

UNITED STATES BANKRUPTCY COURT  
DISTRICT OF MASSACHUSETTS  
EASTERN DIVISION

In Re:

GENESYS RESEARCH INSTITUTE, INC.  
DEBTOR

Chapter 11  
Case No. 15-12794-JNF

**Emergency Motion by Interested Party Clare Lamont to Compel the Closing of the Debtor's Bank of America Account xxx6895, in Accordance with the Order of the US Trustee to Close All Debtor Accounts Upon Bankruptcy Filing**

Clare Lamont ("Movant"), an Interested Party to this proceeding, hereby motions the Court to compel the closing of Bank of America account xxx6895, in light of new unequivocal evidence documenting that said account belonged exclusively to the non-profit Debtor (GeneSys Research Institute, Inc. ("GRI"), a.k.a. Steward Research and Specialty Projects Corp ("SRSPC")), and is uniquely identified with, and only with, the non-profit Debtor by way of its Tax Identification # 27-3896009. This account should therefore have been closed upon bankruptcy, in accordance with the established directive of the US Trustee to do so (Exhibit 1, pp. 1,11 of US Trustee document). The Movant further protests how the problem was compounded by recent efforts of the Chapter 11 Trustee to instead "release of all right, title and interest in bank account at Bank of America (the 'BofA Account')" (Doc 291, p. 2) to the for-profit Creditor Steward Parties (collectively, Steward Health Care System LLC and Steward St. Elizabeth's Medical Center of Boston, Inc.). For the Steward Parties to possess the title to a bank account that is officially, actively, and inalienably identified with the independent non-profit GRI (as a matter apart from any claims Steward may have to the funds within the account), affords the for-profit Steward Parties an exceptionally wrongful ability to impersonate the independent nonprofit, GRI (a.k.a. SRSPC), now and in the future, including in banking and business transactions, in tax matters, and in court actions outside bankruptcy.

The emergency nature of this motion is compelled by its implications for asset disposition plan underway.

This motion is based on the following two sets of new facts and arguments:

***I). Physical account is unquestionably that of the Debtor, and should be closed***

1) Bank of America account xxx6895 was an "operating account" bearing the name of non-profit Steward Research and Specialty Projects Corp., from the time it was opened, and then first received deposits in August 2011, until April 2013, at which time, following the spin-off of the non-profit and the

relinquishment of Steward control of the non-profit, the new name, Genesys Research Institute, Inc., was appended thereto.

2) The Federal Tax ID associated with Steward Research and Specialty Projects Corp. (“SRSPC”) upon the approval of its tax exempt status by the Internal Revenue Service on Jan. 5, 2012 was 27-3896009 (full Tax IDs of nonprofits are public) (Exhibit 2 – correspondence from the IRS to SRSPC in care of its attorney at Mintz Levin).

3) The Federal Tax ID associated with the non-profit spin-off, GRI, in its nonprofit 990 filing for Oct. 1, 2012 thru Sept. 31, 2013 remained 27-3896009 (Exhibit 3). (As an aside, because this transfer of the business involved “[t]he corporation [being] sold and the assets, liabilities and charters [being] obtained by the buyer,” this did not trigger the need for a new EIN (Exhibit 4 – IRS Publication 1635, pp.1,4,5)).

4) The Internal Revenue Service states on its site <https://www.irs.gov/individuals/international-taxpayers/taxpayer-identification-numbers-tin> that “An Employer Identification Number (EIN) is also known as a *federal tax identification number*, [emphasis added] and *is used to identify a business entity* [emphasis added].”

5) The Internal Revenue Service states on its site <https://www.irs.gov/businesses/small-businesses-self-employed/canceling-an-ein-closing-your-account> that “The IRS cannot cancel [a business’s] EIN. Once an EIN has been assigned to a business entity, it becomes the permanent Federal taxpayer identification number for that entity.”

6) The Federal Tax ID associated with the subject bank account xxxx6895 account is 27-3896009 (Exhibit 5).

7) Account xxx6895 has been a dedicated recipient account for Massachusetts Office of Victim Assistance-Victims of Crime Act (“MOVA-VOCA”) funding (Exhibit 5). This state pass-through of federal funds, intended to assist victims of crimes, is made possible under the Federal Victims of Crime Act of 1984 (the “Act”). Use of these Program funds is governed by the Code of Federal Regulations (CFR) and the MOVA Board is Chaired by the MA Attorney General. By the terms of the Act, codified under 42 USC §10603, *a funding recipient organization must either be a public agency or a nonprofit:*

42 USC §10603((b)(1)(A) states:

(b) ELIGIBILITY OF PROGRAM; FACTORS; LIMITATION ON EXPENDING OF SUMS

(1) A victim assistance program is an eligible crime victim assistance program for the purposes of this section if such program—

(A) is operated by a public agency or a nonprofit organization, or a combination of such agencies or organizations or of both such agencies and organizations, and provides services to victims of crime;

8) The nonprofit SRSPC, a.k.a. GRI, was a contracted recipient of VOCA funding from FY2013 into at least FY2015 (Exhibit 6).

9) The Steward Parties (Steward Health Care System LLC and Steward St. Elizabeth's Medical Center of Boston, Inc.) are for-profit entities and therefore ineligible to be the end recipients of VOCA funding.

10) The foregoing facts preclude any title claim by the Steward Parties to said account, given their acknowledged independence from GRI (following the spinoff of the latter from Steward Health Care System LLC that occurred on Dec. 31, 2012), and hold the non-profit GRI to be the inalienable owner of record to said account. As before stated, this is a concern fully separate from any ownership claims to funds within the account.

11) The US Trustee for Region 1 (including Massachusetts), by authority under 28 USC §586(a)(3) and 11 USC §704(a)(8) (through 11 USC §§1106(a)(1) and 1107(a)), has imposed certain "Operating Guidelines and Reporting Requirements for Chapter 11 Cases" (see <https://www.justice.gov/ust-regions-r01/page/file/440726/download>) (Exhibit 1 – pp. 1 and 11 of document). These include certain requirements on the Ch. 11 Debtor, including that the Debtor immediately close all bank accounts (as recited on p.11 of that document):

#### **IV. BANK ACCOUNT REQUIREMENTS**

Immediately upon the filing of the Debtor's petition, the funds in the Debtor's existing bank accounts become property of the estate. Upon the filing of the case, the Debtor must immediately close pre-petition bank accounts and deposit the funds into new "Debtor-in-Possession" (DIP) bank account(s).

12) The bank account xxx6895, because it was inalienably tied to the Debtor (¶¶1-9), should have been closed.

***II. The for-profit Creditor Steward Parties should not possess a bank account federally identified to be an account belonging to the non-profit Debtor, as the Debtor is an entity fully independent of said Creditors***

13) Among other things, possession of all rights, title and interest in said account affords the for-profit Steward Parties the ability to impersonate the independent nonprofit GRI and to intercept its assets going forward, and for the Steward Parties to potentially represent themselves as indistinguishable from the non-profit Debtor in other banking business and for posturing in outside court proceedings to the extent such distinctions may prove pertinent.

14) The unique Federal Tax identification # 27-3896009 of nonprofit GRI is used to identify the nonprofit not only for tax purposes, but for banking and credit lines, for receipt of grant funds and for accounting purposes, etc. This number defines the corporate entity, although it does not define the Controller of the corporate entity, and therein lies an opportunity for Steward to impersonate the entity despite Steward having resigned full control of the nonprofit GRI on Dec. 31st, 2012.

15) This Movant sees no legitimate basis for what amounts to a transfer of GRI's nonprofit identity to the for-profit Steward Parties. This serves to further obscure what should be a sharp distinction between these for-profit Creditors and the independent nonprofit Debtor, but the distinction has been blurred to leverage both the Steward Parties and GRI in these proceedings, including over matters of ownership of IP, representation by Mintz Levin, designation of leased versus non-leased space, and in additional issues the Movant has just identified in ongoing 2004 hearings (including, but not limited to, ownership of Clinical Trial agreements).

WHEREFORE, in consideration of: 1) the preponderance of facts laying exclusive right to the above identified physical bank account xxx6895 to the Debtor (notwithstanding claims to assets therein), and 2) the injustice of affording the for-profit Creditor Steward Parties the ability to masquerade as the non-profit Debtor GRI, the account should be closed and the assets distributed as the Court sees fit.

Respectfully,



Clare Lamont  
93 E. Central St. #22  
Natick, MA 01760

**OPERATING GUIDELINES AND REPORTING REQUIREMENTS  
FOR CHAPTER 11 CASES**

**REGION I**

**MAINE, MASSACHUSETTS,  
NEW HAMPSHIRE AND RHODE ISLAND**



**WILLIAM K. HARRINGTON  
UNITED STATES TRUSTEE**  
[www.justice.gov/ust/r01](http://www.justice.gov/ust/r01)

537 Congress Street, Suite 300  
Portland, ME 04101  
(207) 780-3564  
FAX (207) 780-3568

Sovereign Tower Bld.  
446 Main Street, 14th Floor  
Worcester, MA 01608  
(508) 793-0555  
FAX (508) 793-0558

5 Post Office Square, Suite 1000  
Boston, MA 02109-3934  
(617) 788-0400  
FAX (617) 565-6368

1000 Elm Street, Suite 605  
Manchester, NH 03101  
(603) 666-7908  
FAX (603) 666-7913

10 Dorrance Street, Room 910  
Providence, RI 02903  
(401) 528-5551  
FAX (401) 528-5163

*Effective 1/01/15*

If the Debtor is an individual, he or she must bring to this meeting (1) proof of his/her identity and (2) proof of his/her Social Security Number. Permissible forms of identification include a valid driver's license, government issued photo identification card, U.S. Passport, or resident alien card. Proof of Social Security Number may include a Social Security card, current Form W-2, or payroll check stub.

#### **IV. BANK ACCOUNT REQUIREMENTS**

Immediately upon the filing of the Debtor's petition, the funds in the Debtor's existing bank accounts become property of the bankruptcy estate. Upon the filing of the case, the Debtor must immediately close pre-petition bank accounts and deposit the funds into new "Debtor-in-Possession" (DIP) bank account(s). Note that outstanding checks that have not cleared pre-petition bank accounts at the time of filing should not be permitted to clear. All financial transactions involving property of the estate must be made through the DIP account(s). All receipts must flow through the DIP account(s). All disbursements should be by check.

The Debtor must ensure that its checks are imprinted with the full name of the Debtor-in-Possession, exactly as shown on its voluntary petition, (Official Bankruptcy Form 1). If the Debtor is filing individually or filing a joint petition, the check must include the first, middle and last names (not initials) of all petitioners. If use of a d.b.a. ("doing business as") is desired in the styling of the check, the d.b.a. must have been recorded in the box on the petition labeled "All other Names used by the Debtor in the last 6 years (including married, maiden and trade names)." The designation "Debtor-In-Possession" (do not abbreviate as "DIP") and the case number must also be imprinted on all checks. See the following sample check as an illustration:

JAN 05 2012

Date:

STEWARD RESEARCH AND SPECIALTY  
PROJECTS CORPORATION

C/O MINTZ LEVIN COHN FERRIS GLOVSKY AN CHERYL RICHMOND  
TRAVIS L BLAIS  
ONE FINANCIAL CENTER  
BOSTON, MA 02111

Employer Identification Number:  
27-3896009

DLN:

17053131305031

Contact Person:

ID# 52492

Contact Telephone Number:  
(877) 829-5500

Accounting Period Ending:

September 30

Public Charity Status:

170(b)(1)(A)(vi)

Form 990 Required:

Yes

Effective Date of Exemption:

November 3, 2010

Contribution Deductibility:

Yes

Addendum Applies:

No

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

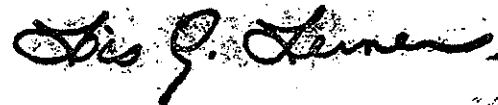
Please see enclosed Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, for some helpful information about your responsibilities as an exempt organization.

Letter 947 (DO/CG)

STEWARD RESEARCH AND SPECIALTY

We have sent a copy of this letter to your representative as indicated in your power of attorney.

Sincerely,

A handwritten signature in black ink, appearing to read "Lois G. Lerner". The signature is fluid and cursive, with a small flourish at the end.

Lois G. Lerner  
Director, Exempt Organizations

Enclosure: Publication 4221-PC



Form **990**Department of the Treasury  
Internal Revenue Service**Return of Organization Exempt From Income Tax**

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

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

OMB No. 1545-0047

**2012**Open to Public  
Inspection**A** For the 2012 calendar year, or tax year beginning **OCT 1, 2012** and ending **SEP 30, 2013****B** Check if applicable:

- ☐ Address change  
☐ Name change  
☐ Initial return  
☐ Terminated  
☐ Amended return  
☐ Application pending

**C** Name of organization**GENESYS RESEARCH INSTITUTE, INC. F.K.A STEWARD RESEARCH AND SPECIALTY PROJECTS**

Doing Business As

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

**736 CAMBRIDGE STREET**

Room/suite

**CBR415**

City, town, or post office, state, and ZIP code

**BRIGHTON, MA 02135****F** Name and address of principal officer: **DAVID HOROWITZ****SAME AS C ABOVE****D** Employer identification number**27-3896009****E** Telephone number**650-278-9429****G** Gross receipts \$ **7,821,503.****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) ☐ 501(c) ( ) (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: ▶ **HTTP://CANCER-SYSTEMS-BIOLOGY.ORG/****K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation: **2010****M** State of legal domicile: **MA****Part I Summary**

|                             |            |  |   |
|-----------------------------|------------|--|---|
| Activities & Governance     | <b>1</b>   | Briefly describe the organization's mission or most significant activities: <b>GENESYS RESEARCH INSTITUTE, INC. WAS ORGANIZED FOR THE PURPOSE OF CONDUCTING MEDICAL AND SCIENTIFIC</b> |   |
|                             | <b>2</b>   | Check this box <input type="checkbox"/> If the organization discontinued its operations or disposed of more than 25% of its net assets.  |   |
|                             | <b>3</b>   | Number of voting members of the governing body (Part VI, line 1a)  | <b>3</b>  |
|                             | <b>4</b>   | Number of independent voting members of the governing body (Part VI, line 1b)  | <b>2</b>  |
|                             | <b>5</b>   | Total number of individuals employed in calendar year 2012 (Part V, line 2a)   | <b>0</b>  |
|                             | <b>6</b>   | Total number of volunteers (estimate if necessary)   | <b>0</b>  |
|                             | Revenue    | <b>7a</b>  | Total unrelated business revenue from Part VIII, column (C), line 12              |
| <b>7b</b>                   |            | Net unrelated business taxable income from Form 990-T, line 34   | <b>0.</b>   |
| <b>8</b>                    |            | Contributions and grants (Part VIII, line 1h)  | <b>7,968,337.</b>   |
| <b>9</b>                    |            | Program service revenue (Part VIII, line 2g)   | <b>120,797.</b>   |
| <b>10</b>                   |            | Investment income (Part VIII, column (A), lines 3, 4, and 7d)  | <b>0.</b>   |
| <b>11</b>                   |            | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)   | <b>0.</b>   |
| <b>12</b>                   |            | Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)   | <b>8,089,134.</b>   |
| <b>13</b>                   |            | Grants and similar amounts paid (Part IX, column (A), lines 1-3)   | <b>0.</b>   |
| <b>14</b>                   |            | Benefits paid to or for members (Part IX, column (A), line 4)  | <b>0.</b>   |
| Expenses                    |            | <b>15</b>  | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) |
|                             | <b>16a</b> | Professional fundraising fees (Part IX, column (A), line 11e)  | <b>0.</b>   |
|                             | <b>b</b>   | Total fundraising expenses (Part IX, column (D), line 25)  | <b>0.</b>   |
|                             | <b>17</b>  | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)   | <b>5,416,884.</b>   |
|                             | <b>18</b>  | Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)  | <b>9,997,688.</b>   |
|                             | <b>19</b>  | Revenue less expenses. Subtract line 18 from line 12   | <b>-1,908,554.</b>  |
| Net Assets or Fund Balances | <b>20</b>  | Total assets (Part X, line 16)   | <b>8,717,867.</b>   |
|                             | <b>21</b>  | Total liabilities (Part X, line 26)  | <b>9,814,025.</b>   |
|                             | <b>22</b>  | Net assets or fund balances. Subtract line 21 from line 20   | <b>-1,096,158.</b>  |

**Part II Signature Block**

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

|                        |   |                      |            |  |
|------------------------|---|----------------------|------------|--|
| Sign Here              | Signature of officer                          |                      | Date       |  |
|                        | DAVID HOROWITZ, PRESIDENT                     |                      |            |  |
| Paid Preparer Use Only | Print/Type preparer's name                    | Preparer's signature | Date       | Check <input type="checkbox"/> self-employed |
|                        | DOUGLAS FARRINGTON                            |                      |            | PTIN P00370668                               |
| Firm's name            | Firm's EIN                                    |                      | Firm's EIN |  |
|                        | MARCUM LLP                                    | 11-1986323           |            |  |
| Firm's address         | Phone no.                                     |                      |            |  |
|                        | 53 STATE STREET, FLOOR 38<br>BOSTON, MA 02109 | (617) 742-9666       |            |  |

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

232001 12-10-12 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2012)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

11210815 756977 GENESYSRI

2012.05090 GENESYS RESEARCH INSTITUTE, GENESYS1

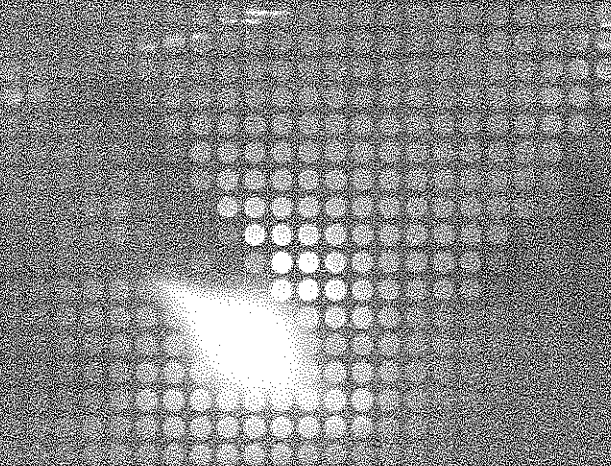
EXHIBIT 4



# EMPLOYER IDENTIFICATION NUMBER

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Understanding Your EIN



## **Corporation**

### **Definition:**

A corporation is defined as a legal entity or structure created under the authority of the laws of a state consisting of a person, or group of persons, who become shareholders. The entity's existence is considered separate and distinct from that of its members. Since a corporation is an entity in its own right, it is liable for its own debts and obligations. In forming a corporation, prospective shareholders transfer money, property, or both, for the corporation's capital stock.

### **The following businesses formed after 1996 are taxed as corporations:**

- A business formed under a federal or state law that refers to it as a corporation, body corporate, or body politic
- A business formed under a state law that refers to it as a joint-stock company or joint-stock association
- An insurance company
- Certain banks
- A business wholly owned by a state or local government
- A business specifically required to be taxed as a corporation by the Internal Revenue Code
- Certain foreign businesses
- Any other business that elects to be taxed as a corporation. For example, a limited liability company (LLC) by filing Form 8832, Entity Classification Election. For more information, see the instructions for Form 8832.

### **Form(s):**

Corporations usually file a Form 1120 series return, plus other returns that apply (such as employment or excise tax returns).

### **The Form 1120 series returns are as follows:**

- Form 1118, Foreign Tax Credit-Corporation
- Form 1120, U.S. Corporation Income Tax Return
- Form 1120-C, U.S. Income Tax Return for Cooperative Associations
- Form 1120-F, U.S. Income Tax Return of a Foreign Corporation
- Form 1120-FSC, U.S. Income Tax Return of a Foreign Sales Corporation
- Form 1120-H, U.S. Income Tax Return for Homeowners Associations
- Form 1120-L, U.S. Life Insurance Company Income Tax Return
- Form 1120-ND, Return for Nuclear Decommissioning Funds and Certain Related Persons
- Form 1120-PC, U.S. Property and Casualty Insurance Company Income Tax Return
- Form 1120-POL, U.S. Income Tax Return for Certain Political Organizations
- Form 1120-REIT, U.S. Income Tax Return for Real Estate Investment Trusts

- Form 1120-RIC, U.S. Income Tax Return for Regulated Investment Companies
- Form 1120S, U.S. Income Tax Return for an S Corporation
- Form 1120-SF, U.S. Income Tax Return for Designated Settlement Funds (Under section 468B)
- Form 1120-W, Estimated Tax for Corporations
- Form 1120-X, Amended U.S. Corporation Income Tax Return

**You will need a new EIN if any of the following are true:**

- You are a subsidiary of a corporation and currently use the parent's corporate EIN
- You become a subsidiary of a corporation
- The corporation becomes a partnership or a sole proprietorship
- You create a new corporation after a statutory merger
- You receive a new corporate charter

**You will not need a new EIN if any of the following are true:**

- You are a division of a corporation
- After a corporate merger, the surviving corporation uses its existing EIN
- A corporation declares bankruptcy. However, if a liquidating trust is established for a corporation that is in bankruptcy, an EIN for that trust is required. See Treasury Reg. § 301.7701-4(d).
- Your business name changes
- You change your location or add locations (stores, plants, enterprises or branches)
- You elect to be taxed as an S Corporation by filing Form 2553
- After a corporate reorganization, you only change identity, form, or place of organization
- The corporation is sold and the assets, liabilities and charters are obtained by the buyer

## **Partnership**

**Definition:**

A partnership is the relationship existing between two or more persons who join together to carry on a trade or business. Each partner contributes money, property, labor or skill, and expects to share in the profits and losses of the business.

The term 'partnership' includes a limited partnership, syndicate, group, pool, joint venture, or other unincorporated organization, through or by which any business, financial operation, or venture is carried on.

An unincorporated organization with two or more members is generally classified as a partnership for federal tax purposes if its members carry on a trade, business, financial operation, or venture and divide its profits. However, a joint undertaking merely to share expenses is not a partnership. For example, co-ownership of property maintained and rented or leased is not a partnership unless the co-owners provide services to the tenants.

EXHIBIT 5



February 09, 2012

ATTN: Lisa Purter,  
Grants Fiscal Coordinator  
Massachusetts Office for Victim Assistance  
One Ashburton Place, Suite 1101  
Boston, MA 02108

RE: Account Confirmation for Steward Research and Specialty Projects Corporation

Dear Lisa:

Please accept this letter, in lieu of a voided check, as confirmation of the following information relating to the above-referenced account:

**Steward Research and Specialty Projects Corporation**

Account #: [REDACTED] 6895  
Account Name: Steward Research and Specialty Projects Corporation Operating Account.  
ACH ABA #: 011000138  
Wire ABA #: 026009593  
Tax ID #: 27-3896009

Sincerely,

Mark Roderick, Sales Support Associate - GCB  
Bank of America Merrill Lynch  
100 Federal Street  
Mail Code: MA5-100-07-08  
Boston MA 02110  
T: 617-434-0654  
E: 617-434-3552  
mark.j.roderick@baml.com

Member FDIC

♻ Recycled Paper



## COMMONWEALTH OF MASSACHUSETTS ~ STANDARD CONTRACT FORM



This form is jointly issued and published by the Executive Office for Administration and Finance (ANF), the Office of the Comptroller (CTR) and the Operational Services Division (OSD) as the default contract for all Commonwealth Departments when another form is not prescribed by regulation or policy. Any changes to the official printed language of this form shall be void. Additional non-conflicting terms may be added by Attachment. Contractors may not require any additional agreements, engagement letters, contract forms or other additional terms as part of this Contract without prior Department approval. Click on hyperlinks for definitions, instructions and legal requirements that are incorporated by reference into this Contract. An electronic copy of this form is available at [www.mass.gov/osd](http://www.mass.gov/osd) under Guidance For Vendors - Forms or [www.mass.gov/osd](http://www.mass.gov/osd) under OSD Forms.

|   |  |   |  |
|---|--|---|--|
| <b>CONTRACTOR LEGAL NAME:</b><br>Steward Research And Specialty Projects<br>(and d/b/a):  |  | <b>COMMONWEALTH DEPARTMENT NAME:</b> Department Of Public Health<br>MMARS Department Code: DPH  |  |
| <b>Legal Address: (W-9, W-4,T&amp;C):</b><br>77 Warren St, Brighton, MA 02135-3601  |  | <b>Business Mailing Address:</b><br>250 Washington St., Boston, MA 02108  |  |
| <b>Contract Manager:</b> Michelle Auerbach  |  | <b>Billing Address (if different):</b>  |  |
| <b>E-Mail:</b> michelle.auerbach@steward.org  |  | <b>Contract Manager:</b> Marla Siegel   |  |
| <b>Phone:</b> 617-779-6731 <b>Fax:</b> 617-779-6731   |  | <b>E-Mail:</b> marla.siegel@state.ma.us   |  |
| <b>Contractor Vendor Code:</b> VC0000559970   |  | <b>Phone:</b> 617-624-5811 <b>Fax:</b> 617-624-5017   |  |
| <b>Vendor Code Address ID (e.g. "AD001"):</b> AD001.<br>(Note: The Address ID must be set up for EFT payments.)   |  | <b>MMARS Doc ID(s):</b> INTF3502M03700915096<br><b>RFR/Procurement or Other ID Number:</b> 700915   |  |
| <b>NEW CONTRACT</b><br><b>PROCUREMENT OR EXCEPTION TYPE: (Check one option only)</b><br><input type="checkbox"/> <b>Statewide Contract</b> (OSD or an OSD-designated Department)<br><input type="checkbox"/> <b>Collective Purchase</b> (Attach OSD approval, scope, budget)<br><input type="checkbox"/> <b>Department Procurement</b> (includes State or Federal grants 815 CMR 2.00)<br>(Attach RFR and Response or other procurement supporting documentation)<br><input type="checkbox"/> <b>Emergency Contract</b> (Attach justification for emergency, scope, budget)<br><input type="checkbox"/> <b>Contract Employee</b> (Attach Employment Status Form, scope, budget)<br><input type="checkbox"/> <b>Legislative/Legal or Other:</b> (Attach authorizing language/justification, scope and budget)  |  | <b>X CONTRACT AMENDMENT</b><br>Enter Current Contract End Date <u>Prior</u> to Amendment: <u>06/30, 20 13</u> .<br>Enter Amendment Amount: \$ <u>1,892,092.00</u> . (or "no change")<br><b>AMENDMENT TYPE:</b> (Check one option only. Attach details of Amendment changes.)<br><input checked="" type="checkbox"/> <b>Amendment to Scope or Budget</b> (Attach updated scope and budget)<br><input type="checkbox"/> <b>Interim Contract</b> (Attach justification for Interim Contract and updated scope/budget)<br><input type="checkbox"/> <b>Contract Employee</b> (Attach any updates to scope or budget)<br><input type="checkbox"/> <b>Legislative/Legal or Other:</b> (Attach authorizing language/justification and updated scope and budget) |  |
| The following <b>COMMONWEALTH TERMS AND CONDITIONS (T&amp;C)</b> has been executed, filed with CTR and is incorporated by reference into this Contract.<br><input type="checkbox"/> Commonwealth Terms and Conditions <input checked="" type="checkbox"/> Commonwealth Terms and Conditions For Human and Social Services   |  |   |  |
| <b>COMPENSATION: (Check ONE option):</b> The Department certifies that payments for authorized performance accepted in accordance with the terms of this Contract will be supported in the state accounting system by sufficient appropriations or other non-appropriated funds, subject to intercept for Commonwealth owed debts under 815 CMR 9.00.<br><input type="checkbox"/> <b>Rate Contract</b> (No Maximum Obligation. Attach details of all rates, units, calculations, conditions or terms and any changes if rates or terms are being amended.)<br><input checked="" type="checkbox"/> <b>Maximum Obligation Contract</b> Enter Total Maximum Obligation for total duration of this Contract (or new Total if Contract is being amended): \$ <u>3,135,754.00</u> .   |  |   |  |
| <b>PROMPT PAYMENT DISCOUNTS (PPD):</b> Commonwealth payments are issued through EFT 45 days from invoice receipt. Contractors requesting accelerated payments must identify a PPD as follows: Payment issued within 10 days ___% PPD; Payment issued within 15 days ___% PPD; Payment issued within 20 days ___% PPD; Payment issued within 30 days ___% PPD. If PPD percentages are left blank, identify reason: ___ agree to standard 45 day cycle <input checked="" type="checkbox"/> statutory/legal or Ready Payments (G.L. c. 29, § 23A); only initial payment (subsequent payments scheduled to support standard EFT 45 day payment cycle. See Prompt Pay Discounts Policy.)   |  |   |  |
| <b>BRIEF DESCRIPTION OF CONTRACT PERFORMANCE or REASON FOR AMENDMENT:</b> (Enter the Contract title, purpose, fiscal year(s) and a detailed description of the scope of performance or what is being amended for a Contract Amendment. Attach all supporting documentation and justifications.)<br>Maximum Obligation and Duration Change (Must include change to current FY)   |  |   |  |
| <b>ANTICIPATED START DATE:</b> (Complete ONE option only) The Department and Contractor certify for this Contract, or Contract Amendment, that Contract obligations:<br><input checked="" type="checkbox"/> 1. may be incurred as of the <b>Effective Date</b> (latest signature date below) and <b>no</b> obligations have been incurred <b>prior</b> to the <b>Effective Date</b> .<br><input type="checkbox"/> 2. may be incurred as of ___, 20___, a date <b>LATER</b> than the <b>Effective Date</b> below and <b>no</b> obligations have been incurred <b>prior</b> to the <b>Effective Date</b> .<br><input type="checkbox"/> 3. were incurred as of ___, 20___, a date <b>PRIOR</b> to the <b>Effective Date</b> below, and the parties agree that payments for any obligations incurred prior to the <b>Effective Date</b> are authorized to be made either as settlement payments or as authorized reimbursement payments, and that the details and circumstances of all obligations under this Contract are attached and incorporated into this Contract. Acceptance of payments forever releases the Commonwealth from further claims related to these obligations.   |  |   |  |
| <b>CONTRACT END DATE:</b> Contract performance shall terminate as of <u>06/30, 20 15</u> , with no new obligations being incurred after this date unless the Contract is properly amended, provided that the terms of this Contract and performance expectations and obligations shall survive its termination for the purpose of resolving any claim or dispute, for completing any negotiated terms and warranties, to allow any close out or transition performance, reporting, invoicing or final payments, or during any lapse between amendments.   |  |   |  |
| <b>CERTIFICATIONS:</b> Notwithstanding verbal or other representations by the parties, the "Effective Date" of this Contract or Amendment shall be the latest date that this Contract or Amendment has been executed by an authorized signatory of the Contractor, the Department, or a later Contract or Amendment Start Date specified above, subject to any required approvals. The Contractor makes all certifications required under the attached <b>Contractor Certifications</b> (incorporated by reference if not attached hereto) under the pains and penalties of perjury, agrees to provide any required documentation upon request to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by reference herein according to the following hierarchy of document precedence, the applicable <b>Commonwealth Terms and Conditions</b> , this Standard Contract Form including the <b>Instructions and Contractor Certifications</b> , the Request for Response (RFR) or other solicitation, the Contractor's Response, and additional negotiated terms, provided that additional negotiated terms will take precedence over the relevant terms in the RFR and the Contractor's Response only if made using the process outlined in <b>801 CMR 21.07</b> , incorporated herein, provided that any amended RFR or Response terms result in best value, lower costs, or a more cost effective Contract. |  |   |  |
| <b>AUTHORIZING SIGNATURE FOR THE CONTRACTOR:</b><br><br>(Signature and Date Must Be Handwritten At Time of Signature)<br>Print Name: <u>Michelle Auerbach</u><br>Print Title: <u>Director Research Administration</u>   |  | <b>AUTHORIZING SIGNATURE FOR THE COMMONWEALTH:</b><br>X: _____ Date: _____<br>(Signature and Date Must Be Handwritten At Time of Signature)<br>Print Name: <u>Sharon Dyer</u><br>Print Title: <u>Acting Director, Purchase of Service Office</u>  |  |

UNITED STATES BANKRUPTCY COURT  
DISTRICT OF MASSACHUSETTS  
EASTERN DIVISION

In Re:

GENESYS RESEARCH INSTITUTE, INC.

DEBTOR

Chapter 11

Case No. 15-12794-JNF

CERTIFICATE OF SERVICE

I, Clare Lamont, do hereby certify that I have sent through postal mail notice and copies of the **Emergency Motion by Interested Party Clare Lamont to Compel the Closing of the Debtor's Bank of America Account xxx6895, in Accordance with the Order of the US Trustee to Close All Debtor Accounts Upon Bankruptcy Filing, Chapter 11, Case No. 15-12794-JNF** to the parties listed on the annexed service list.



Clare Lamont  
lamont.clare@gmail.com  
93 E. Central St. #22  
Natick, MA 01760  
781-929-8316

DATED: June 14<sup>th</sup>, 2016

**Postal Mail Notice List**

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