PART OF THE BRAIN TO ANOTHER, CAUSING PROGRESSIVE BRAIN DAMAGE. THESE PROTEIN CLUMPS CAN INTERACT AND DISRUPT THE MEMBRANES RESPONSIBLE FOR CONTAINING AND DESTROYING THEM, CAUSING PROTEIN CLUMP LEAKAGE AND SPREAD. THIS PROJECT AIMS TO UNDERSTAND THE UNDERLYING CAUSE OF THIS MEMBRANE LEAKAGE FOR THE DEVELOPMENT OF THERAPIES TO COUNTERACT PROTEIN CLUMP ESCAPE BY PROMOTING THE REPAIR OF THE MEMBRANES DAMAGED BY THESE PROTEIN CLUMPS.

NAME OF ORGANIZATION OR GOVERNMENT: MASSACHUSETTS GENERAL HOSPITAL (H)

PURPOSE OF GRANT: ALZHEIMER'S DISEASE RESEARCH BY MD JOYNAL ABEDIN, PHD, ENTITLED: (A2024010F) THE EFFECT OF ALZHEIMER'S DISEASE ON NEURONS ACROSS THE SLEEP/WAKE CYCLE. INVESTIGATOR'S SUMMARY: IN ALZHEIMER'S DISEASE, BUILDUP OF AMYLOID BETA (A) PROTEIN CAN RESULT IN SLEEP DISTURBANCES. DR. ABEDIN AND HIS TEAM WILL INVESTIGATE THE ACTIVITY OF SPECIFIC NEURONAL TYPES IN A GENETICALLY ENGINEERED MOUSE MODEL OF ALZHEIMER'S DISEASE TO UNDERSTAND HOW A AFFECTS NEURONAL ACTIVITY DURING THE SLEEP/WAKE CYCLE. THIS RESEARCH COULD PAVE THE WAY FOR THERAPEUTIC DEVELOPMENT AIMED AT RESTORING ABNORMAL NEURONAL ACTIVITY AND POTENTIALLY LEADING TO A CURE FOR ALZHEIMER'S DISEASE.

NAME OF ORGANIZATION OR GOVERNMENT: OREGON HEALTH & SCIENCE UNIVERSITY

(H) PURPOSE OF GRANT: ALZHEIMER'S DISEASE RESEARCH BY PAULA SANCHEZ-MOLINA, PHD, ENTITLED: (A2024011F) ROLE OF THE IMMUNE SYSTEM IN ALZHEIMER'S DISEASE. INVESTIGATOR'S SUMMARY: ALZHEIMER'S DISEASE HAS TRADITIONALLY BEEN CONSIDERED A NEURONAL PATHOLOGY, BUT NOW IT IS KNOWN THAT A SPECIFIC TYPE OF BRAIN IMMUNE CELL, CALLED MICROGLIA, PLAYS A CRUCIAL ROLE IN THE PATHOGENESIS OF THE DISEASE. THIS PROJECT AIMS TO UNDERSTAND HOW IMMUNE CELLS FROM THE BLOOD IMPACT MICROGLIA AND CONTRIBUTE TO THE DEVELOPMENT OF ALZHEIMER'S DISEASE. THIS PROJECT WILL

Part IV Supplemental Information

USE HUMAN SAMPLES, ENABLING RESEARCHERS TO OBTAIN POTENTIAL
 TRANSLATIONAL RESULTS FOR THE CLINIC. THE CHARACTERIZATION AND
 VALIDATION OF A PERIPHERAL IMMUNE MECHANISM THAT CONTRIBUTES TO
 ALZHEIMER'S PATHOLOGY COULD OFFER IMPORTANT BIOMARKERS FOR DISEASE
 DIAGNOSIS AND THE DESIGN OF NEW THERAPIES.

NAME OF ORGANIZATION OR GOVERNMENT: TUFTS UNIVERSITY (H) PURPOSE OF
 GRANT: ALZHEIMER'S DISEASE RESEARCH BY GIUSEPPINA TESCO, MD, PHD,
 ENTITLED: (A2024016S) ROLE OF GGA3 IN ALZHEIMER'S DISEASE.

INVESTIGATOR'S SUMMARY: DR. TESCO'S LAB RECENTLY FOUND A NOVEL GENETIC
 VARIANT ASSOCIATED WITH LATE-ONSET ALZHEIMER'S DISEASE IN AFRICAN
 AMERICAN FAMILIES, CALLED GGA3 . HER RESEARCH PREVIOUSLY DEMONSTRATED
 THAT GGA3 PLAYS A CRITICAL ROLE IN THE TRANSPORT AND REGULATION OF
 BACE1, A KEY ENZYME RESPONSIBLE FOR AMYLOID-BETA PRODUCTION. THE STUDY
 AIMS TO DETERMINE HOW THIS NOVEL GENETIC VARIANT LEADS TO ALZHEIMER'S
 DISEASE. RESULTS MAY CONTRIBUTE TO A BETTER UNDERSTANDING OF GENETIC
 RISK FACTORS IN THE AFRICAN AMERICAN POPULATION, WHICH IS CURRENTLY
 UNDERSTUDIED.

NAME OF ORGANIZATION OR GOVERNMENT: MAYO CLINIC JACKSONVILLE (H)
 PURPOSE OF GRANT: ALZHEIMER'S DISEASE RESEARCH BY MERCEDES PRUDENCIO,
 PHD, ENTITLED: (A2024017S) UNDERSTANDING THE CONTRIBUTION OF TDP-43
 LOSS OF FUNCTION IN AD. INVESTIGATOR'S SUMMARY: TDP-43 PROTEINS
 ABNORMALLY ACCUMULATE IN THE BRAIN OF UP TO 70% OF PEOPLE WITH
 ALZHEIMER'S DISEASE AND ARE CHARACTERIZED BY WORSE MEMORY AND GREATER
 BRAIN ATROPHY COMPARED TO THOSE WITH ALZHEIMER'S LACKING TDP-43
 PATHOLOGY. THIS PROPOSAL AIMS TO CHARACTERIZE THE ROLE OF TDP-43
 DYSFUNCTION IN THE PATHOGENESIS OF ALZHEIMER'S BY EVALUATING: 1)
 WHETHER TDP-43 DYSFUNCTION EXACERBATES BEHAVIOR AND PATHOLOGICAL
 ALZHEIMER'S PHENOTYPES, AS WELL AS INDUCES NEURONAL LOSS IN AN

Part IV Supplemental Information

ALZHEIMER'S MOUSE MODEL, AND 2) THE RELATIONSHIPS BETWEEN ALZHEIMER'S PATHOLOGIES AND TDP-43 DYSFUNCTION IN ALZHEIMER'S HUMAN BRAINS. THESE STUDIES ARE EXPECTED TO ALSO HIGHLIGHT THE IMPORTANCE OF TDP-43 PATHOLOGY IN THERAPEUTIC TARGET AND BIOMARKER DESIGN AND IN PARTICIPANT EVALUATIONS DURING CLINICAL TRIALS.

PART II, LINE 1(H) CONTINUED

NAME OF ORGANIZATION OR GOVERNMENT: MASSACHUSETTS GENERAL HOSPITAL (H)

PURPOSE OF GRANT: ALZHEIMER'S DISEASE RESEARCH BY JAEHONG SUH, PHD,

ENTITLED: (A2024022S) INCREASE OF BRAIN ADAM10 EXPRESSION AS

ALZHEIMER'S DISEASE THERAPEUTIC. INVESTIGATOR'S SUMMARY: ADAM10 IS AN ENZYME THAT PREVENTS THE GENERATION OF AMYLOID-BETA, THE MAIN COMPONENT OF SENILE PLAQUES IN ALZHEIMER'S DISEASE BRAINS. PREVIOUS STUDIES CONSISTENTLY SHOWED THAT LOSS OF ADAM10 FUNCTION INCREASES ALZHEIMER'S RISK, SUGGESTING THAT INCREASING ADAM10 EXPRESSION CAN BE A PROMISING THERAPEUTIC TARGET. THIS STUDY WILL TEST IF BRAIN-SELECTIVE MODULATION OF ADAM10 EXPRESSION AFFECTS ALZHEIMER'S PATHOGENESIS AND DEVELOP AN EXPERIMENTAL ANTISENSE OLIGONUCLEOTIDE DRUG THAT INCREASES ADAM10 EXPRESSION FOR ALZHEIMER'S TREATMENT. IF SUCCESSFUL, DR. SUH AND OTHERS COULD SCREEN FDA-APPROVED DRUGS OR OTHER MEDICINAL LIBRARIES TO IDENTIFY SMALL MOLECULE COMPOUNDS THAT INCREASE ADAM10 EXPRESSION AND DEVELOP THEM AS ALZHEIMER'S DRUGS. IN ADDITION, ADAM10 ANTISENSE OLIGONUCLEOTIDES IDENTIFIED FROM THE PROPOSED STUDY CAN BE OPTIMIZED FOR HUMAN SEQUENCES AND FURTHER TESTED AND DEVELOPED FOR ALZHEIMER'S TREATMENT.

NAME OF ORGANIZATION OR GOVERNMENT: EMORY UNIVERSITY (H) PURPOSE OF

GRANT: ALZHEIMER'S DISEASE RESEARCH BY BRITTANY BUTTS, PHD, ENTITLED:

(A2024024S) ALZHEIMER'S DISEASE RISK AND IMMUNE FUNCTION IN HEART

Part IV Supplemental Information

DISEASE. INVESTIGATOR'S SUMMARY: THIS STUDY EXPLORES HOW THE IMMUNE SYSTEM RELATES TO MEMORY, COGNITION, AND ALZHEIMER'S RISK IN MIDDLE-AGED ADULTS WITH HEART CONDITIONS. AS HEART PROBLEMS SURGE IN THE UNDER-65 POPULATION, THE CONNECTION TO COGNITIVE DECLINE AND ALZHEIMER'S REMAINS UNCLEAR. SURVEYS, BLOOD TESTS, AND MEMORY ASSESSMENTS WILL BE USED TO BETTER UNDERSTAND HOW FACTORS LIKE HIGH BLOOD PRESSURE AFFECT COGNITION AND MAY ELEVATE ALZHEIMER'S RISK. INSIGHTS INTO HEART HEALTH, IMMUNITY, AND ALZHEIMER'S CAN BENEFIT AT-RISK INDIVIDUALS AND SHAPE FUTURE TREATMENTS.

NAME OF ORGANIZATION OR GOVERNMENT: ICAHN SCHOOL OF MEDICINE AT MOUNT SINAI (H) PURPOSE OF GRANT: ALZHEIMER'S DISEASE RESEARCH BY ANNA PODLESNY-DRABINIOK, PHD, ENTITLED: (A2024025S) MICROGLIAL REPROGRAMMING IN ALZHEIMER'S DISEASE. INVESTIGATOR'S SUMMARY: HUMAN GENETIC STUDIES IMPLICATE MICROGLIA, THE BRAIN'S "TRASH COLLECTOR" CELLS, AS KEY PLAYERS IN ALZHEIMER'S DISEASE. DR. PODLESNY-DRABINIOK AND COLLEAGUES NOMINATED CANDIDATE FACTORS THAT MAY BOOST THE ABILITY OF MICROGLIA TO DISPOSE OF THE WASTE THAT ACCUMULATES DURING ALZHEIMER'S. HERE, THE STUDY AIMS TO VALIDATE COMPUTATIONAL PREDICTIONS AND CHARACTERIZE THE ROLE OF TWO CANDIDATE FACTORS IN HUMAN MICROGLIA AT BASELINE AND IN THE CONTEXT OF AMYLOIDS. RESEARCHERS WILL ALSO TARGET THESE FACTORS IN MICROGLIA DERIVED FROM PEOPLE CARRYING TWO COPIES OF APOE4 TO HELP THESE CELLS OVERCOME THE DEFICITS ASSOCIATED WITH THIS MAJOR GENETIC FACTOR FOR ALZHEIMER'S. DR. PODLESNY-DRABINIOK'S RESEARCH HOLDS THE POTENTIAL TO EXPLORE NOVEL THERAPEUTIC STRATEGIES AIMING TO INDUCE WASTE CLEARANCE PROCESSES IN MICROGLIA.

NAME OF ORGANIZATION OR GOVERNMENT: HEBREW REHABILITATION CENTER (H) PURPOSE OF GRANT: ALZHEIMER'S DISEASE RESEARCH BY DAVIDE CAPPON, PHD, ENTITLED: (A2024027S) SYMPTOM-SPECIFIC NEUROSTIMULATION FOR DEMENTIA.

Part IV Supplemental Information

INVESTIGATOR'S SUMMARY: THIS PROJECT WILL COMBINE TWO TYPES OF TRANSCRANIAL ELECTRICAL STIMULATION, A NONINVASIVE TECHNOLOGY THAT ALLOWS FOR THE MODULATION OF BRAIN NETWORK ACTIVITY TO ADDRESS DEPRESSIVE AND MEMORY SYMPTOMS IN OLDER ADULTS WITH DEPRESSION AND ALZHEIMER'S DEMENTIA. BY USING CUTTING-EDGE TECHNOLOGY TO STUDY THE ELECTRICAL FIELDS GENERATED IN THE TARGETED BRAIN CIRCUITS AND DELIVERING THE INTERVENTION AT HOME, THIS PROJECT WILL HELP DEVELOP A SCALABLE, ACCESSIBLE, NONINVASIVE INTERVENTION WITH THE GREATEST IMPACT ON ALLEVIATING DEPRESSION AND ALZHEIMER'S SYMPTOMS.

NAME OF ORGANIZATION OR GOVERNMENT: SAINT LOUIS UNIVERSITY (H) PURPOSE OF GRANT: ALZHEIMER'S DISEASE RESEARCH BY ANDREW D. NGUYEN, PHD, ENTITLED: (A2024028S) PROGRANULIN AS A POTENTIAL THERAPEUTIC TARGET FOR ALZHEIMER'S DISEASE. INVESTIGATOR'S SUMMARY: PREVIOUS STUDIES SUGGEST THAT PROGRANULIN CONFERS A PROTECTIVE EFFECT ON ALZHEIMER'S DISEASE IN MOUSE MODELS AND IN HUMANS, BUT SEVERAL IMPORTANT GAPS IN KNOWLEDGE EXIST. THIS PROJECT AIMS TO DETERMINE HOW PROGRANULIN EXERTS ITS EFFECTS IN THE CENTRAL NERVOUS SYSTEM TO ENHANCE MEMORY AND TO TEST IF PHARMACOLOGICALLY INCREASING PROGRANULIN LEVELS CAN PROTECT AGAINST ALZHEIMER'S DISEASE.

NAME OF ORGANIZATION OR GOVERNMENT: UNIVERSITY OF MICHIGAN MEDICAL CENTER (H) PURPOSE OF GRANT: MACULAR DEGENERATION RESEARCH BY JOHN HAN, PHD, ENTITLED: (M2024001F) TARGETING LIPID STORAGE FOR TREATING AGE-RELATED MACULAR DEGENERATION. INVESTIGATOR'S SUMMARY: AGE-RELATED MACULAR DEGENERATION (AMD) IS CHARACTERIZED BY THE BUILDUP OF FATTY DEPOSITS OUTSIDE A CELL LAYER IN THE BACK OF THE EYE CALLED THE RETINAL PIGMENT EPITHELIUM (RPE). AS PART OF ITS NORMAL FUNCTION, THE RPE CONSUMES ENORMOUS AMOUNTS OF FAT EACH DAY, AND THIS FAT IS TEMPORARILY STORED INSIDE THE CELL IN SPHERES CALLED LIPID DROPLETS. THE

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RESEARCHERS' GOAL IS TO UNDERSTAND HOW THE RPE FORMS LIPID DROPLETS AND MANIPULATE THOSE LIPID DROPLETS IN SUCH A WAY THAT LESS FAT IS SECRETED FROM THE RPE TO FORM THE TOXIC FATTY DEPOSITS OUTSIDE THE CELL THAT CHARACTERIZE AMD. TARGETING ENZYMES GOVERNING LIPID DROPLET FORMATION AND DEGRADATION HAS BECOME A VIABLE THERAPEUTIC STRATEGY IN OTHER DISEASES. RPE LIPID DROPLETS MAY BE CRITICAL GUARDIANS AGAINST THE ONSET OF AMD. LIPID DROPLETS ARE HIGHLY DRUGGABLE, WITH AVAILABLE SMALL MOLECULES THAT ARE HIGHLY SPECIFIC TO TARGET ENZYMES REQUIRED FOR LIPID DROPLET FORMATION AND LIPID RELEASE, PROVIDING AN INNOVATIVE NEW THERAPEUTIC APPROACH FOR AMD.

NAME OF ORGANIZATION OR GOVERNMENT: BOSTON CHILDREN'S HOSPITAL (H)

PURPOSE OF GRANT: MACULAR DEGENERATION RESEARCH BY NEETU KUSHWAH, PHD,

ENTITLED: (M2024002F) ROLE OF NUCLEAR RECEPTOR RORA IN LIPID

DYSREGULATION. INVESTIGATOR'S SUMMARY: AGE-RELATED MACULAR DEGENERATION

(AMD) IS A LEADING CAUSE OF BLINDNESS AMONG PEOPLE AGED 60 AND OLDER.

IT IS A MULTIFACTORIAL DISEASE INVOLVING MULTIPLE CELLULAR PATHWAYS,

AMONG WHICH LIPID DYSREGULATION AND INFLAMMATION ARE MAJOR PATHOGENIC

FACTORS. RESEARCHERS WILL INVESTIGATE THE ROLE OF A LIPID-SENSING

NUCLEAR RECEPTOR RETINOIC ACID-RELATED ORPHAN RECEPTOR ALPHA (RORA) IN

REGULATING CHRONIC SUBRETINAL INFLAMMATION TO ELUCIDATE AMD

PATHOGENESIS. THEY WILL ASSESS IF GENETIC DELETION OF RORA IN A TYPE OF

INFLAMMATORY CELLS MAY LEAD TO LIPID DYSREGULATION AND CHRONIC

INFLAMMATION.

NAME OF ORGANIZATION OR GOVERNMENT: JOHNS HOPKINS UNIVERSITY SCHOOL OF

MEDICINE (H) PURPOSE OF GRANT: MACULAR DEGENERATION RESEARCH BY KRISHNA

SINGH, PHD, ENTITLED: (M2024003F) NRF2 PROTEIN ENHANCES NATURAL

ANTIOXIDANT DEFENSES BY CELLULAR ACETYLTATION. INVESTIGATOR'S SUMMARY:

IN AGE-RELATED MACULAR DEGENERATION (AMD), RETINAL PIGMENT EPITHELIAL

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(RPE) CELLS ARE DAMAGED BY OXIDATIVE STRESS. NRF2 IS A PROTEIN THAT PROTECTS AGAINST OXIDATIVE STRESS; HOWEVER, NRF2 SIGNALING DECLINES IN AMD. DR. SINGH AND HIS TEAM PROPOSE TO FIND A CAUSE FOR NRF2 SIGNALING DECLINE, CALLED ACETYLATION, A PROCESS THAT MODIFIES PROTEINS TO CHANGE HOW GENES ARE PRODUCED. RESEARCHERS WILL TREAT RPE CELLS WITH SMOKE AND VERIFY IF THE ACETYLATED NRF2 WILL PREVENT ITS DECLINE. IF SUCCESSFUL, THEY WILL HAVE A FAVORABLE STRATEGY FOR TREATING AMD.

NAME OF ORGANIZATION OR GOVERNMENT: SCHEPENS EYE RESEARCH INSTITUTE, INC. (H) PURPOSE OF GRANT: MACULAR DEGENERATION RESEARCH BY SHINTARO SHIRAHAMA, MD, PHD, ENTITLED: (M2024004F) DEVELOPMENT OF A TRANSPLANT-INDEPENDENT THERAPY FOR RPE DYSFUNCTION. INVESTIGATOR'S SUMMARY: AGING IS A CRITICAL RISK FACTOR FOR DEVELOPING AGE-RELATED MACULAR DEGENERATION (AMD), WHICH IMPLIES THAT YOUNG RETINAL PIGMENT EPITHELIUM (RPE) CELLS CAN SUCCESSFULLY COMBAT THE UNDERLYING CAUSES OF AMD. CONVERSELY, AS RPE CELLS AGE, THEY UNDERGO ALTERATIONS, RENDERING THEM MORE SUSCEPTIBLE TO AMD PATHOGENESIS. DR. SHIRAHAMA'S TEAM FOUND THAT EPIGENETIC REPROGRAMMING THROUGH OSK (OCT4, SOX2, AND KLF4) TRANSDUCTION COULD REVERSE THE CELLULAR BIOLOGICAL AGE AND RESTORE FUNCTION. THEREFORE, IF THEY CAN REVERSE THE BIOLOGICAL AGE OF RPE CELLS, THESE YOUNGER CELLS COULD SUCCESSFULLY COMBAT THE DISEASE, STOPPING FURTHER PROGRESSION AND RESTORING FUNCTIONAL VISION.

PART II, LINE 1(H) CONTINUED

NAME OF ORGANIZATION OR GOVERNMENT: UNIVERSITY OF WASHINGTON (H) PURPOSE OF GRANT: MACULAR DEGENERATION RESEARCH BY JULIETTE WOHLSCHEGEL, PHD, ENTITLED: (M2024005F) REGENERATING THE HUMAN RETINA. INVESTIGATOR'S SUMMARY: THE HUMAN RETINA CANNOT REGENERATE AFTER DISEASES LIKE AGE-RELATED MACULAR DEGENERATION, WHICH OFTEN LEADS TO

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BLINDNESS. HOWEVER, A FEW SPECIES INCLUDING FISH CAN REGENERATE NEW RETINAL CELLS THAT EVENTUALLY RESTORE VISUAL FUNCTION. THE REGENERATIVE PROCESS IS DRIVEN BY THE MLLER GLIA, A SUPPORT CELL IN THE RETINA. RESEARCHERS ARE NOW PARTIALLY ABLE TO RECAPITULATE THIS PHENOMENON IN THE HUMAN RETINA. USING THIS NEW STRATEGY, THEY PLAN TO TEST THE REGENERATIVE CAPACITY OF A SPECIFIC ZONE OF THE HUMAN RETINA: THE MACULA. DR. WOHLSCHEGEL AND HER TEAM NEXT PROPOSE TO TEST DIFFERENT FACTORS TO SPECIFICALLY STIMULATE CONE PHOTORECEPTOR REGENERATION FROM MLLER GLIA.

NAME OF ORGANIZATION OR GOVERNMENT: THE PENNSYLVANIA STATE UNIVERSITY COLLEGE OF MEDICINE (H) PURPOSE OF GRANT: MACULAR DEGENERATION RESEARCH BY SANDEEP MOOTHEDATH SUBRAHMANIAN, PHD, ENTITLED: (M2024006F) UNDERSTANDING EARLY EVENTS IN AGE-RELATED MACULAR DEGENERATION.

INVESTIGATOR'S SUMMARY: AGE-RELATED MACULAR DEGENERATION (AMD) IS A LEADING CAUSE OF VISION LOSS AMONG THE ELDERLY POPULATION. A SIGNIFICANT CHALLENGE IN ADDRESSING AMD IS THE LACK OF UNDERSTANDING OF THE EARLY MOLECULAR EVENTS THAT CONTRIBUTE TO ITS DEVELOPMENT. THIS PROJECT AIMS TO EXPLORE A NOVEL MOLECULAR SWITCH THAT PLAYS A ROLE IN THE FAILED ANTIOXIDANT AND INFLAMMATORY RESPONSES IN RETINAL PIGMENT EPITHELIUM WITH AGING. THE FINDINGS ARE EXPECTED TO IDENTIFY NEW TARGETS FOR THERAPEUTICS THAT ARE PREVENTATIVE OR PROVIDE INTERVENTIONS EARLY IN THE DEVELOPMENT OF AMD.

NAME OF ORGANIZATION OR GOVERNMENT: UNIVERSITY OF COLORADO (H) PURPOSE OF GRANT: MACULAR DEGENERATION RESEARCH BY MIGUEL FLORES-BELIVER, PHD, ENTITLED: (M2024008N) EXOSOMES & AUTOPHAGY: SUSPICIOUS PARTNERS IN DRUSEN BIOGENESIS AND AMD. INVESTIGATOR'S SUMMARY: THE RESEARCH TEAM SEEKS TO UNDERSTAND HOW LITTLE VESICLES, CALLED EXOSOMES, THAT RETINAL PIGMENT EPITHELIUM (RPE) AND RETINAL CELLS SECRETE AND CONTAIN MANY

Part IV Supplemental Information

CELLULAR BIOPRODUCTS CONTRIBUTE TO DRUSEN FORMATION AND THE PROGRESSION OF AMD. THEY WILL ALSO IDENTIFY BIOACTIVE MOLECULES RELEASED IN EXOSOMES THAT COULD SERVE AS POTENTIAL BIOMARKERS FOR AMD. THE GOAL IS TO BRIDGE BASIC RESEARCH ON AMD WITH CLINICAL APPLICATION BY TRANSFORMING OUR UNDERSTANDING OF AMD PATHOPHYSIOLOGY AND DRUSEN FORMATION. THIS INVOLVES PRECLINICAL VALIDATION, INVESTIGATING INTERVENTIONS TARGETING AUTOPHAGY AND EXOSOMES, BIOMARKER DEVELOPMENT, DIAGNOSTIC TOOL INTEGRATION, THERAPEUTIC DEVELOPMENT, AND PATIENT STRATIFICATION FOR PERSONALIZED TREATMENTS. THROUGH THESE STRATEGIES, WE AIM TO IMPROVE AMD DIAGNOSIS, TREATMENT, AND PATIENT OUTCOMES.

NAME OF ORGANIZATION OR GOVERNMENT: UNIVERSITY OF GEORGIA RESEARCH FOUNDATION, INC. (H) PURPOSE OF GRANT: MACULAR DEGENERATION RESEARCH BY HEIKE KROEGER, PHD, ENTITLED: (M2024010N) DECODING VISION: CONE DEVELOPMENT IN RETINAL ORGANIDS AND ANOLE LIZARD. INVESTIGATOR'S SUMMARY: THE LOSS OF CONE PHOTORECEPTOR CELLS DURING AGE-RELATED MACULAR DEGENERATION (AMD) CAN LEAD TO IRREVERSIBLE VISION LOSS. REPAIRING THESE SPECIALIZED CELLS COULD CHANGE THE OVERALL APPROACH OF AMD THERAPIES AND COMPLEMENT CURRENT TREATMENT OPTIONS. THIS RESEARCH INVESTIGATES HOW CONE PHOTORECEPTOR OUTER SEGMENTS ARE FORMED AND REGENERATED USING STEM CELL ORGANIDS AND THE BROWN ANOLE LIZARD, A NOVEL RESEARCH MODEL FOR CONE PHOTORECEPTOR DISEASES. FINDINGS WILL IDENTIFY A NEW STRATEGY AND POTENTIAL NEW THERAPEUTIC TARGETS TO IMPROVE AND PREVENT LOSS OF CONE PHOTORECEPTOR CELL FUNCTION DURING AMD.

NAME OF ORGANIZATION OR GOVERNMENT: GEROGIA TECH RESEARCH CORPORATION (H) PURPOSE OF GRANT: NATIONAL GLAUCOMA RESEARCH BY HANNAH YOUNGBLOOD, PHD, ENTITLED: (G2024001F) EFFECTS OF PSEUDOEXFOLIATION GLAUCOMA VARIANTS IN LOXL1. INVESTIGATOR'S SUMMARY: GENETIC VARIANTS IN LOXL1

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CAN ALTER RISK FOR PSEUDOEXFOLIATION GLAUCOMA (XFG), A BLINDING DISEASE THAT AFFECTS MORE THAN 10 MILLION PEOPLE. THIS PROJECT SEEKS TO DETERMINE HOW THESE VARIANTS ALTER THE STRUCTURE AND FUNCTION OF THE LOXL1 PROTEIN. SUCCESSFUL COMPLETION OF THIS PROJECT WILL PROVIDE A BETTER UNDERSTANDING OF HOW LOXL1 VARIANTS CONTRIBUTE TO XFG AND PROVIDE GROUNDWORK FOR THERAPEUTIC DEVELOPMENT. THIS PROJECT WOULD BE THE FIRST TO CHARACTERIZE THE PROTEIN STRUCTURE OF LOXL1 WITH AND WITHOUT PSEUDOEXFOLIATION GLAUCOMA-ASSOCIATED VARIANTS. RESULTS WILL OFFER NOVEL INSIGHT INTO HOW PSEUDOEXFOLIATION GLAUCOMA-ASSOCIATED VARIANTS CONTRIBUTE TO THE DISEASE BY ALTERING INTERACTIONS WITH FIBULIN-5, A PROTEIN NECESSARY FOR PROPER LOXL1 LOCALIZATION.

NAME OF ORGANIZATION OR GOVERNMENT: INDIANA UNIVERSITY (H) PURPOSE OF GRANT: NATIONAL GLAUCOMA RESEARCH BY SHRUTI PATIL, PHD, ENTITLED: (G2024002F) RGC AXON DEGENERATION IN A 3D MICROFLUIDIC HYDROGEL MODEL.

INVESTIGATOR'S SUMMARY: RETINAL GANGLION CELL (RGC) AXONS TRAVERSING THE OPTIC NERVE HEAD ARE HIGHLY SUSCEPTIBLE TO GLAUCOMATOUS DAMAGE, YET THE LINK BETWEEN OPTIC NERVE HEAD BIOMECHANICS AND RGC AXONAL DEGENERATION REMAINS POORLY UNDERSTOOD. TO ADDRESS THIS, RESEARCHERS WILL IMPLEMENT 3D PLATFORMS INTEGRATING MICROFLUIDICS AND HYDROGELS WITH TUNABLE STIFFNESS TO MODEL BIOMECHANICAL ASPECTS AFFECTING RGC AXONS IN THE OPTIC NERVE HEAD. UPON COMPLETION, THE STUDY WILL UNCOVER INSIGHTS INTO RGC AXONAL DYSFUNCTION DUE TO BIOMECHANICAL CHANGES IN CONTEXT OF HUMAN TISSUE USING A STEM CELL MODEL. BY TARGETING THE BIOMECHANICAL ASPECTS OF THE LAMINA CRIBROSA, THE STUDY COULD LEAD TO NOVEL THERAPEUTIC INTERVENTIONS BEYOND TRADITIONAL APPROACHES REGULATING INTRAOCULAR PRESSURE. INCORPORATING HYDROGELS IN THE MICROFLUIDIC SYSTEM ALLOWS STUDY OF COMPLEX CELLULAR INTERACTIONS IN A 3D MICROENVIRONMENT, APPLICABLE TO OTHER AGE-ASSOCIATED OPTIC NERVE

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DEGENERATION. THIS OFFERS HOPE FOR MORE EFFECTIVE GLAUCOMA TREATMENTS.

NAME OF ORGANIZATION OR GOVERNMENT: GEROGIA TECH RESEARCH CORPORATION

(H) PURPOSE OF GRANT: NATIONAL GLAUCOMA RESEARCH BY HAIYAN LI, PHD,

ENTITLED: (G2024003F) THE ROLE OF MICROTUBULES IN GLAUCOMATOUS

SCHLEMM'S CANAL MECHANOBIOLOGY. INVESTIGATOR'S SUMMARY: INTRAOCULAR

PRESSURE IS LARGELY CONTROLLED BY TISSUES AT OR NEAR SCHLEMM'S CANAL

INNER WALL ENDOTHELIUM, WHERE REDUCED FLUID CONDUCTIVITY OCCURS IN

GLAUCOMA. THIS PROJECT AIMS TO INVESTIGATE THE IMPACT OF MICROTUBULES,

CRUCIAL COMPONENTS OF THE CYTOSKELETON, ON SCHLEMM'S CANAL CELL

MECHANOBIOLOGY AND INTRAOCULAR PRESSURE, A KEY RISK FACTOR FOR

GLAUCOMA. THIS WORK WILL IMPROVE OUR UNDERSTANDING OF SCHLEMM'S CANAL

CELL MECHANOBIOLOGY, CREATING A FOUNDATION FOR FUTURE STUDIES

INVESTIGATING HOW MICROTUBULES IN SCHLEMM'S CANAL CELLS INFLUENCE

OUTFLOW FACILITY AND OCULAR HYPERTENSION. ADDITIONALLY, IT WILL OPEN

AVENUES FOR BOTH EX VIVO AND IN VIVO INVESTIGATIONS OF CANDIDATE DRUGS

TARGETING THE HYDRAULIC CONDUCTIVITY OF SCHLEMM'S CANAL INNER WALL

CELLS AS TREATMENTS FOR OCULAR HYPERTENSION IN PRIMARY OPEN-ANGLE

GLAUCOMA.

NAME OF ORGANIZATION OR GOVERNMENT: UNIVERSITY OF PITTSBURGH (H)

PURPOSE OF GRANT: NATIONAL GLAUCOMA RESEARCH BY BINGRUI WANG, PHD,

ENTITLED: (G2024004F) HOW PRESSURE DEFORMS THE EYE AND LEADS TO

GLAUCOMA VISION LOSS. INVESTIGATOR'S SUMMARY: BLINDNESS IN GLAUCOMA IS

CAUSED BY DAMAGE TO AXONS THAT CARRY VISUAL INFORMATION TO THE BRAIN.

DAMAGE OFTEN STARTS IN THE BACK OF THE EYE AND IS DUE TO HIGH EYE

PRESSURE WHICH MECHANICALLY DEFORMS AXONS. HOWEVER, THE LINK BETWEEN

AXON DEFORMATION AND LONG-TERM DAMAGE IS UNCLEAR. USING ANIMAL MODELS,

RESEARCHERS WILL INVESTIGATE AXON DEFORMATION AND ITS LINK TO DAMAGE TO

UNDERSTAND GLAUCOMA'S CAUSES.

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NAME OF ORGANIZATION OR GOVERNMENT: UNIVERSITY OF CALIFORNIA, SAN FRANCISCO (H) PURPOSE OF GRANT: NATIONAL GLAUCOMA RESEARCH BY MENGYA ZHAO, PHD, ENTITLED: (G2024005F) WHY CERTAIN RETINA GANGLION CELLS STAY STRONG IN GLAUCOMA. INVESTIGATOR'S SUMMARY: THIS PROJECT FOCUSES ON UNDERSTANDING THE MECHANISMS UNDERLYING NEURONAL LOSS IN GLAUCOMA, WHICH CAN LEAD TO IRREVERSIBLE BLINDNESS. THIS DISEASE VARIABLY IMPACTS MANY EYE NEURONS. USING A COMBINATION OF CUTTING-EDGE TECHNIQUES, RESEARCHERS WILL INVESTIGATE WHY CERTAIN NEURONS ARE MORE RESILIENT THAN OTHERS. THIS WORK COULD UNLOCK NEW TREATMENTS, OFFERING A BREAKTHROUGH IN GLAUCOMA THERAPY AND EYE CARE.

PART II, LINE 1(H) CONTINUED

NAME OF ORGANIZATION OR GOVERNMENT: SUNY UPSTATE MEDICAL UNIVERSITY (H) PURPOSE OF GRANT: NATIONAL GLAUCOMA RESEARCH BY SAMUEL HERBERG, PHD, ENTITLED: (G2024006S) INVESTIGATE HOW THE MICROENVIRONMENT AFFECTS SCHLEMM'S CANAL CELL BEHAVIOR. INVESTIGATOR'S SUMMARY: HIGH-PRESSURE GLAUCOMA IS A LEADING CAUSE OF BLINDNESS WORLDWIDE, BUT THE CAUSAL MECHANISMS ARE UNCLEAR. USING OUR UNIQUE 3D FLUID DRAINAGE TISSUE MODEL SYSTEM, WE SEEK TO INVESTIGATE THE CONTRIBUTIONS OF GLAUCOMATOUS BIOMECHANICAL CUES IN DRIVING SCHLEMM'S CANAL CELL MECHANO-DYSFUNCTION. THIS WORK WILL SET THE STAGE FOR IDENTIFICATION OF FUTURE GLAUCOMA THERAPIES TARGETING CELLULAR BIOMECHANICS.

NAME OF ORGANIZATION OR GOVERNMENT: UNIVERSITY OF VIRGINIA (H) PURPOSE OF GRANT: NATIONAL GLAUCOMA RESEARCH BY XIARONG LIU, PHD, ENTITLED: (G2024008S) LIGHT-MEDIATED SLEEP AND MOOD DISORDERS IN GLAUCOMA. INVESTIGATOR'S SUMMARY: A SMALL POPULATION OF RETINAL GANGLION CELLS, THE IPRGCS, COMMUNICATES LIGHT INFORMATION FROM THE EYES TO THE BRAIN FOR PURPOSES OTHER THAN VISION SUCH AS THE REGULATION OF SLEEP AND

Part IV Supplemental Information

MOOD. BECAUSE GLAUCOMA PATIENTS OFTEN SUFFER FROM LIGHT-MEDIATED SLEEP AND MOOD DISORDERS, WE AIM TO UNDERSTAND HOW IPRGCS CONTROL LIGHT'S EFFECTS ON MOOD AND SLEEP. THIS STUDY REPRESENTS A FIRST ATTEMPT TO EXPLORE THE CHANGES DUE TO GLAUCOMA IN THE IPRGC-BASED NEURAL CIRCUITRY RESPONSIBLE FOR NON-VISUAL RESPONSES TO LIGHT. THIS RESEARCH WILL CONTRIBUTE TO OUR UNDERSTANDING OF THE NEURAL PATHWAYS UNDERLYING MOOD AND BEHAVIORAL CHANGES EXPERIENCED BY GLAUCOMA PATIENTS. SUCH INSIGHTS ARE CRUCIAL FOR ENHANCING PATIENT CARE AND DEVELOPING BETTER TREATMENTS AS GLAUCOMA ADVANCES AND EVOLVES.

NAME OF ORGANIZATION OR GOVERNMENT: OREGON HEALTH & SCIENCE UNIVERSITY

(H) PURPOSE OF GRANT: NATIONAL GLAUCOMA RESEARCH BY DIANA LOZANO, PHD, ENTITLED: (G2024009S) IOP-RELATED GENE RESPONSES IN GLAUCOMA TISSUES.

INVESTIGATOR'S SUMMARY: ELEVATED INTRAOCULAR PRESSURE (IOP) IS A LEADING RISK FACTOR FOR PRIMARY OPEN-ANGLE GLAUCOMA. YET, THE CELLULAR EVENTS THAT COMPRISE PROTECTIVE HOMEOSTATIC IOP RESPONSES, OR DELETERIOUS EVENTS LEADING TO TISSUE INJURY, ARE CURRENTLY POORLY UNDERSTOOD. WE WILL INVESTIGATE HOW MILD AND REPEAT IOP ELEVATIONS MODIFY THE MOLECULAR MECHANISMS IN OCULAR TISSUES IMPLICATED IN GLAUCOMA PATHOGENESIS.

NAME OF ORGANIZATION OR GOVERNMENT: GEORGIA INSTITUTE OF TECHNOLOGY (H)

PURPOSE OF GRANT: NATIONAL GLAUCOMA RESEARCH BY C. ROSS ETHIER, PHD, ENTITLED: (CG2020001) NEXT-GENERATION GLAUCOMA DRUGS TO SELECTIVELY RELEASE THE PRESSURE-BUILDING BLOCK IN SCHLEMM'S CANAL. INVESTIGATOR'S SUMMARY: WE NOW UNDERSTAND THAT ENDOTHELIAL CELLS OF THE INNER WALL OF SCHLEMM'S CANAL (SC) PLAY A KEY ROLE IN HOMEOSTATIC CONTROL MECHANISMS THAT MAINTAIN IOP WITHIN A TARGET RANGE. THE LONG-TERM GOAL OF THIS PROJECT IS TO DEVELOP NOVEL THERAPIES THAT DIRECTLY TARGET SC CELLS TO IMPROVE IOP CONTROL. THESE TARGETED THERAPIES WILL BE HIGHLY EFFECTIVE

Part IV Supplemental Information

DUE TO THEIR SPECIFICITY AND WILL THUS GREATLY BENEFIT GLAUCOMA PATIENTS.

NAME OF ORGANIZATION OR GOVERNMENT: DUKE UNIVERSITY (H) PURPOSE OF GRANT: NATIONAL GLAUCOMA RESEARCH BY W. DANIEL STAMER, PHD, ENTITLED: (CG2020002) NEXT-GENERATION GLAUCOMA DRUG DEVELOPMENT. INVESTIGATOR'S SUMMARY: FOR THE PROJECT, WE WILL SCREEN CANDIDATE ADENO-ASSOCIATED VIRUSES AND ENGINEERED PROMOTERS CLONED INTO LENTIVIRUSES OBTAINED FROM COLLABORATORS IN HUMAN SCHLEMM'S CANAL CELLS IN VITRO AND ANTERIOR SEGMENTS EX VIVO FOR SELECTIVE TROPISM TO/ACTIVITY IN TRABECULAR MESHWORK VERSUS SCHLEMM'S CANAL.

NAME OF ORGANIZATION OR GOVERNMENT: COLUMBIA UNIVERSITY (H) PURPOSE OF GRANT: NATIONAL GLAUCOMA RESEARCH BY SIMON JOHN, PHD, ENTITLED: (CG2020004) NOVEL GENE-THERAPY APPROACH FOR GLAUCOMA. INVESTIGATOR'S SUMMARY: THE PROJECT AIMS TO DEVELOP AND TEST RESOURCES FOR SCHLEMM'S CANAL SPECIFIC TARGETING AND EXPRESSION OF GENES FOR GENE THERAPY. SUCCESSFUL DEVELOPMENT OF THIS TARGETED THERAPY WILL HELP CONTROL EYE PRESSURE MORE EFFECTIVELY AND PROVIDE BETTER TREATMENT OPTIONS FOR GLAUCOMA PATIENTS.

NAME OF ORGANIZATION OR GOVERNMENT: STANFORD UNIVERSITY (H) PURPOSE OF GRANT: NATIONAL GLAUCOMA RESEARCH BY JEFFREY GOLDBERG, PHD, ENTITLED: (CG2022001) NEUROPROTECTION AND NEUROENHANCEMENT IN GLAUCOMA. INVESTIGATOR'S SUMMARY: THE GOAL OF THIS PROJECT IS TO EVALUATE SAFETY AND PROOF OF CONCEPT FOR WHETHER CILIARY NEUROTROPHIC FACTOR (CNTF) CAN ENHANCE VISION OR PROTECT AGAINST VISION LOSS IN GLAUCOMA.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization **BRIGHTFOCUS FOUNDATION** Employer identification number **23-7337229**

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 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
1a		
1b		
2		
3		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2023

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) STACY PAGOS HALLER PRESIDENT/CEO	(i)	408,714.	0.	1,693.	29,700.	27,785.	467,892.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) NANCY LYNN SR. VP STRATEGIC PARTNERSHIPS	(i)	259,564.	0.	1,584.	24,465.	37,027.	322,640.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) R. BRIAN ELDERTON SR. VP, DEVELOPMENT	(i)	252,137.	0.	1,715.	23,361.	24,967.	302,180.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) DIANE BOVENKAMP, PHD VP, SCIENTIFIC AFFAIRS	(i)	189,665.	0.	552.	17,075.	5,165.	212,457.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) DAVID F. MARKS, CPA, CMA VP, FINANCE & ADMIN TILL 10/2023	(i)	155,687.	0.	1,254.	15,151.	39,533.	211,625.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) KACI BAEZ VP, INTEGRATED MKTING & COMM.	(i)	172,402.	0.	200.	4,650.	21,999.	199,251.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) SHARYN ROSSI, PHD, DIR. OF SCIENT. PROGRAMS, NEUROSCIENCE	(i)	125,121.	0.	240.	8,775.	35,057.	169,193.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) LISA MORGAN DIRECTOR OF ANNUAL GIVING	(i)	127,764.	0.	552.	12,139.	21,508.	161,963.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) AYO ABRAHAM, CPA, CGMA CONTROLLER UNTIL 8/2023	(i)	138,238.	0.	688.	9,371.	11,985.	160,282.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) JEFFREY HONAKER SR. MGR. OPS AND BUILDING	(i)	111,125.	0.	1,032.	10,271.	34,133.	156,561.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) PREETI SUBRAMANIAN, PHD, DIR. OF SCIENT. PROGRAMS, VISION SCIENCE	(i)	134,875.	0.	240.	12,139.	3,518.	150,772.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(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, LINE 3:

THE LAST COMPENSATION SURVEY WAS COMPLETED ON 3/9/2022.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2023

Open to Public Inspection

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

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

Department of the Treasury
Internal Revenue Service

Name of the organization **BRIGHTFOCUS FOUNDATION** Employer identification number **23-7337229**

Part I	Types of Property	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded	X	20	87,848.	FMV
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ()				
26	Other ()				
27	Other ()				
28	Other ()				

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

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2023

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):

BRIGHTFOCUS REPORTS THE NUMBER OF CONTRIBUTIONS IN PART I, COLUMN B.

Multiple horizontal lines for supplemental information.

**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

2023

Open to Public
Inspection

Name of the organization

BRIGHTFOCUS FOUNDATION

Employer identification number

23-7337229

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

BRIGHTFOCUS FOUNDATION FUNDS EXCEPTIONAL RESEARCH WORLDWIDE TO DEFEAT
ALZHEIMER'S DISEASE, MACULAR DEGENERATION, AND GLAUCOMA AND PROVIDES
EXPERT INFORMATION ON THESE HEARTBREAKING DISEASES.

OUR VISION IS: A WORLD FREE FROM DISEASES OF MIND AND SIGHT.

COLLECTIVELY, MORE THAN 300 MILLION PEOPLE WORLDWIDE SUFFER FROM THESE
DISEASES.

BRIGHTFOCUS HAS A PROVEN TRACK RECORD OF SUPPORTING THE MOST
INNOVATIVE, EARLY-STAGE RESEARCH SEEKING TO FOSTER A BETTER
UNDERSTANDING OF, TREATMENTS FOR, AND ULTIMATELY, A CURE FOR, THESE
AGE-RELATED DISEASES WITH NO CURE. SINCE 1973, BRIGHTFOCUS HAS AWARDED
MORE THAN \$297 MILLION IN RESEARCH GRANTS TO THOUSANDS OF SCIENTISTS IN
25 COUNTRIES THROUGH ITS THREE PROGRAMS: ALZHEIMER'S DISEASE RESEARCH,
MACULAR DEGENERATION RESEARCH, AND NATIONAL GLAUCOMA RESEARCH. THE
RESEARCH WE SUPPORT IS CAREFULLY CHOSEN BY OUR SCIENTIFIC REVIEW
COMMITTEES, COMPRISING WORLD-RENOWNED RESEARCHERS AND LEADERS IN THEIR
FIELDS. OUR RESEARCH FUNDING HAS LED TO MAJOR CONTRIBUTIONS TO
UNDERSTANDING THESE DISEASES AND SUPPORT FOR SCIENTISTS WHO HAVE
RECEIVED PRESTIGIOUS AWARDS, INCLUDING TWO NOBEL PRIZES. AN INDICATOR
OF OUR ABILITY TO PUSH NEW BOUNDARIES OF KNOWLEDGE IS THAT
BRIGHTFOCUS-SUPPORTED RESEARCH WAS FOUND TO HAVE HAD 10 TIMES THE
IMPACT ON DRIVING FUTURE SCIENCE THAN WORK SUPPORTED BY MANY OTHER
ORGANIZATIONS.

Name of the organization BRIGHTFOCUS FOUNDATION	Employer identification number 23-7337229
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THE WORLD-CLASS RESEARCH IDENTIFIED AND SUPPORTED BY BRIGHTFOCUS IS ON THE CUTTING EDGE OF THE FIGHT TO SAVE MIND AND SIGHT. OUR FUNDING ACTS AS A CATALYST IN EARLY-STAGE RESEARCH, AND BRIGHTFOCUS RESEARCH PROGRAMS ARE DESIGNED TO PROVIDE INITIAL FUNDING FOR HIGHLY INNOVATIVE EXPERIMENTAL IDEAS. DUE TO THE STRUCTURED GRANT REVIEW AND APPROVAL PROCESS, THE RESEARCH IMPACT OF BRIGHTFOCUS IS VERY HIGH. MOST RECIPIENTS OF BRIGHTFOCUS FUNDING GO ON TO RECEIVE FUTURE GRANTS FROM OTHER SOURCES THAT ARE UP TO 10 TIMES LARGER THAN THE ORIGINAL BRIGHTFOCUS AWARD. THIS HIGH RETURN ON BRIGHTFOCUS INVESTMENT SPEAKS TO OUR ABILITY TO IDENTIFY PROMISING RESEARCH IN ITS EARLIEST STAGES AND SPAWN FUTURE SCIENTIFIC DISCOVERIES. IT IS OUR FIRM BELIEF THAT HAVING THE COURAGE TO INVEST IN INNOVATIVE IDEAS WILL LEAD TO REVOLUTIONARY APPROACHES AND LIFE-SAVING BREAKTHROUGHS.

ALONG WITH FUNDING CUTTING-EDGE RESEARCH TO FIND CURES FOR SOME OF THE WORLD'S COSTLIEST DISEASES, BRIGHTFOCUS ALSO PROVIDES FREE, EXPERT-VETTED EDUCATIONAL MATERIALS AND SUPPORT TO HUNDREDS OF THOUSANDS OF PEOPLE IMPACTED BY THESE DISEASES NATIONWIDE. WE GROUND THESE EDUCATIONAL MATERIALS IN THE LATEST RESEARCH FINDINGS AND BREAKTHROUGHS.

BRIGHTFOCUS ALSO INCREASES PUBLIC AWARENESS OF ALZHEIMER'S, MACULAR DEGENERATION, AND GLAUCOMA, AND COMMUNICATES WITH THOUGHT LEADERS AND ELECTED OFFICIALS ABOUT THE IMPORTANCE OF SCIENTIFIC RESEARCH IN THESE AREAS.

BRIGHTFOCUS' AWARD-WINNING PUBLIC SERVICE ANNOUNCEMENTS (PSAS) HAVE APPEARED ON TELEVISION, RADIO, AND IN PRINT THROUGHOUT THE NATION. THE

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IMPACT OF ALZHEIMER'S, MAKE A PLAN TODAY: GET YOUR EYES CHECKED, AND FINDING ANSWERS IN THE FIGHT AGAINST ALZHEIMER'S SEEK TO RAISE AWARENESS ABOUT THESE DISEASES AND THE IMPORTANCE OF EARLY DETECTION. SIMILAR MESSAGES HAVE BEEN DELIVERED THROUGH DONATED PRINT PSA SPACE IN AIRPORTS AND TRAIN STATIONS, AS WELL AS AT PHARMACIES, SUPERMARKETS AND DIGITALLY. IN FISCAL YEAR 2024, THESE PSA MESSAGES GENERATED \$24,713,985 IN DONATED MEDIA SERVICES AND GARNERED OVER 405 MILLION IMPRESSIONS.

WE CONTINUE TO INCREASE OUR PRINT PUBLICATIONS, MANY IN SPANISH, THAT PROVIDE HELPFUL INFORMATION TO PATIENTS AND CAREGIVERS, AND REGULARLY PRODUCE NEW VIDEO AND AUDIO RESOURCES IN CONJUNCTION WITH ALLIES IN THE MEDICAL AND SCIENTIFIC COMMUNITIES.

PARTNERING WITH SEVERAL HIGH-PROFILE PUBLIC AND PRIVATE ORGANIZATIONS, BRIGHTFOCUS IS HELPING TO BETTER EDUCATE THE PUBLIC ON THE LATEST RESEARCH DEVELOPMENTS PERTAINING TO ALZHEIMER'S, MACULAR DEGENERATION, AND GLAUCOMA, AS WELL AS THE IMPORTANCE OF EQUITABLE PARTICIPATION IN CLINICAL RESEARCH TO ACCELERATE THE PATH TO CURES FOR NEURODEGENERATIVE DISEASES.

SPECIFICALLY, BRIGHTFOCUS PRODUCES AND DISSEMINATES FREE PROGRAMS INCLUDING:

BRIGHTFOCUS VISION CHATS. SINCE 2014, THESE AUDIO DISCUSSIONS HAVE BROUGHT TOGETHER PATIENTS AND CAREGIVERS FOR INTERACTIVE MONTHLY TELEPHONE FORUMS TO LEARN FROM AND ASK QUESTIONS OF LEADING VISION DISEASE EXPERTS. THE CHATS ARE ARCHIVED ON OUR WEBSITE, WITH AUDIO AND PRINT TRANSCRIPTS AVAILABLE IN SEVERAL ACCESSIBLE FORMATS ONLINE,

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INCLUDING AS PODCASTS ON SPOTIFY AND APPLE ITUNES.

ZOOM IN ON DEMENTIA AND ALZHEIMER'S, A MONTHLY VIRTUAL DISCUSSION OPEN TO THE PUBLIC FEATURING WORLD-RENOWNED RESEARCH SCIENTISTS WHO SHARE THE LATEST BREAKTHROUGHS AND FINDINGS IN THE FIELD. ALL EPISODES ARE RECORDED AND AVAILABLE TO WATCH ON DEMAND ON OUR WEBSITE AND YOUTUBE.

WE REGULARLY PUBLISH ARTICLES AND RESOURCES PROVIDING LAY-PERSON INFORMATION ABOUT COMMONLY ASKED DISEASE QUESTIONS. OVER THREE MILLION VISITORS EACH YEAR TO OUR WEBSITE, WWW.BRIGHTFOCUS.ORG, FIND A WEALTH OF INFORMATION ON RESEARCH, SYMPTOMS, TREATMENTS, AND CAREGIVER SUPPORT.

BRIGHTFOCUS IS A PRESENTING PARTNER OF SEVERAL DOCUMENTARY FILMS, INCLUDING REMEMBERING GENE WILDER AND GLEN CAMPBELL: I'LL BE ME, AND EXECUTES ASSOCIATED EDUCATIONAL IMPACT CAMPAIGNS. THESE FILMS ARE SHOWN IN COMMUNITY SETTINGS ACROSS THE COUNTRY TO INCREASE AWARENESS OF, AND PARTICIPATION IN, ALZHEIMER'S CLINICAL RESEARCH.

BRIGHTFOCUS HAS A LONG-RUNNING AND ROBUST DIRECT MAIL PROGRAM ACROSS THE THREE RESEARCH AREAS IT SUPPORTS. BRIGHTFOCUS SHARES MAILS AWARENESS-RAISING MATERIALS ACROSS ITS THREE PROGRAM AREAS TO OVER 520,000 NATIONAL HOUSEHOLDS, WITH MESSAGES FOCUSING ON:

RISK FACTORS AND SYMPTOM RECOGNITION THROUGH PUBLIC AWARENESS AND STEPS THE PUBLIC SHOULD TAKE THAT MAY HELP REDUCE THEIR RISK.

LIFESTYLE CHOICES THAT PROMOTE GOOD HEALTH, ENCOURAGING READERS TO TAKE ACTION TO REDUCE THE LIKELIHOOD OF THE ONSET OF THE DISEASE.

RESEARCH RESULTS AND TREATMENTS AVAILABLE TO ADDRESS THE DISEASE.

BRIGHTFOCUS REGULARLY INTERACTS WITH ADVOCACY ORGANIZATIONS,

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GOVERNMENTS AT ALL LEVELS, AND MEMBERS OF THE MEDIA, TO CALL GREATER ATTENTION TO DISEASES OF MIND AND SIGHT AND SHARE THE LATEST RESEARCH AND BEST PRACTICES WITH PUBLIC FIGURES AND KEY STAKEHOLDERS. THROUGH OUR OWN OUTREACH EFFORTS, AS WELL AS VIA ACTIVE ROLES IN ADVOCACY COALITIONS, WE HELP ADVANCE THE CAUSE OF PIONEERING SCIENCE AND BETTER POSITION BRIGHTFOCUS AS A RESOURCE FOR THOSE STRUGGLING WITH AND SEARCHING FOR CURES FOR THESE TERRIBLE DISEASES.

BRIGHTFOCUS IS THE PRESENTING SPONSOR OF THE HELEN KELLER PRIZE FOR VISION RESEARCH, ONE OF THE MOST PRESTIGIOUS RECOGNITIONS IN THE FIELD. SELECTED BY A PANEL OF THE WORLD'S FOREMOST VISION SCIENTISTS, EACH YEAR'S LAUREATE IS HONORED FOR A GROUNDBREAKING CONTRIBUTION OR DISCOVERY TO SAVE SIGHT. BRIGHTFOCUS BEGAN ITS SPONSORSHIP IN 2015 TO CALL GREATER ATTENTION TO VISION RESEARCH ACROSS THE PRIVATE AND PUBLIC SECTORS. BRIGHTFOCUS WAS HONORED IN 2023 FOR ITS CONTRIBUTIONS TO ADVANCING GLOBAL VISION RESEARCH BY THE ASSOCIATION FOR RESEARCH IN VISION AND OPHTHALMOLOGY (ARVO) FOUNDATION.

FORM 990, PART III, LINE 4A, DESCRIPTION OF PROGRAM SERVICE:
ALZHEIMER'S DISEASE RESEARCH (ADR)

ALZHEIMER'S DISEASE IS THE ONLY CAUSE OF DEATH AMONG THE TOP 10 IN AMERICA WITHOUT A WAY TO PREVENT, CURE, OR EVEN SLOW ITS PROGRESSION. IT IS AN IRREVERSIBLE DEGENERATION OF THE BRAIN THAT CAUSES DISRUPTIONS IN MEMORY, COGNITION, PERSONALITY, AND OTHER FUNCTIONS AND INEVITABLY LEADS TO DEATH. AN ESTIMATED 55 MILLION PEOPLE WORLDWIDE HAVE ALZHEIMER'S DISEASE OR OTHER DEMENTIAS, WITH WOMEN AND BLACK AND

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HISPANIC ADULTS MOST AT RISK.

ALZHEIMER'S DISEASE RESEARCH (ADR), A BRIGHTFOCUS FOUNDATION PROGRAM, FUNDS RESEARCH FOCUSED ON UNDERSTANDING THE CAUSES OF ALZHEIMER'S DISEASE, EARLY DETECTION, TREATMENTS TO HELP SLOW OR STOP ITS PROGRESSION, AND ULTIMATELY TO PREVENT THE DISEASE ALTOGETHER. ADR ANNUALLY AWARDS PEER-REVIEWED GRANTS TO SCIENTISTS FROM INSTITUTIONS WORLDWIDE WHO ARE CONDUCTING BIOMEDICAL AND CLINICAL RESEARCH ON ALZHEIMER'S DISEASE.

SINCE INCEPTION, ADR HAS CONTRIBUTED MORE THAN \$180 MILLION TO DEFEATING ALZHEIMER'S DISEASE. DURING THE FISCAL YEAR ENDING MARCH 31, 2024, ADR AWARDED \$5,689,899 IN PEER-REVIEWED GRANT AWARDS TO 23 NEW RESEARCH PROJECTS .

NOTABLE PROJECTS INCLUDE: HYPERTENSION AND LIFESTYLE EFFECTS ON RISK OF ALZHEIMER'S (INCLUDING LIPIDS); DRUG DISCOVERY AND BIOMARKERS; THE ROLE OF INFLAMMATION, MICROGLIA AND VASCULAR HEALTH IN DISEASE RISK; LOOKING AT THE MITOCHONDRIA AND CELL ENERGY DEFICIENCIES; ROLE OF SLEEP DISTURBANCES CAUSING INCREASED RISK OF COGNITIVE ISSUES; DIFFERENCES IN GENETICS AND DISEASE RISK FOR UNDERREPRESENTED POPULATIONS; AND BETTER USE OF MODERN TECHNOLOGIES, INCLUDING BIG DATA/AI AND SYSTEMS GENETICS ANALYSIS FOR INCREASED AND DECREASED RISKS. ADDITIONAL INFORMATION ABOUT SPECIFIC PROJECTS IS INCLUDED IN SCHEDULES F & I.

BRIGHTFOCUS IS HONORED TO HAVE SUPPORTED THE EARLY RESEARCH OF TWO NOBEL PRIZE WINNERS: DR. STANLEY PRUSINER AND DR. PAUL GREENGARD, WHOSE WORK HAS BEEN INSTRUMENTAL TO OUR CURRENT UNDERSTANDING OF ALZHEIMER'S

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DISEASE.

BRIGHTFOCUS CONTINUES ITS PARTNERSHIP WITH THE ACADEMIC JOURNAL MOLECULAR NEURODEGENERATION AS THE OFFICIAL JOURNAL OF BRIGHTFOCUS FOUNDATION. THE JOURNAL PUBLISHES TECHNICAL PAPERS RELATED TO NEURODEGENERATION IN THE THREE DISEASE AREAS. TO ACCELERATE SCIENTIFIC PROGRESS, IT IS AN OPEN-ACCESS JOURNAL, AND ALL CONTENT IS FREE OF CHARGE. THIS OPEN ACCESS ENSURES MAXIMAL REACH OF JOURNAL CONTENTS TO SCIENTISTS AND CARE PROVIDERS WORLDWIDE. MOLECULAR NEURODEGENERATION IS CURRENTLY THE HIGHEST IMPACT OPEN ACCESS JOURNAL IN THE NEUROSCIENCES.

IN ADDITION TO SUPPORTING CUTTING-EDGE RESEARCH, ALZHEIMER'S DISEASE RESEARCH PROVIDES EXPERT-VETTED RESOURCES ON DETECTING, TREATING, AND LIVING WITH THE DISEASE. THESE ARE AVAILABLE IN BOTH PRINT AS WELL AS ON OUR WEBSITE, WWW.BRIGHTFOCUS.ORG.

FORM 990, PART III, LINE 4B, DESCRIPTION OF PROGRAM SERVICE:

MACULAR DEGENERATION RESEARCH (MDR)

AGE-RELATED MACULAR DEGENERATION IS A LEADING CAUSE OF VISION LOSS IN THE UNITED STATES. IT DESTROYS THE MACULA, THE PART OF THE EYE THAT PROVIDES SHARP, CENTRAL VISION NEEDED FOR SEEING OBJECTS CLEARLY. THE MOST COMMON EYE CONDITION IN PEOPLE AGE 60 AND OLDER, IT CAN LEAD TO VISION LOSS IN ONE OR BOTH EYES, MAKING IT DIFFICULT TO RECOGNIZE FACES, DRIVE A CAR, OR READ. AT LEAST 20 MILLION AMERICANS HAVE SOME TYPE OF MACULAR DEGENERATION, INCLUDING BOTH THE EARLY AND LATER STAGES OF THE WET AND DRY TYPES.

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MACULAR DEGENERATION RESEARCH (MDR), A BRIGHTFOCUS FOUNDATION PROGRAM, HAS AWARDED NEARLY \$53 MILLION TO SCIENTISTS STUDYING THE DISEASE. THE LATEST RESEARCH IS FOCUSED ON NOVEL TREATMENTS, UNDERSTANDING THE CAUSES AND DISEASE PROGRESSION, PREDICTION METHODS AND DISEASE MODELING, DRUG THERAPIES, THE ROLE OF METABOLISM AND IMMUNE RESPONSE IN DISEASE RISK, GENES, AND NEW IMAGING, MACHINE LEARNING, AND SCREENING TECHNIQUES.

MDR GRANTS ARE AVAILABLE TO MACULAR DEGENERATION RESEARCHERS WORLDWIDE. MDR PLACES SPECIAL EMPHASIS ON ENCOURAGING APPLICATIONS FROM YOUNG SCIENTISTS AND THOSE WITH CUTTING-EDGE IDEAS. ANNUAL GRANT APPLICATIONS ARE PEER-REVIEWED, AND RECIPIENT SELECTIONS ARE BASED ON SCIENTIFIC MERIT.

DURING THE FISCAL YEAR ENDING MARCH 31, 2024, MDR AWARDED \$3,839,035 IN PEER-REVIEWED GRANT AWARDS TO 10 NEW RESEARCH PROJECTS, A TOTAL FUNDING AMOUNT OF \$2,850,660. DETAILS ABOUT SPECIFIC PROJECTS ARE INCLUDED IN SCHEDULES F & I.

IN ADDITION TO SUPPORTING CUTTING-EDGE RESEARCH, MACULAR DEGENERATION RESEARCH PROVIDES EXPERT-VETTED RESOURCES ON DETECTING, TREATING, AND LIVING WITH THIS DISEASE. THESE ARE AVAILABLE IN BOTH PRINT AS WELL AS ON OUR WEBSITE, WWW.BRIGHTFOCUS.ORG.

FORM 990, PART III, LINE 4C, DESCRIPTION OF PROGRAM SERVICE:

NATIONAL GLAUCOMA RESEARCH (NGR)

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GLAUCOMA IS THE SECOND LEADING CAUSE OF BLINDNESS WORLDWIDE, ACCORDING TO A RECENT REPORT FROM THE WORLD HEALTH ORGANIZATION, APPROXIMATELY 80 MILLION PEOPLE AROUND THE WORLD HAVE GLAUCOMA. MORE THAN THREE MILLION AMERICANS, OVER THE AGE OF 40 ARE LIVING WITH GLAUCOMA, WITH AN ESTIMATED 2.7 MILLION HAVE OPEN-ANGLE GLAUCOMA, THE MOST COMMON TYPE. IN THE UNITED STATES, GLAUCOMA IS A LEADING CAUSE OF BLINDNESS AMONG BLACK AND HISPANIC AMERICANS. WITH EARLY DETECTION AND TREATMENT, GLAUCOMA OFTEN CAN BE MANAGED TO PROTECT EYES FROM MORE SERIOUS VISION LOSS. IT IS ESTIMATED THAT ONLY HALF OF THE PEOPLE LIVING WITH GLAUCOMA ARE AWARE THAT THEY HAVE THE DISEASE.

NATIONAL GLAUCOMA RESEARCH (NGR), A BRIGHTFOCUS FOUNDATION PROGRAM, HAS AWARDED NEARLY \$51 MILLION WORLDWIDE IN RESEARCH GRANTS TOWARD THE STUDY OF GLAUCOMA. NGR-SUPPORTED RESEARCH HAS FOCUSED ON THE EYE-BRAIN CONNECTION, HOW PRESSURE BUILDUP IN THE EYE CAN AFFECT SYNAPTIC NERVE COMMUNICATIONS, NEUROPROTECTION AND OPTIC NERVE REGENERATION, DISCOVERING GLAUCOMA RISK GENES, AI/DEEP LEARNING AND ADAPTIVE OPTICS, SLEEP DISTURBANCE AND GLAUCOMA RISK, DEVELOPING EARLY GLAUCOMA SCREENING, AND PURSUING NOVEL GENETIC COUNSELING AND COMMUNICATION STRATEGIES, AMONGST OTHER INNOVATIVE PURSUITS.

NGR GRANTS ARE AVAILABLE TO GLAUCOMA RESEARCHERS WORLDWIDE. NGR PLACES SPECIAL EMPHASIS ON ENCOURAGING APPLICATIONS FROM YOUNG SCIENTISTS AND THOSE WITH CUTTING-EDGE IDEAS. ANNUAL GRANT APPLICATIONS ARE PEER-REVIEWED, AND RECIPIENT SELECTIONS ARE BASED ON SCIENTIFIC MERIT.

DURING THE FISCAL YEAR ENDING MARCH 31, 2024, NGR AWARDED \$1,549,923 IN

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PEER-REVIEWED GRANT AWARDS FOR 9 NEW PROJECTS. DETAILS ABOUT SPECIFIC PROJECTS ARE INCLUDED IN SCHEDULES F & I.

IN ADDITION TO SUPPORTING CUTTING-EDGE RESEARCH, NATIONAL GLAUCOMA RESEARCH PROVIDES EXPERT-VETTED RESOURCES ON DETECTING, TREATING, AND LIVING WITH THE DISEASE. THESE ARE AVAILABLE IN BOTH PRINT AS WELL AS ON OUR WEBSITE, WWW.BRIGHTFOCUS.ORG.

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

A DRAFT OF THE FEDERAL FORM 990 IS DISTRIBUTED TO THE AUDIT COMMITTEE FOR REVIEW PRIOR TO BEING SUBMITTED TO THE INTERNAL REVENUE SERVICE. THE DRAFT FEDERAL FORM 990 IS DISTRIBUTED EARLY ENOUGH TO PROVIDE EACH COMMITTEE MEMBER WITH A REASONABLE AMOUNT OF TIME FOR REVIEW AND SUBMISSION OF QUESTIONS OR COMMENTS PRIOR TO THE FILING DEADLINE. THE FINAL FEDERAL FORM 990 IS DISTRIBUTED TO EACH MEMBER OF THE FULL BOARD OF DIRECTORS PRIOR TO BEING FILED WITH THE INTERNAL REVENUE SERVICE. THE DRAFT OR FINAL FEDERAL FORM 990 MAY BE DISTRIBUTED IN PERSON, BY REGULAR MAIL, E-MAIL, OR FAX.

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

BRIGHTFOCUS HAS ALL EMPLOYEES, OFFICERS, AND DIRECTORS AGREE TO THE CODE OF CONDUCT THAT INCLUDES ADHERENCE TO THE CONFLICT OF INTEREST AND IMPLEMENTATION POLICY. EACH BOARD DIRECTOR, OFFICER, AND EMPLOYEE IS REQUIRED TO COMPLETE A CONFLICT OF INTEREST DISCLOSURE STATEMENT ANNUALLY.

EMPLOYEES MEET ANNUALLY WITH THE BRIGHTFOCUS' CHIEF COMPLIANCE OFFICER TO REVIEW THEIR CONFLICT OF INTEREST STATEMENTS, AND GIVE AN ANNUAL CONFLICT OF INTEREST COMPLIANCE REPORT TO THE BOARD CHAIR AND VICE CHAIR. IF A

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CONFLICT IS REPORTED, IT IS THEN REFERRED TO THE PRESIDENT/CEO AND/OR BRIGHTFOCUS' LEGAL COUNSEL AND, IF APPROPRIATE AND NECESSARY, THEN TO THE BOARD OF DIRECTORS OR ITS APPOINTED COMMITTEE FOR FURTHER ACTION.

THE DIRECTOR'S AND OFFICER'S STATEMENTS ARE REVIEWED BY THE BRIGHTFOCUS LEGAL COUNSEL. IF A CONFLICT IS REPORTED, IT IS THEN REFERRED TO THE BOARD OF DIRECTORS OR ITS APPOINTED COMMITTEE FOR FURTHER ACTION.

AT THE TIME OF THE BRIGHTFOCUS DISCUSSION AND DECISION CONCERNING A CONFLICT OF INTEREST, THE CONFLICTED PARTY IS NOT PRESENT IN THE MEETING.

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

BRIGHTFOCUS' BOARD OF DIRECTORS HAS OVERALL AUTHORITY AND RESPONSIBILITY FOR APPROVING THE ANNUAL BUDGET WHICH INCLUDES SALARY AND BENEFITS FOR ALL EMPLOYEES AT EVERY LEVEL INCLUDING NON-DIRECTOR OFFICERS AND KEY EMPLOYEES. ALL PAY ADJUSTMENTS ARE MADE ON A YEARLY BASIS EFFECTIVE APRIL 1ST, THE BEGINNING OF THE BRIGHTFOCUS FISCAL YEAR.

BEFORE APPROVING THE COMPENSATION OF THE PRESIDENT/CEO, THE BOARD DETERMINES THE TOTAL COMPENSATION TO BE PROVIDED BY BRIGHTFOCUS TO THE PRESIDENT/CEO IS REASONABLE CONSIDERING THE POSITION, RESPONSIBILITY AND QUALIFICATION OF THE POSITION HELD, INCLUDING THE RESULT OF AN EVALUATION OF PRIOR PERFORMANCE FOR BRIGHTFOCUS, IF APPLICABLE. THE PRESIDENT/CEO IS EVALUATED YEARLY BY THE BOARD OF DIRECTORS USING AN IN-DEPTH GOAL ATTAINMENT STRUCTURE, THAT INCLUDES A SELF-ASSESSMENT AND A BOARD OF DIRECTOR'S ASSESSMENT AND EVALUATION AGAINST SET GOALS, OUTCOMES, AND DELIVERABLES. IN ADDITION, THE BOARD OF DIRECTORS PERIODICALLY ENGAGES AN OUTSIDE CONSULTANT TO OBTAIN AND CONSIDER APPROPRIATE DATA, INCLUDING A

Name of the organization BRIGHTFOCUS FOUNDATION	Employer identification number 23-7337229
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SALARY SURVEY, WHICH INCLUDES INFORMATION COMPILED FROM THE FEDERAL FORM 990 OF OTHER ORGANIZATIONS, CONCERNING COMPENSATION PAID TO CEOS IN SIMILAR CIRCUMSTANCES. IN MAKING THE DETERMINATION, THE BOARD OF DIRECTORS CONSIDERS TOTAL COMPENSATION TO INCLUDE THE SALARY AND VALUE OF ALL BENEFITS PROVIDED BY BRIGHTFOCUS TO THE INDIVIDUAL IN PAYMENT FOR SERVICES. AT THE TIME OF THE BRIGHTFOCUS BOARD DISCUSSION AND DECISION CONCERNING THE PRESIDENT/CEO'S COMPENSATION, THE PRESIDENT/CEO IS NOT PRESENT IN THE MEETING.

THE BOARD OF DIRECTORS SHALL SET FORTH THE BASIS FOR ITS DECISIONS WITH RESPECT TO COMPENSATION IN THE MINUTES OF THE MEETING AT WHICH THE DECISIONS ARE MADE, INCLUDING THE CONCLUSIONS OF THE EVALUATION AND THE BASIS FOR DETERMINING THAT THE INDIVIDUAL'S COMPENSATION WAS REASONABLE CONSIDERING THE EVALUATION AND COMPARABILITY DATA.

THE PRESIDENT/CEO IS CHARGED WITH SETTING THE SALARIES OF ALL OTHER EMPLOYEES IN ACCORDANCE WITH A COMPENSATION STRUCTURE AND BUDGET APPROVED BY THE BOARD OF DIRECTORS. THE PRESIDENT/CEO AND HUMAN RESOURCES REVIEW EMPLOYEE COMPENSATION AND BENEFITS THAT INCLUDE KEY EMPLOYEES, BY PERIODICALLY ENGAGING AN OUTSIDE CONSULTANT TO CONDUCT COMPENSATION AND BENEFIT BENCHMARKING STUDIES THAT INCLUDE VARIOUS REGIONAL AND NATIONAL NON-PROFIT COMPENSATION REPORTS AND SURVEYS. COMPENSATION DELIBERATIONS AND DECISIONS INCLUDE THE REVIEW OF SELF AND SUPERVISORY EVALUATIONS OF EMPLOYEE PERFORMANCE COMPARED TO SET INDIVIDUAL AND ORGANIZATIONAL GOALS.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:
AK, AL, AR, CA, CT, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, MO, MS, NC, ND, NH, NJ, NM, NY, OH
OK, OR, PA, RI, SC, TN, UT, VA, WA, WI, WV

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

BRIGHTFOCUS MAKES ITS GOVERNING DOCUMENTS INCLUDING ITS ARTICLES OF INCORPORATION AND BYLAWS, THE FEDERAL FORM 1023, THE 501(C)(3) LETTER OF DETERMINATION FROM THE INTERNAL REVENUE SERVICE, CONFLICT OF INTEREST POLICY, AUDITED FINANCIAL STATEMENTS AND FEDERAL FORM 990 AVAILABLE TO THE PUBLIC UPON REQUEST. IN ADDITION, THE PUBLIC ALSO HAS ACCESS TO THE ANNUAL REPORT, AUDITED FINANCIAL STATEMENTS, THE 501(C)(3) LETTER OF DETERMINATION FROM THE INTERNAL REVENUE SERVICE, AND FEDERAL FORM 990 ON ITS WEBSITE AT WWW.BRIGHTFOCUS.ORG.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

RECOVERIES OF PRIOR YEAR GRANTS	435,223.
CHANGE IN PRESENT VALUE OF GRANTS	-129,218.
TOTAL TO FORM 990, PART XI, LINE 9	306,005.

**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

2023

**Open to Public
Inspection**

Name of the organization **BRIGHTFOCUS FOUNDATION** Employer identification number **23-7337229**

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
NATIONAL DEVELOPMENT, LLC - 23-7337229 22512 GATEWAY CENTER DRIVE CLARKSBURG, MD 20871	PROPERTY RENTAL AND MANAGEMENT	MARYLAND	450,765.	4,729,697.	BRIGHTFOCUS FOUNDATION
AMERICAN HEALTH ASSISTANCE, LLC - 23-7337229 22512 GATEWAY CENTER DRIVE CLARKSBURG, MD 20871	OWNER OF BRIGHTFOCUS HEADQUARTERS	MARYLAND	0.	3,114,398.	BRIGHTFOCUS FOUNDATION

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

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

Schedule R (Form 990) 2023

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?

- a** Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)
- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)
- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)
- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses
- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

	Yes	No
1a		
1b		
1c		
1d		
1e		
1f		
1g		
1h		
1i		
1j		
1k		
1l		
1m		
1n		
1o		
1p		
1q		
1r		
1s		

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)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

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

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

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

Multiple horizontal lines for providing supplemental information.