

NOTICE

GuideStar has been informed by the IRS of processing errors on IRS Forms 990 filed electronically between January 1, 2009, and December 3, 2010, for form year 2008. These processing errors resulted in inaccurate data appearing on the scanned images of the affected returns that are posted on GuideStar and do not reflect the information filed with the IRS.

These errors include:

- Part III, line 1, organization's mission description—may not reflect what was originally submitted by the nonprofit organization.
- Part VIII, line 8a, gross income for special events—values may have been transposed.
- Part IX, line 7c, other salaries and wages, management and general expenses—may show a blank where a value was originally reported.
- Schedule D, Part V, line 3a(ii), endowment funds and possession by related organizations—checkbox values may have been transposed.

GuideStar is working with the IRS to obtain a corrected copy of its form year 2008 Form 990. GuideStar will replace this Form 990 if, and when, the accurate return is made available from the IRS.

For more information, please visit <http://www2.guidestar.org/rxg/help/form-year-2008-returns.aspx>



Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2008 calendar year, or tax year beginning 01-01-2008 and ending 12-31-2008

- B Check if applicable: Address change, Name change, Initial return, Termination, Amended return, Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization: DONALD DANFORTH PLANT SCIENCE CENTER. Doing Business As. Number and street (or P O box if mail is not delivered to street address) Room/suite: 975 NORTH WARSON ROAD. City or town, state or country, and ZIP + 4: SAINT LOUIS, MO 63132

D Employer identification number: 31-1584621. E Telephone number: (314) 587-1000. G Gross receipts \$ 70,228,724

F Name and address of Principal Officer: PHILIP NEEDLEMAN, 975 N WARSON ROAD, SAINT LOUIS, MO 63132

H(a) Is this a group return for affiliates? Yes No

H(b) Are all affiliates included? Yes No (If "No," attach a list See instructions)

H(c) Group Exemption Number

I Tax-exempt status: 501(c) (3) (insert no) 4947(a)(1) or 527

J Web site: www DanforthCenter org

K Type of organization: Corporation trust association other

L Year of Formation 1998

M State of legal domicile MO

Part I Summary

Table with 3 columns: Description, Prior Year, Current Year. Rows include: 1. Mission statement; 2-7. Governance and activities; 8-12. Revenue; 13-19. Expenses; 20-22. Net Assets or Fund Balances.

Part II Signature Block

Signature block containing declaration and signature of Mr Harold Davies, Chief Financial Officer, dated 2009-11-16.

Paid Preparer's Use Only section with fields for Preparer's signature, Date, Check if self-employed, Preparer's PTIN, Firm's name (RUBINBROWN LLP), EIN, and Phone no.

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

Part III Statement of Program Service Accomplishments (See the instructions.)

1 Briefly describe the organization's mission

See Additional Data Table

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting or make significant changes in how it conducts any program services? Yes No

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts 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 \$	17,956,739	including grants of \$	654,378)	(Revenue \$	247,303)
PLANT SCIENCE RESEARCH, EDUCATION OUTREACH & TRAINING OVER 80 ACTIVE RESEARCH PROJECTS INCLUDING - VIRUS RESISTANT CASSAVA FOR SUB-SAHARAN AFRICA - NUTRITIONALLY ENHANCED CASSAVA FOR SUB-SAHARAN AFRICA - VIRUS RESISTANT SWEET POTATO FOR SUB-SAHARAN AFRICA - NUTRITIONALLY ENHANCED SWEET POTATO FOR SUB-SAHARAN AFRICA - INCREASING SEED OIL YIELD FOR BIODIESEL FUEL PRODUCTION - OPTIMIZATION OF BIOFUEL PRODUCTION FROM ALGAE MAJOR RESEARCH SPONSORS INCLUDE THE GATES FOUNDATION, THE HOWARD BUFFET FOUNDATION, NATIONAL SCIENCE FOUNDATION (NSF), NATIONAL INSTITUTES OF HEALTH (NIH), USDA, USAID, AND THE DEPT OF TRANSPORTATION										

4b	(Code)	(Expenses \$	including grants of \$)	(Revenue \$)
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4c	(Code)	(Expenses \$	including grants of \$)	(Revenue \$)
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4d	Other program services (Describe in Schedule O)	(Expenses \$	including grants of \$)	(Revenue \$)
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4e	Total program service expenses \$	17,956,739	Must equal Part IX, Line 25, column (B).
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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> <input checked="" type="checkbox"/>	Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors? <input checked="" type="checkbox"/>	Yes	
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>		No
4 Section 501(c)(3) organizations Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>		No
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>		
6 Did the organization maintain any donor advised funds or any accounts where 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> <input checked="" type="checkbox"/>		No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i> <input checked="" type="checkbox"/>		No
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> <input checked="" type="checkbox"/>		No
9 Did the organization report an amount in Part X, line 21, 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> <input checked="" type="checkbox"/>		No
10 Did the organization hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> <input checked="" type="checkbox"/>	Yes	
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? <i>If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i> <input checked="" type="checkbox"/>	Yes	
12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i> <input checked="" type="checkbox"/>	Yes	
13 Is the organization a school as described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		No
14a Did the organization maintain an office, employees, or agents outside of the U S ?		No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? <i>If "Yes," complete Schedule F, Part I</i> <input checked="" type="checkbox"/>	Yes	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i> <input checked="" type="checkbox"/>	Yes	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i> <input checked="" type="checkbox"/>		No
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I</i>		No
18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		No
19 Did the organization report more than \$15,000 on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		No
20 Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		No
21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> <input checked="" type="checkbox"/>	Yes	
22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> <input checked="" type="checkbox"/>		No
23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? <i>If "Yes," complete Schedule J</i> <input checked="" type="checkbox"/>	Yes	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25</i>		No
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) and 501(c)(4) 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> <input checked="" type="checkbox"/>		No
b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? <i>If "Yes," complete Schedule L, Part I</i> <input checked="" type="checkbox"/>		No
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i> <input checked="" type="checkbox"/>	Yes	
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i> <input checked="" type="checkbox"/>		No

Part IV Checklist of Required Schedules *(Continued)*

		Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee		
a	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If "Yes," complete Schedule L, Part IV</i>		No
b	Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i>		No
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If "Yes," complete Schedule L, Part IV</i>		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	Yes	
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>		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		No
36	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>		No
37	Did the organization conduct more than 5 percent 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>		No

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable		
	1a 63		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
	1b 0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return		
	2a 219		
b	If at least one is reported in 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return.	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	Yes	
b	If "Yes," enter the name of the foreign country <u>CJ</u> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts .		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, <i>Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction</i> ?		
6a	Did the organization solicit any contributions that were not tax deductible?		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	<i>Organizations that may receive deductible contributions under section 170(c).</i>		
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more?		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		No
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	Yes	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	Yes	
8	<i>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</i> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	<i>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.</i>		
a	Did the organization make any taxable distributions under section 4966?		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	<i>Section 501(c)(7) organizations.</i> Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12		
	10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
	10b		
11	<i>Section 501(c)(12) organizations.</i> Enter		
a	Gross income from members or shareholders		
	11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
	11b		
12a	<i>Section 4947(a)(1) non-exempt charitable trusts.</i> Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
	12b		

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

		Yes	No
1a	Enter the number of voting members of the governing body		
1b	Enter the number of voting members that are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	Yes	
5	Did the organization become aware during the year of a material diversion of the organization's assets?		No
6	Does the organization have members or stockholders?		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		No
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	the governing body?	Yes	
8b	each committee with authority to act on behalf of the governing body?	Yes	
9a	Does the organization have local chapters, branches, or affiliates?		No
9b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	Yes	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		No

Section B. Policies

		Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13	Yes	
12b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
12c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	Yes	
13	Does the organization have a written whistleblower policy?	Yes	
14	Does the organization have a written document retention and destruction policy?	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision		
15a	The organization's CEO, Executive Director, or top management official?	Yes	
15b	Other officers or key employees of the organization? Describe the process in Schedule O	Yes	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		No
16b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed _____
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. <input type="checkbox"/> own website <input type="checkbox"/> another's website <input checked="" type="checkbox"/> upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization HAROLD DAVIES 975 N WARSON RD SAINT LOUIS, MO 63132 (314) 587-1041

Part VIII Statement of Revenue

			(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514		
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns 1a						
	b	Membership dues						
	c	Fundraising events 1b						
	d	Related organizations 1c						
	e	Government grants (contributions) 1d						
	f	All other contributions, gifts, grants, and similar amounts not included above 1e	4,347,257					
	g	Noncash contributions included in lines 1a-1f \$ 520,639 1f	19,844,863					
	h	Total (Add lines 1a-1f)	24,192,120					
Program Service Revenue	2a	REG AND USER FEES	541,900	376,442	376,442			
	b	SCIENCE PROG INCOME	541,900	24,437	24,437			
	c	CONTRACTS	541,900	1,557,259	1,557,259			
	d							
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f \$ 1,958,138						
Other Revenue	3	Investment income (including dividends, interest other similar amounts)		3,307,301		3,307,301		
	4	Income from investment of tax-exempt bond proceeds		0				
	5	Royalties		0				
	6a	Gross Rents	(i) Real					
			(ii) Personal					
			b	Less rental expenses				
			c	Rental income or (loss)				
	d	Net rental income or (loss)						
	7a	Gross amount from sales of assets other than inventory	(i) Securities	40,754,831				
			(ii) Other					
			b	Less cost or other basis and sales expenses	44,706,917			
			c	Gain or (loss)	-3,952,086			
d	Net gain or (loss)		-3,952,086		-3,952,086			
8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 Attach Schedule G if total exceeds \$15,000 a							
b	Less direct expenses b							
c	Net income or (loss) from fundraising events		0					
9a	Gross income from gaming activities See part IV, line 19 Complete Schedule G if total exceeds \$15,000 a							
b	Less direct expenses b							
c	Net income or (loss) from gaming activities		0					
10a	Gross sales of inventory, less returns and allowances a							
b	Less cost of goods sold b							
c	Net income or (loss) from sales of inventory		0					
11a	Miscellaneous Revenue	Business Code						
	MISCELLANEOUS	900,099	16,334		16,334			
	b							
	c							
	d	All other revenue _____						
e	Total. Add lines 11a-11d \$ 16,334							
12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e		25,521,807	0	0	-628,451		

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) but are not required to complete columns (B), (C), and (D).**

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 governments and organizations in the U S See Part IV, line 21	258,120	258,120		
2	Grants and other assistance to individuals in the U S See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations and individuals outside the U S See Part IV, lines 15 and 16	396,258	396,258		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	2,404,709	1,322,362	902,396	179,951
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	7,689,504	6,727,849		326,401
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	485,859	420,202	47,137	18,520
9	Other employee benefits	954,050	800,447	112,150	41,453
10	Payroll taxes	667,989	536,914	98,277	32,798
11	Fees for services (non-employees)				
a	Management	0			
b	Legal	271,095	97,307	173,788	
c	Accounting	53,300		53,300	
d	Lobbying	0			
e	Professional fundraising See Part IV, line 17	0			
f	Investment management fees	0			
g	Other	411,795	339,500	4,753	67,542
12	Advertising and promotion	0			
13	Office expenses	0			
14	Information technology	0			
15	Royalties	0			
16	Occupancy	553,911	466,872	68,875	18,164
17	Travel	341,868	319,223	15,523	7,122
18	Payments of travel or entertainment expenses for any Federal, state or local public officials	0			
19	Conferences, conventions and meetings	79,791	71,610	4,925	3,256
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	3,198,038	2,896,232	252,448	49,358
23	Insurance	188,101		188,101	
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a	SUPPLIES AND EQUIPMENT	1,724,094	1,665,476	34,498	24,120
b	EQUIP RENTAL & MAINTENANCE	594,448	555,015	18,832	20,601
c	PERSONNEL EXPENSE	534,029	441,768	91,200	1,061
d	OUTSIDE SERVICES	479,053	410,223	49,337	19,493
e	PUBLICITY/SPECIAL EVENTS	243,270			243,270
f	All other expenses	432,932	231,361	67,523	134,048
25	Total functional expenses. Add lines 1 through 24f	21,962,214	17,956,739	2,818,317	1,187,158
26	Joint Costs. Check <input type="checkbox"/> if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash—non-interest-bearing	10,263,392	1	15,663,233
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	29,959,067	3	13,731,482
	4 Accounts receivable, net		4	
	5 Receivables from current and former officers, directors, trustees, key employees or other related parties <i>Complete Part II of Schedule L</i>	450,000	5	450,000
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) <i>Complete Part II of Schedule L</i>		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	571,263	9	856,615
	10a Land, buildings, and equipment cost basis			
		10a 97,562,745		
	b Less accumulated depreciation <i>Complete Part VI of Schedule D</i>			
		10b 23,055,664	71,883,597	10c 74,507,081
	11 Investments—publicly traded securities	97,168,921	11	93,360,548
	12 Investments—other securities See Part IV, line 11 <i>Complete Part VII of Schedule D</i>		12	
	13 Investments—program-related See Part IV, line 11 <i>Complete Part VIII of Schedule D</i>		13	
14 Intangible assets		14		
15 Other assets See Part IV, line 11 <i>Complete Part IX of Schedule D</i>	5,284,979	15	1,132,147	
16 Total assets. Add lines 1 through 15 (must equal line 34)	215,581,219	16	199,701,106	
Liabilities	17 Accounts payable and accrued expenses	1,828,294	17	2,430,631
	18 Grants payable		18	
	19 Deferred revenue	3,818,211	19	12,668,697
	20 Tax-exempt bond liabilities		20	
	21 Escrow account liability <i>Complete Part IV of Schedule D</i>		21	
	22 Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons <i>Complete Part II of Schedule L</i>		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable		24	
	25 Other liabilities <i>Complete Part X of Schedule D</i>	1,377,385	25	782,137
	26 Total liabilities. Add lines 17 through 25	7,023,890	26	15,881,465
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	104,994,684	27	84,238,622
	28 Temporarily restricted net assets	20,055,263	28	7,878,664
	29 Permanently restricted net assets	83,507,382	29	91,702,355
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	208,557,329	33	183,819,641	
34 Total liabilities and net assets/fund balances	215,581,219	34	199,701,106	

Part XI Financial Statements and Reporting

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> cash <input checked="" type="checkbox"/> accrual <input type="checkbox"/> other		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		No
b	Were the organization's financial statements audited by an independent accountant?	Yes	
c	If "Yes" to lines 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?	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	Yes	
b	If "Yes," did the organization undergo the required audit or audits?	Yes	

**SCHEDULE A
(Form 990 or
990EZ)**

Public Charity Status and Public Support

OMB No 1545-0047

2008

**Open to Public
Inspection**

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

Attach to Form 990 or Form 990-EZ. See separate instructions.

Department of the
Treasury
Internal Revenue
Service

Name of the organization
DONALD DANFORTH PLANT SCIENCE CENTER

Employer identification number

31-1584621

Part I Reason for Public Charity Status (to be completed by all organizations) (See Instructions)

The organization is not a private foundation because it is (Please check only **one** organization)

- 1 A church, convention of churches, or association of churches described in **Section 170(b)(1)(A)(i)**.
- 2 A school described in **Section 170(b)(1)(A)(ii)**. (Attach Schedule E)
- 3 A hospital or a cooperative hospital service organization described in **Section 170(b)(1)(A)(iii)**. (Attach Schedule H)
- 4 A medical research organization operated in conjunction with a hospital described in **Section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **Section 170(b)(1)(A)(iv)**. (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in **Section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **Section 170(b)(1)(A)(vi)** (Complete Part II)
- 8 A community trust described in **Section 170(b)(1)(A)(vi)** (Complete Part II)
- 9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **Section 509(a)(2)**. (Complete Part III)
- 10 An organization organized and operated exclusively to test for public safety See **Section 509(a)(4)**. (See instructions)
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **Section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h
 a Type I b Type II c Type III - Functionally Integrated d Type III - Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

- (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?
- (ii) a family member of a person described in (i) above?
- (iii) a 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

h Provide the following information about the organizations the organization supports

(i) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (See Instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
Total									

Part II Support Schedule for Organizations Described in IRC 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.)

Public Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	23,887,581	26,882,211	55,552,194	39,235,594	24,192,120	169,749,700
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 line 1-3	23,887,581	26,882,211	55,552,194	39,235,594	24,192,120	169,749,700
5 The portion of total contribution by each person (other than a government unit or publicly supported organization) included on line 1 that exceed 2% of the amount shown on line 11, column (f)						96,754,072
6 Public Support subtract line 5 from line 4						72,995,628

Total Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	23,887,581	1,262,917	55,552,194	39,235,594	24,192,120	169,749,700
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	753,142	1,262,917	1,731,823	2,132,001	3,307,301	9,187,184
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 IV)	145,472	152,265	80,331	120,501	62,150	560,719
11 Total Support (Add lines 7 through 10)						179,497,603
12 Gross receipts from related activities, etc (See instructions)					12	6,854,070
13 First Five Years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Computation of Public Support Percentage

14 Public Support Percentage for 2008 (line 6 column (f) divided by line 11 column (f))	14	40.667 %
15 Public Support Percentage for 2007 Schedule A, Part IV-A, line 26f	15	0 %

- 16a 33 1/3% Test - 2008.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization
- b 33 1/3% Test - 2007.** If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization
- 17a 10% Facts and Circumstances Test - 2008.** 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 IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization
- b 10% Facts and Circumstances Test - 2007.** 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 IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization
- 18 Private Foundation.** If the organization did not check the box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions

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

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(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 1-5						
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 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Total of lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6)						

Total Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(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 30 June, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total Support (Add lines 9, 10c, 11 and 12)						
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Computation of Public Support Percentage

15 Public Support Percentage for 2008 (line 8 column (f) divided by line 13 column (f))	15	
16 Public Support Percentage for 2007 Schedule A, Part IV-A, line 27g	16	

Computation of Investment Income Percentage

17 Investment Income Percentage for 2008 (line 10c column (f) divided by line 13 column (f))	17	
18 Investment Income Percentage from 2007 Schedule A, Part IV-A, line 27h	18	

- 19a 33 1/3% Tests - 2008.** 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% Tests - 2007.** 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 **Supplemental Information.** Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide any other additional information. (see instructions)

SCHEDULE D (Form 990)

OMB No 1545-0047

Supplemental Financial Statements

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Name of the organization DONALD DANFORTH PLANT SCIENCE CENTER

Employer identification number 31-1584621

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

Table with 3 columns: Line number, (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4 for total number, aggregate contributions, aggregate grants, and aggregate value.

- 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit?

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

- 1 Purpose(s) of conservation easements held by the organization (check all that apply)
2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

Table with 2 columns: Line number, Held at the End of the Year. Rows 2a, 2b, 2c, 2d.

- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year
4 Number of states where property subject to conservation easement is located
5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds?
6 Staff or volunteer hours devoted to monitoring, inspecting and enforcing easements during the year
7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?
9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items
b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a** Public exhibition
- b** Scholarly research
- c** Preservation for future generations
- d** Loan or exchange programs
- e** Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

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 Trust, Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to 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 why in Part XIV and complete the following table

	Amount
1c Beginning balance	
1d Additions during the year	
1e Distributions during the year	
1f Ending balance	

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the organization answered "Yes" to 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	85,670,635				
b Contributions	24,828,880				
c Investment earnings or losses	-28,513,232				
d Grants or scholarships					
e Other expenditures for facilities and programs	-1,392,089				
f Administrative expenses					
g End of year balance	83,378,372				

2 Provide the estimated percentage of the year end balance held as

- a** Board designated or quasi-endowment ▶ 1 629 %
- b** Permanent endowment ▶ 98 371 %
- c** Term endowment ▶ 0 %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

	Yes	No
(i) unrelated organizations	3a(i)	No
(ii) related organizations	3a(ii)	No
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b	

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

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land		11,400,000		11,400,000
b Buildings		63,887,490	11,615,397	52,272,093
c Leasehold improvements				
d Equipment		15,902,952	11,440,267	4,462,685
e Other		6,372,303		6,372,303
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				74,507,081

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	25,521,807
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	21,962,214
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	3,559,593
4	Net unrealized gains (losses) on investments	4	-28,056,576
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	-28,056,576
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-24,496,983

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

1	Total revenue, gains, and other support per audited financial statements	1	-2,534,769
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	-28,056,576
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	-28,056,576
3	Subtract line 2e from line 1	3	25,521,807
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	
5	Total Revenue Add lines 3 and 4c . (This should equal Form 990, Part I, line 12)	5	25,521,807

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

1	Total expenses and losses per audited financial statements	1	21,962,214
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	21,962,214
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c . (This should equal Form 990, Part I, line 18)	5	21,962,214

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part XIV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Identifier	Return Reference	Explanation
ENDOWMENT PURPOSE	SCHEDULE D PART V LINE 4	THE PURPOSE OF THE ENDOWMENT IS TO FUND RESEARCH AND OTHER SCIENTIFIC ACTIVITIES IN ACCORDANCE WITH THE CENTER'S OVERALL MISSION

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No 1545-0047

2008

Open to Public Inspection

Attach to Form 990. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

Department of the Treasury Internal Revenue Service

Name of the organization DONALD DANFORTH PLANT SCIENCE CENTER

Employer identification number

31-1584621

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 For grantmakers. 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. [X] Yes [] No

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

3 Activities per Region (Use Schedule F-1 (Form 990) if additional space is needed)

Table with 6 columns: (a) Region, (b) Number of offices in the region, (c) Number of employees or agents in region, (d) Activities conducted in region (by type), (e) If activity listed in (d) is a program service, describe specific type of service(s) in region, (f) Total expenditures in region. Rows include South America, Middle East and North Africa, Sub-Saharan Africa, Europe (Including Iceland and Greenland), and Totals.

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000
 Use Schedule F-1 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 non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South America	RESEARCH AND TRAINING	95,493	WIRE TRANSF	0		
		Middle East/North Africa	RESEARCH	93,750	WIRE TRANSF	0		
		Sub-Saharan Africa	RESEARCH AND DEVELOPMENT	108,731	WIRE TRANSF	0		
		Sub-Saharan Africa	RESEARCH AND DEVELOPMENT	22,027	WIRE TRANSF	0		
		Europe/Iceland/Greenland	RESEARCH AND TRAINING	28,629	WIRE TRANSF	0		
		Sub-Saharan Africa		9,523	WIRE TRANSF	0		
		Sub-Saharan Africa	RESEARCH AND DEVELOPMENT	38,105	WIRE TRANSF	0		

2 Enter total number of organizations that are recognized as charities by the foreign country or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter _____ 5

3 Enter total number of other organizations or entities _____ 2

Software ID:
Software Version:
EIN: 31-1584621
Name: DONALD DANFORTH PLANT SCIENCE CENTER

Form 990 Schedule F Part II - Grants and Other Assistance to Organizations or Entities Outside The United States

(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)
		South America	RESEARCH AND TRAINING	95,493	WIRE TRANSF	0		
		Middle East/North Africa	RESEARCH	93,750	WIRE TRANSF	0		
		Sub-Saharan Africa	RESEARCH AND DEVELOPMENT	108,731	WIRE TRANSF	0		
		Sub-Saharan Africa	RESEARCH AND DEVELOPMENT	22,027	WIRE TRANSF	0		
		Europe/Iceland/Greenland	RESEARCH AND TRAINING	28,629	WIRE TRANSF	0		
		Sub-Saharan Africa		9,523	WIRE TRANSF	0		
		Sub-Saharan Africa	RESEARCH AND DEVELOPMENT	38,105	WIRE TRANSF	0		

**Schedule I
(Form 990)**

OMB No 1545-0047

**Grants and Other Assistance to Organizations,
Governments and Individuals in the U.S.**

2008

Department of the Treasury
Internal Revenue Service

Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. Attach to Form 990.

Open to Public
Inspection

Name of the organization
DONALD DANFORTH PLANT SCIENCE CENTER

Employer identification number
31-1584621

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 Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DIVERGENCE INC893 N WARSON ROAD ST LOUIS,MO 63141	04-3650084		47,293	0			RESEARCH
WASHINGTON UNIVERSITY ONE BROOKINGS DRIVE CAMPUS BOX 1054 ST LOUIS,MO 63130	14-0653611	501(c)(3)	8,512	0			RESEARCH
PURDUE UNIVERSITY302 WOOD STREET SWEST LAFAYETTE,IN 19104	35-6002041	501(c)(3)	8,046	0			RESEARCH
CHILDRENS HOSPITAL OF PHILADELPHIA3615 CIVIC CENTER BLVD PHILADELPHIA,PA 19104	21-1352166	501(c)(3)	72,674	0			RESEARCH
USDA ARS - WASHINGTON STATE800 BUCHANAN STREET ALBANY,CA 94710	72-0564834	USDA	5,667	0			RESEARCH
UNIVERSITY OF CALIFORNIA - DAVIS1850 RESEARCH PARK SUITE 300 DAVIS,CA 95618	94-6036494	U OF CA - DAVIS	50,338	0			RESEARCH
TUFTS UNIVERSITY136 HARRISON AVENUE 75K-950 BOSTON,MA 02111	04-2103634	501(c)(3)	49,995	0			RESEARCH
UNIVERSITY OF FLORIDA 219 GRINTER HALL GAINESVILLE,FL 32601	59-6002052	UNIV OF FLORIDA	6,153	0			RESEARCH
USDA ARS - CORNELL CAMPUS120 DAY HALL ITHICA,NY 14853	15-0532082	USDA	9,000	0			RESEARCH

2 Enter total number of section 501(c)(3) and government organizations 8

3 Enter total number of other organizations 1

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Use Schedule I-1 (Form 990) 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 non-cash assistance

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

See Additional Data Table

Identifier	Return Reference	Explanation
GRANT MONITORING PROCESS	SCHEDULE I, PART 1, LINE 2	PROCEDURES USED TO MONITOR USE OF GRANT FUNDS BY SUBRECIPIENTS AND SUBAWARDEES MAY INCLUDE - COLLECTION OF TECHNICAL PERFORMANCE REPORTS -REVIEW OF INVOICES AND EXPENSES-TO-BUDGET TO ENSURE THAT INVOICED CHARGES APPEAR REASONABLE BASED UPON TECHNICAL PROGRESS OF THE PROJECT, ARE WITHIN THE BUDGET PARAMETERS, AND ARE CONSISTENT AND TIMELY -QUESTIONING AND CLARIFICATION OF INVOICED CHARGES -ON-SITE VISITS AND EXAMINATION OF WORK PERFORMED

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2008

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ **Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.**

Department of the Treasury
Internal Revenue Service

Name of the organization
DONALD DANFORTH PLANT SCIENCE CENTER

Employer identification number
31-1584621

Part I Questions Regarding Compensation

	Yes	No
<p>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</p> <p> <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 checked="" type="checkbox"/> Tax idemnification and gross-up payments <input checked="" type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Discretionary spending account <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) </p>		
<p>b If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain.</p>	Yes	
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?</p>	Yes	
<p>3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.</p> <p> <input checked="" type="checkbox"/> Compensation committee <input checked="" type="checkbox"/> Written employment contract <input type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Compensation survey or study <input type="checkbox"/> Form 990 of other organizations <input checked="" type="checkbox"/> Approval by the board or compensation committee </p>		
<p>4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a:</p> <p>a Receive a severance payment or change of control payment?</p>		No
<p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p>		No
<p>c Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p>		No
<p>501(c)(3) and 501(c)(4) organizations only must complete lines 5-8.</p>		
<p>5 For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:</p> <p>a The organization?</p>		No
<p>b Any related organization?</p> <p>If "Yes," to line 5a or 5b, describe in Part III.</p>		No
<p>6 For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:</p> <p>a The organization?</p>		No
<p>b Any related organization?</p> <p>If "Yes," to line 6a or 6b, describe in Part III.</p>		No
<p>7 For persons listed in form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.</p>		No
<p>8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III.</p>		No

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
DR ROGER BEACHY	(i)	458,074	0	12,785	0	32,750	503,609	
	(ii)	0	0	0	0	0	0	
MR SALVATORE FIORELLO	(i)	291,340	0	0	0	40,030	331,370	
	(ii)	0	0	0	0	0	0	
MR JAN JAWORSKI	(i)	209,828	0	0	0	23,177	233,005	
	(ii)	0	0	0	0	0	0	
MR CLAUDE FAUQUET	(i)	203,697	0	0	0	32,111	235,808	
	(ii)	0	0	0	0	0	0	
MR THOMAS SMITH	(i)	187,787	0	0	0	15,884	203,671	
	(ii)	0	0	0	0	0	0	
MR HAROLD DAVIES	(i)	164,563	0	0	0	28,758	193,321	
	(ii)	0	0	0	0	0	0	
MRS TONI KUTCHAN	(i)	154,591	0	0	0	22,685	177,276	
	(ii)	0	0	0	0	0	0	
MR JEFF STEIN	(i)	151,975	0	0	0	21,162	173,137	
	(ii)	0	0	0	0	0	0	
MS LAURA CHAUVIN	(i)	146,842	0	0	0	33,108	179,950	
	(ii)	0	0	0	0	0	0	
MR PAUL ANDERSON	(i)	140,733	0	0	0	32,830	173,563	
	(ii)	0	0	0	0	0	0	
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Software ID:
Software Version:
EIN: 31-1584621
Name: DONALD DANFORTH PLANT SCIENCE CENTER

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
	(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
DR ROGER BEACHY	(i) 458,074 (ii) 0	0 0	12,785 0	0 0	32,750 0	503,609 0	
MR SALVATORE FIORELLO	(i) 291,340 (ii) 0	0 0	0 0	0 0	40,030 0	331,370 0	
MR JAN JAWORSKI	(i) 209,828 (ii) 0	0 0	0 0	0 0	23,177 0	233,005 0	
MR CLAUDE FAUQUET	(i) 203,697 (ii) 0	0 0	0 0	0 0	32,111 0	235,808 0	
MR THOMAS SMITH	(i) 187,787 (ii) 0	0 0	0 0	0 0	15,884 0	203,671 0	
MR HAROLD DAVIES	(i) 164,563 (ii) 0	0 0	0 0	0 0	28,758 0	193,321 0	
MRS TONI KUTCHAN	(i) 154,591 (ii) 0	0 0	0 0	0 0	22,685 0	177,276 0	
MR JEFF STEIN	(i) 151,975 (ii) 0	0 0	0 0	0 0	21,162 0	173,137 0	
MS LAURA CHAUVIN	(i) 146,842 (ii) 0	0 0	0 0	0 0	33,108 0	179,950 0	
MR PAUL ANDERSON	(i) 140,733 (ii) 0	0 0	0 0	0 0	32,830 0	173,563 0	

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Identifier	Return Reference	Explanation
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Schedule L (Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ. To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38b or 40b.

Name of the organization DONALD DANFORTH PLANT SCIENCE CENTER

Employer identification number 31-1584621

Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

Table with 3 main columns: (a) Name of disqualified person, (b) Description of transaction, (c) Corrected? (Yes/No)

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 \$
3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization \$

Part II Loans to and/or From Interested Persons

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

Table with columns: (a) Name of interested person and purpose, (b) Loan to or from the organization?, (c) Original principal amount, (d) Balance due, (e) In default?, (f) Approved by board or committee?, (g) Written agreement?

Part III Grants or Assistance Benefitting Interested Persons

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 27.

Table with columns: (a) Name of interested person, (b) Relationship between interested person and the organization, (c) Amount of grant or type of assistance

Part IV Business Transactions Involving Interested Persons

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

Table with columns: (a) Name of interested person, (b) Relationship between interested person and the organization, (c) Amount of transaction, (d) Description of transaction, (e) Sharing of organization's revenues?

SCHEDULE M (Form 990)

Non-Cash Contributions

OMB No 1545-0047

2008

Open to Public Inspection

To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990

Department of the Treasury Internal Revenue Service

Name of the organization DONALD DANFORTH PLANT SCIENCE CENTER

Employer identification number

31-1584621

Part I Types of Property

Table with 4 columns: (a) Check if applicable, (b) Number of Contributions, (c) Revenues reported on Form 990, Part VIII, line 1g, (d) Method of determining revenues. Rows include Art, Books, Cars, Securities, etc.

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

29

Table with 3 columns: Question, Yes, No. Rows include 30a, 31, 32a, 33 regarding contribution policies and reporting.

**SCHEDULE O
(Form 990)**

Supplemental Information to Form 990

2008

**Open to Public
Inspection**

Department of the
Treasury
Internal Revenue
Service

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Name of the organization
DONALD DANFORTH PLANT SCIENCE CENTER

Employer identification number
31-1584621

Identifier	Return Reference	Explanation
FORM 990 REVIEW PROCESS	PART VI LINE 9b	THE FORM 990 IS PROVIDED TO ALL MEMBERS OF THE BOARD OF DIRECTORS BEFORE FILING THE CHAIRMAN OF THE AUDIT COMMITTEE OF THE BOARD AND THE CHAIRMAN OF THE BOARD ARE ASKED TO REVIEW THE FORM 990 AND TO PROVIDE COMMENTS OR QUESTIONS TO THE V P OF FINANCE

Identifier	Return Reference	Explanation
CONFLICT OF INTEREST POLICY	PART VI LINE 12c	The Center has had a conflict of interest policy since inception of the organization Under that policy, key employees have been required to disclose financial interests and other potential conflicts of interest and management is responsible for the management or elimination of such conflicts of interest and for monitoring compliance with the Center's policies During the past year, a Subcommittee of the Audit Committee of the Board of Directors was established to assess the adequacy of and to monitor compliance with the Center's Conflict of Interest Policies The Responsibility of the Subcommittee is to also actively oversee and manage potential conflicts of interest at the Board and Officer level The Subcommittee will report to the Board regarding matters of conflict of interest on an annual basis, or more frequently as needed The Conflicts of Interest Subcommittee has developed new conflict of interest policies and procedures which are expected to be adopted by the end of 2009 and operational in 2010 Under the new policies, Directors, Officers and Key Employees are will be required to disclose potential conflicts of interest upon hire or appointment and on an annual basis thereafter, or when potential conflicts arise Management will determine a course of action to control or eliminate conflicts of interest and a plan to monitor compliance All potential conflicts will be presented to the Conflict of Interest Subcommittee of the Audit Committee at a formal meeting held during the first two weeks of March each year and at other times as deemed necessary The Subcommittee will review all potential conflicts of interest and the conclusions and proposed actions regarding conflicts of interest The Subcommittee will approve, disapprove or recommend changes to proposed action plans The Subcommittee will also be informed of potential conflicts when they are identified outside of the formal annual disclosure process

Identifier	Return Reference	Explanation
PROCESS FOR DETERMINING COMPENSATION	PART VI LINE 15b	HUMAN RESOURCE DEPARTMENT OBTAINS COMPARABLE SALARY DATA FROM MULTIPLE INDEPENDENT SOURCES, A COMPENSATION SURVEY FROM THE ASSOCIATION OF INDEPENDENT RESEARCH INSTITUTIONS (AIRI) AND A SURVEY OF LOCAL INSTITUTIONS SALARY RANGES BY POSITION ARE DEVELOPED FROM THE SURVEY DATA AND COMPENSATION LEVELS FOR THE DANFORTH CENTER ARE ESTABLISHED WITHIN THE RANGES THE COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS REVIEWS AND APPROVES THE SURVEY RESULTS AND RECOMMENDED COMPENSATION LEVELS THE RESULTS ARE PRESENTED AND APPROVED AT THE NOVEMBER BOARD OF DIRECTORS MEETING

Identifier	Return Reference	Explanation
ORGANIZATION DOCUMENTS PROVIDED TO PUBLIC	990 PART VI LINE 4	THE FINANCIAL STATEMENTS, ORGANIZATION POLICIES, AND OTHER VARIOUS ORGANIZATIONAL DOCUMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST

Identifier	Return Reference	Explanation
PUBLIC SUPPORT PERCENTAGE	990 SCHEDULE A PART 2	PRIOR TO 2008, DONALD DANFORTH PLANT SCIENCE CENTER CONSIDERED ITSELF A SUPPORTING ORGANIZATION BASED ON THE RESULTS OF AN IRS AUDIT, ON MAY 20, 2009 THE PUBLIC CHARITY STATUS OF THE CENTER WAS MODIFIED TO THAT OF A PUBLIC CHARITY DESCRIBED IN IRS SECTIONS 509 (a) (1) AND 170(b)(1)(A)(vi) OF THE CODE EFFECTIVE FOR YEARS BEGINNING JANUARY 1, 2003 THE CENTER IS NOW REPORTING AS A PUBLICLY SUPPORTED ORGANIZATION BECAUSE THE PREVIOUS 2007 FORM 990 WAS FILED AS A SUPPORTING ORGANIZATION, THERE IS NO PRIOR PERIOD PUBLIC SUPPORT PERCENTAGE INCLUDED ON THIS YEAR'S RETURN

Identifier	Return Reference	Explanation
RELATED PARTY LOAN	990 SCHEDULE L PART IV LINE 26	THE LOAN TO DR BEACY WAS NEGOTIATED AS PART OF HIS ORIGINAL COMPENSATION PACKAGE TO HELP HIM PURCHASE A HOME IN ST LOUIS AND KEEP HIS EXISTING HOME IN SAN DIEGO, CA THE LOAN WAS TO BE REPAYED WHEN HE ENDED HIS EMPLOYMENT WITH THE ORGANIZATION THE LOAN WAS PAID OFF IN 2009 PRIOR TO THE FILING OF THIS FORM 990

Identifier	Return Reference	Explanation
CHANGES TO ORGANIZATIONAL DOCUMENTS	FORM 990 PART VI SECTION A LINE 4	WHEN THE CENTER WAS INITIALLY ORGANIZED AND APPLIED FOR TAX EXEMPT STATUS TO THE INTERNAL REVENUE SERVICE ("IRS"), ITS 501(c)(3) PUBLIC CHARITY TAX EXEMPT STATUS WAS PREDICATED ON BEING A "SUPPORTING ORGANIZATION" ORGANIZED TO SUPPORT FOUR NAMED PUBLIC CHARITIES (AMENDED TO FIVE LATER) THE CENTER WAS RECENTLY AUDITED BY THE IRS AND IN CONNECTION WITH RECEIVING A FAVORABLE "NO CHANGE" AUDIT REPORT, THE IRS HAS AGREED THAT THE CENTER IS ENTITLED TO A MORE FAVORABLE PUBLIC CHARITY STATUS, NOW A PUBLICLY SUPPORTED CHARITY, WHICH PROVIDES ADDITIONAL OPERATING AND GOVERNANCE FLEXIBILITY ACCORDINGLY, THE CENTER REVISED ITS ARTICLES AND BY LAWS THE AMENDED ARTICLES AND BY LAWS REFLECT THE FACT THAT THE CENTER'S PUBLIC CHARITY STATUS IS NO LONGER CONTINGENT ON ITS "SUPPORT" OF THE DANFORTH CENTER ALLIANCE INSTITUTIONS WHILE EACH OF THOSE INSTITUTIONS WILL HAVE AN APPOINTEE ON THE BOARD WHO SERVES EX OFFICIO, THIS RECLASSIFICATION WILL AFFORD GREATER ORGANIZATIONAL AND OPERATIONAL FLEXIBILITY FOR THE CENTER THE FOLLOWING SPECIFIC CHANGES WERE MADE TO THE BY-LAWS THE "SUPPORTED ORGANIZATIONS" ARE RENAMED AS THE DANFORTH CENTER ALLIANCE INSTITUTIONS THE PROVISION THAT THE OFFICERS ACTING IN THEIR OFFICIAL CAPACITY OF THE ALLIANCE INSTITUTIONS SHALL EACH BE A DIRECTOR OF THE CENTER IS RETAINED THE REQUIREMENT THAT THE DANFORTH FOUNDATION APPOINT THREE "DANFORTH DIRECTORS" IS REMOVED THE REQUIREMENT THAT A MAJORITY OF THE CENTER'S DIRECTORS BE APPROVED BY THE SUPPORTED ORGANIZATIONS IS DELETED IT IS NO LONGER REQUIRED UNDER THE NEW RECLASSIFICATION AGREED TO BY THE IRS AND THE CENTER AND IT NO LONGER FITS THE CENTER'S STRUCTURE AND OPERATIONS POWER WILL NOW VEST IN THE BOARD TO APPOINT THE EXECUTIVE COMMITTEE (INSTEAD OF THE BOARD CHAIR) THE REQUIREMENT THAT THE CENTER ELECT A TREASURER IS REMOVED IT IS NOT ESSENTIAL UNDER MISSOURI LAW