2017 ANNUAL REPORT

Awarding research grants to develop improved treatments, cures, and methods of prevention for mental illness.
Mission
The Brain & Behavior Research Foundation (BBRF) is committed to alleviating the suffering caused by mental illness by awarding grants that will lead to advances and breakthroughs in scientific research.

Vision
To dramatically improve the lives of those living with mental illness and ultimately enable them to live full, happy, and productive lives.

100% of all donor contributions for research are invested in grants that lead to discoveries in understanding the causes and improving treatments for brain and behavior disorders in children and adults including addiction, ADHD, anxiety, autism, bipolar disorder, borderline personality disorder, depression, eating disorders, OCD, PTSD, schizophrenia, and suicide prevention.

For 30 years we have awarded more than $380 million, to more than 4,500 scientists carefully selected by our prestigious Scientific Council.
BBRF GRANTS SUPPORT THE MOST PROMISING IDEAS IN BRAIN RESEARCH.

We invest in:

**Basic Research**
- to understand what happens in the brain to cause mental illness

**New Technologies**
- to advance or create new ways of studying and understanding the brain

**Diagnostic Tools And Early Intervention**
- to recognize early signs of mental illness and begin treatment as early as possible

**Next-Generation Therapies**
- to reduce symptoms of mental illness and ultimately prevent and cure brain and behavior disorders
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### BY THE NUMBERS SINCE 1987

**AWARDED TO SCIENTISTS**

$380+ \text{MILLION}

**GRANTS**

5,500+

The breakdown of our grantees since 1987

- 4,282 Young Investigators
- 828 Independent Investigators
- 426 Distinguished Investigators

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**UNIVERSITIES & MEDICAL CENTERS**

550

**COUNTRIES, INCLUDING THE U.S.**

35

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**175 ACTIVE SCIENTIFIC COUNCIL MEMBERS (AND 7 EMERITUS MEMBERS)**

The all-volunteer Foundation Scientific Council is composed of leading experts across disciplines in brain & behavior research who review grant applications and recommend the most promising ideas to fund.

The group includes:

- 52 Members of the National Academy of Medicine
- 26 Chairs of Psychiatry & Neuroscience Departments
- 13 Members of the National Academy of Sciences
- 4 Recipients of the National Medal of Science
- 2 Former Directors of the National Institute of Mental Health and the Current Director
- 2 Nobel Prize Winners
Dear Brain & Behavior Research Foundation Supporters:

Since 1987, the Brain & Behavior Research Foundation has invested in the future. We support innovative brain and behavior research today which will lead to new treatments, cures, and methods of prevention. We are proud to present you with our 2017 Annual Report.

BBRF is Leading The World...
In Charitable Funding of Research Grants for Mental Illness

The Brain & Behavior Research Foundation is the largest non-governmental funder of mental health research grants in the world. With our operating expenses covered by separate foundation grants, 100 percent of every dollar donated for research is invested in research grants.

Now, three decades since our inception, we have awarded more than:

- $380 million, in more than 5,500 grants, to more than 4,500 researchers, from 550 institutions in 35 countries around the world.
- $19 million in grants in 2017 divided between our 17 Distinguished Investigators, 80 Independent Investigators and 400 Young Investigators.

The Brain & Behavior Research Foundation's sustained commitment to research over the past 30 years and its plan for progress in the years ahead is empowered by a remarkable collaboration between our donors and the worldwide leaders in brain science.

BBRF is Advancing Recovery...
Through Our Research Grants

Funding the most promising and cutting-edge research is at the core of our mission. Supporting young scientists' careers and keeping them in the field of neuroscience is vital to finding cures for mental illness. Communicating research results and sharing insights is also vitally important to our mission.

The pathway to the future of scientific research and discovery is a challenging and lengthy process, but we remain committed to funding "innovative and out of the box" ideas because it is this cutting-edge research that will eventually result in new treatments and cures for brain and behavior disorders.

BBRF is Accelerating Discovery...
In Genetics, Molecular Biology, Brain Imaging, Early Interventions, and Rapid-Acting Medications

The achievements of our grantees are rooted in fostering a researcher's career in brain science.

A survey of our grantees revealed that Foundation grants increased a researcher's ability to secure additional grant support. BBRF grants result in subsequent funding (both federal and private) and the more than $380 million in grants awarded to date has resulted in more than $3.8 billion in additional brain research funding for these scientists.

A recent RAND Europe analysis of the global mental health research funding landscape found that we are the top non-governmental funder cited in published articles.

Results from the investigations funded by our grants continue to define the leading edge of all research in the mental health field and once again, this past year proved to be a year of advancement.

The research findings we report on pages 8-19 in this annual report would not be possible without the extraordinary volunteer effort and leadership of our Scientific Council. This prestigious group of scientists steers the Foundation's grants selection process. We are proud to report that 12 distinguished experts joined the Scientific Council this year, bringing our total number to 175. Our new members are highlighted on page 22.

BBRF is Informing the Public...
About the Research Progress Which We Support in the Field of Mental Health

This past year the Foundation continued its longstanding commitment to public education with its annual International Mental Health Research Symposium (highlighted on page 46), which offered complimentary general admission to hear presentations from the Foundation's 2017 Outstanding Achievement Prize winners and two exceptional Young Investigator Grantees, on topics ranging from schizophrenia and addiction to childhood interventions and the brain circuitry behind mood disorders. These presentations are available online.

The "Meet the Scientist" webinar series had more than 5,800
attendees from more than 52 countries register to watch the program and post event, the series received more than 22,000 views of the 2017 webinars on our YouTube channel. These public events combined with our private fundraising events, and our ongoing communications continually disseminate grantee research discoveries and share stories of hope and recovery. Information is available 24/7 on our redesigned and continuously updated website, bbrfoundation.org, and on our social media channels which include Facebook, Twitter, Instagram, LinkedIn and YouTube.

The Foundation’s publication, Brain & Behavior Magazine, has a circulation of more than 19,000 and can also be found in the media section of our website under publications.

The Foundation produces the Emmy Award-nominated public television series Healthy Minds which aims to remove the stigma of mental illness, educate the public and offer a message of hope by shedding light on common psychiatric conditions through inspiring personal stories and experts sharing cutting edge information on research and treatment. The goal of Healthy Minds is to inspire conversations about mental illness, and provide understandable information and resources for viewers.

BBRF and the Future

We are excited about recent technological advances that have made possible experiments that would have seemed like science fiction 30 years ago. The Foundation is proud of the accomplishments of the scientists we fund and we are excited to focus on their promising paths of discovery. New donors, both large and small, have come forward to join us as our message spreads. Each year we are continually touched by the tributes and memorial gifts given by families who have lost loved ones to psychiatric illness.

We promise our donors that we will keep propelling forward. Our Scientific Council will continue to identify the most creative proposals for funding, helping to accelerate the pace of research and will focus on new approaches with the greatest potential for breakthroughs.

In contributing to BBRF you are supporting both an impressive history of achievements that have advanced science and are paving the way forward to change what it means to live with a mental illness and open possibilities for more people to live full, happy, and productive lives. We thank you for your ongoing support to help us get closer to realizing this vision.

Sincerely,

Jeffrey Borenstein, M.D.
President & CEO

Stephen A. Lieber
Chair, Board of Directors

Herbert Pardes, M.D.
President, Scientific Council

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2017 LEADING RESEARCH ACHIEVEMENTS BY FOUNDATION GRANTEE

“These research achievements were selected for highlight because of their significant contributions to our understanding of brain and behavior disorders as well as potential new treatments. This list illustrates some of the major research achievements by our grantees over the past year. We are proud to be able to say that our grants make critical differences in the careers of scientists and have helped support a broad range of the best ideas in brain research and that our grantees have taken substantial steps forward on the path to developing new treatments and finding cures for mental illness.”

—Jeffrey Borenstein, M.D.
1. Neurofeedback App Improves Early Cognitive Deficit in People with High Psychosis Risk
2. Brain Abnormalities Linked to Suicidal Behavior in Young People with Bipolar Disorder
3. Discovery of Four Depression “Biotypes” Could Help Target Treatments
4. Deep Transcranial Magnetic Stimulation (dTMS) Could Help Treat Bipolar Depression
5. Early Test Shows: Experimental Drug May Have Potential to Relieve OCD Symptoms Quickly and with Few Side Effects
6. Animal Studies Suggest a New Path to Fast–Acting Antidepressant
7. New Technique Lets Researchers Watch Human Brain Circuits Begin to Wire–Up
8. Ketamine Rapidly Reduced Suicidal Thoughts in People with Depression
9. Study Shows Exposure to Bright Light at Midday Reduces Depression in Patients with Bipolar Disorder
10. New Analysis Finds Behavioral Therapy Should Be Combined with Medication to Relieve Severe Anxiety in Children

Listed in order of publication
Neurofeedback App Improves Early Cognitive Deficit in People with High Psychosis Risk

Problems with mental processing speed are common among people at high risk for psychosis, and are thought to be related to broader deficits in social functioning. In a new clinical trial, researchers enhanced participants’ processing speed using a neurofeedback training program and saw improvements in social behaviors, they report in *Psychiatric Rehabilitation Journal*.

Processing speed is a measure of cognitive efficiency and it involves the ability to effortlessly perform routine cognitive tasks so as to free up processing capacity for other tasks. Low processing speed would reduce the ability to simultaneously handle multiple cognitive chores, such as processing social cues. This, researchers say, gives the impression that the person is a “step behind” in a social situation, and may ultimately lead to social isolation.

Teenagers and young adults at high risk for schizophrenia have been found to show processing speed impairments early on, before exhibiting any psychotic symptoms. In a randomized clinical trial with 62 people at high risk for psychosis, Jimmy Choi, Psy.D., of The Institute of Living at Hartford Hospital in Connecticut and a 2010 Young Investigator grantee, and his colleagues* tested the feasibility and outcome of improving processing speed through a personalized training program. The processing-speed training was done using a tablet-based program, in which the difficulty levels of training tasks are personalized. The program tracks participants’ eyes and uses their pupillary responses to determine the difficulty of a task. The program then uses this information to adjust training parameters in real-time and change the cognitive load of the task. This results in a personalized and efficient training program.

The results of the training showed that not only it is possible to improve processing speed, but that the effects remain up to at least two months. Moreover, improvement in processing speed was linked to better social functioning, as reported by the participants.

Addressing cognitive deficits in high-risk individuals early on could reduce functional decline later if they go on to develop full-blown psychosis. The results of this clinical trial suggest that targeting processing speed can be a promising approach to decreasing comorbidity and mitigating a risk factor for psychosis, the researchers say.


*The research team also included Cheryl Corcoran, M.D., of Columbia University Medical Center and a Young Investigator grantee in 1999, 2002; Daniel C. Javitt, M.D., Ph.D., of Columbia University Medical Center, who is a 1990 Young Investigator grantee and 1995 Independent Investigator grantee, as well as a member of the Foundation’s Scientific Council; and Godfrey D. Pearlson, M.D., of The Institute of Living at Hartford Hospital, who is a 2000 Distinguished Investigator Grantee and a member of the Scientific Council.
A new study of adolescents and young adults with bipolar disorder has found structural and functional differences in the brains of those with the disorder who have attempted suicide and those who have not. It has been estimated that about half of people who have bipolar disorder make at least one suicide attempt in their lifetime. The differences uncovered in the study could help researchers identify young people who are at greatest risk.

Although people with bipolar disorder tend to start having suicidal thoughts in adolescence or young adulthood—when parts of the brain involved in emotional processing are still maturing—few studies have examined neural circuitry associated with suicidal behavior in individuals at this age.

In the new study, published January 31 in the *American Journal of Psychiatry*, researchers led by Hilary P. Blumberg, M.D., used several different types of magnetic resonance imaging (MRI) to study the brains of people with bipolar disorder between the ages of 14 and 25, comparing 26 individuals who had attempted suicide to 42 who had not. Dr. Blumberg is a 2002 Young Investigator, 2006 Independent Investigator, BBRF Scientific Council member and 2006 Klerman Prizewinner.

The team, which included 2008 and 2012 Young Investigator Fei Wang, Ph.D., and 2016 Young Investigator Jie Liu, Ph.D., found that among those who had attempted suicide, parts of the brain that regulate emotion and impulses were smaller in size and less active than they were in the other study participants. The white matter connecting those brain regions was also diminished in those who had attempted suicide. Abnormalities in these brain regions have also been observed in adults with various psychiatric disorders who have attempted suicide.

Zeroing in on the neural systems that underlie suicidal behavior is critical for developing new strategies for prevention, the researchers say. Their findings could help researchers develop interventions that aim to prevent suicide by improving function of these disrupted brain circuits.

*Journal: American Journal of Psychiatry, February 21, 2017*
Discovery of Four Depression “Biotypes” Could Help Target Treatments

Tests for various substances in the blood are one example of the power of “biomarkers,” measurable biological traits that tell doctors a patient either has or is at risk for a particular illness. While such tests so far have mostly eluded psychiatry, a large new brain-scan study identified four categories of biological activity, or “biotypes,” of depression that may help doctors choose more effective treatments—just as a blood test might guide treatment of a cancer or heart disease.

When researchers used a machine learning program to divide over 450 depression patients into categories based on biomarkers in their brain activity patterns, they found four categories associated with distinct sets of clinical symptoms, according to their report in the journal *Nature Medicine*.

Strikingly, patients in one of these four categories were about three times more likely to respond to a noninvasive treatment known as transcranial magnetic stimulation (TMS) than patients in two of the other categories. TMS is a therapy in which magnetic fields stimulate specific regions of the brain, and has been particularly useful in cases of treatment-resistant depression.

Brains of patients who had depressive anxiety tended to have fewer connections in the brain networks involved in responses to fear and negative emotional stimuli. Those with difficulty feeling pleasure, a condition called anhedonia, had more connections in networks that regulate reward processing and control over movement.

Noting that “biomarkers have already transformed the diagnosis and management of cancer, diabetes, heart disease and even pain syndromes,” the researchers express hope that the biotypes they have identified will allow doctors to more specifically diagnose depression and determine the most effective treatment plan.


Deep Transcranial Magnetic Stimulation (dTMS) Could Help Treat Bipolar Depression

Deep transcranial magnetic stimulation (dTMS), a non-invasive procedure that uses magnetic fields to stimulate brain cells, may be useful when added to medication to treat bipolar depression, according to a February 1 study published in the journal Neuropsychopharmacology.

If these new results are confirmed in further studies, dTMS could join the limited options available for treating bipolar depression, in which resistance to treatment is two times higher than in major (unipolar) depression. dTMS has already been shown to improve symptoms in patients with major depression.

The study of dTMS in bipolar depression was led by Dr. André R. Brunoni, of the University of São Paulo, Brazil, a 2013 Young Investigator, and included Z. Jeff Daskalakis, M.D., Ph.D., of the Centre for Addiction and Mental Health, University of Toronto, a recipient of 2004 and 2006 Young Investigator awards and a 2008 Independent Investigator award.

The study included 50 patients with bipolar depression who were also currently taking psychiatric medication for their condition. In 20 sessions held over four weeks, half of the patients received dTMS, which was delivered by an electrical coil inside a helmet worn by the participants. The other half of the patients received a “placebo” treatment; that is, all the conditions were the same as for the dTMS group, except that the placebo patients wore a helmet with a coil that did not generate magnetic fields but produced the same sounds and scalp sensations as the active coil. Forty-three patients completed the study.

After four weeks, patients who received dTMS scored an average of 4.88 points better on a survey measuring depression symptoms than those who received the placebo treatment. (A three-point difference is considered to be a clinically meaningful difference, according to the National Institute of Clinical Excellence). Patients who received dTMS also showed a significant improvement in overall functioning after four weeks, compared to the placebo group. However, the differences between groups in depression symptoms and functioning had disappeared by eight weeks after the start of treatment, and there were no significant differences in remission rates between the groups.

Patients who received dTMS reported more scalp pain than those in the placebo group, but there were no other differences in treatment side effects. None of the patients developed mania symptoms after the treatment (a condition called treatment-emergent mania switch or TEMS), which can occur in dTMS treatment. The results suggest that dTMS could be an effective and well-tolerated “add-on” therapy for patients with bipolar depression already taking medication, the researchers conclude, noting that these patients may also benefit from a longer initial dTMS treatment program or maintenance treatments after the first treatment program.

The medical device company Brainsway provided financial support and the dTMS devices for the study.

Journal: Neuropsychopharmacology, April 26, 2017
According to a new study, rapastinel, an experimental drug currently being evaluated for the treatment for major depression, may relieve the symptoms of obsessive-compulsive disorder (OCD) rapidly and with few side effects.

Results of the small proof-of-concept study, led by 2009 and 2014 Young Investigator Carolyn I. Rodriguez, M.D., Ph.D., at Stanford University School of Medicine, were reported December 1, 2016 in *The American Journal of Psychiatry*. Helen Blair Simpson, M.D., Ph.D., a 2005 Young Investigator and 2010 Independent Investigator at Columbia University College of Physicians and Surgeons, was also a member of the research team.

Rodriguez and her colleagues are investigating rapastinel because they previously found that some OCD patients receive rapid relief from their symptoms when treated with ketamine. Ketamine has long been used as an anesthetic, and in recent years researchers have found that it can also rapidly relieve symptoms of depression. However, the drug’s side effects, which include a feeling of dissociation—a sense of detachment from one’s self, or an “out-of-body” experience—are a challenge for broad clinical use in treating psychiatric disorders.

Hoping to find a treatment that reduces patients’ obsessions and compulsions quickly without dissociative side effects, Rodriguez and her colleagues have turned to rapastinel. It, like ketamine, is a drug that modulates the action of NMDA receptors in the brain—docking ports for the neurotransmitter glutamate and important in learning, memory and synaptic plasticity and thought to play a role in OCD. But rapastinel works differently than ketamine and has a lower risk of causing dissociative side effects, the researchers say.

Seven people with OCD participated in the team’s initial clinical study. Each was given a single dose of rapastinel. The drug was well tolerated—no patient reported dissociative side effects—and within hours of treatment, the severity of patients’ symptoms had declined significantly. The drug reduced the severity of patients’ obsessions and compulsions, as well as symptoms of anxiety and depression, the researchers report.

While rapastinel’s effects on OCD symptoms were rapid, they were not long-lasting. When the research team evaluated patients one week after treatment, symptoms were about as severe as they had been prior to treatment. The scientists say important next steps will be testing the effects of repeated dosing and working to develop related drugs that reduce OCD symptoms over a sustained period.

*Journal: American Journal of Psychiatry, May 22, 2017*
Animal Studies Suggest a New Path to Fast-Acting Antidepressant

Animal research reported on March 21 in the journal *Molecular Psychiatry* has uncovered a drug development strategy that could lead to a new type of antidepressant medication. The study suggests that inhibiting an enzyme called GLO1 could have fast-acting antidepressant effects, relieving patients’ symptoms in a matter of days. Existing antidepressant medications can take weeks or months to become fully effective, and do not help a considerable fraction of patients. Finding other, faster-acting alternatives is a high priority.

The study was led by Abraham A. Palmer, Ph.D., a 2003 and 2006 Young Investigator at the University of California, San Diego (UCSD). Dr. Palmer and his colleagues had previously discovered that inhibiting GLO1 can reduce anxiety-like behaviors in mice, and several studies have hinted that overactivity of GLO1 might also contribute to depression. So the team was curious whether inhibiting the enzyme might be an effective way to treat major depression.

Depression-like behaviors declined within five days of treatment for the animals in which GLO1 had been inhibited. Depression-like behaviors also declined in animals that were given Prozac, but for this group, it took two weeks for the antidepressant to take effect. The scientists say inhibiting GLO1 likely increases the level of a brain chemical called methylglyoxal, which influences neural signaling. They are now working with medicinal chemists to try to develop better GLO1-inhibiting compounds. These could give rise to a new, faster-acting treatment for depression, the team says. With further research, this may become a new strategy for treating depression.

Journal: *Molecular Psychiatry*, June 12, 2017

*Other BBRF grantees on the research team included: 2016 Independent Investigator, 2012 and 2007 Young Investigator Stephanie Dulawa, Ph.D.; and 2016 Young Investigator Marcia J. Ramaker, Ph.D.*
New Technology: Autism, Schizophrenia

Sergiu P. Pasca, M.D.
Stanford University

2017 Independent Investigator
2012 Young Investigator

New Technique Lets Researchers Watch Human Brain Circuits Begin to Wire-Up

Scientists have devised a new system that lets them watch human neurons grown in the lab find and form connections with their signaling partners, an essential process in developing human brains. The processing of “wiring up” is thought to go awry in a number of serious disorders, including autism, epilepsy and schizophrenia— but it’s hard to study.

The new technique, published May 4 in *Nature*, focused on the connections formed by cells called interneurons. These neurons are key components of circuits in the brain’s cerebral cortex. They spend months growing and migrating to their destinations during fetal development, and in the cortex play an indispensable inhibitory, or “braking,” role in communication between neurons.

To make it possible to watch interneurons migrate and begin to wire up with other cells, researchers led by Sergiu P. Pasca, M.D., a 2012 Young Investigator and a 2017 Independent Investigator at Stanford University, developed a system to recreate those processes in a lab dish. Dr. Pasca and his team* first reprogrammed human skin cells to grow into tiny balls of tissue, or brain spheroids, made up of specific types of neurons. They grew spheroids of interneurons and spheroids of the excitatory neurons to which interneurons connect in the brain.

They then fused the two types of spheroids together and watched the cells interact. The interneurons migrated toward cells in the other spheroid, then changed their shape and began forming connections with the excitatory cells.

In an experiment in which the neuron spheroids were derived from cells donated by patients with Timothy syndrome, a genetic form of autism and epilepsy, interneurons did not migrate normally toward the excitatory cells. The cells did migrate properly, however, when they were treated with a drug that blocks a receptor located on the surface of neurons that channels calcium atoms.

Overactivity of these channels is associated with Timothy syndrome. The brain-region specific spheroid system will be a useful model for studying such developmental abnormalities and their role in psychiatric disorders, the scientists say, and to build other brain circuits in a dish.

Journal: *Nature*, July 18, 2017

*Other BBRF grantees on the research team included 1991 Young Investigator Joachim F. Hallmayer, M.D.
Ketamine Rapidly Reduced Suicidal Thoughts in People with Depression

A single dose of ketamine, the anesthetic drug that has been found to have fast-acting antidepressant effects, can significantly reduce suicidal thoughts in patients with depression for up to a week, according to a new analysis.

The findings, published online October 3, 2017 in the American Journal of Psychiatry, come from data on 167 patients who participated in any of 10 previous studies on ketamine's effects. All of the patients studied received a single dose of the drug or a control drug, administered intravenously. This "meta-analysis"—a study of multiple other studies—suggests that the drug not only reduces patients' overall depression; it also appears to be particularly effective at countering suicidal thoughts.

Ketamine’s use as an antidepressant is experimental. Scientists have discovered that low doses of the drug can relieve symptoms of depression within hours. Because ketamine is an old drug and is no longer protected by patent, it is unlikely to be tested in large clinical trials that are required for FDA approval. But researchers note that it can be particularly effective as a rapid antidepressant and can rapidly reduce suicidal thinking. Multiple research efforts are devoted to inventing a ketamine-like drug that has its antidepressant potency but lacks its side effects.

In the current study, researchers* led by 2016 Young Investigator Samuel T. Wilkinson, M.D., at Yale School of Medicine, collected and analyzed data from past studies with the goal of better understanding ketamine's acute effects on patients who are experiencing significant thoughts of suicide.

Participants in the 10 studies included in the new analysis had been diagnosed with a range of psychiatric conditions, including major depression and bipolar disorder. Dr. Wilkinson and his colleagues focused on those participants who reported suicidal thoughts at the time of their trial. They analyzed ketamine's effects upon both suicidal thoughts and scores on standard clinical depression scales, comparing patients’ responses to the drug to those of patients in control groups who received either saline or the anesthetic midazolam as a placebo.

The team found that both suicidal thoughts and overall depression were relieved significantly by ketamine; more than half were free of suicidal thoughts within 24 hours of their treatment. These benefits persisted for up to a week—the latest time point considered in the analysis.

Overall, those whose depression diminished the most experienced the greatest reductions in suicidal thoughts, but the researchers found that ketamine’s effects on suicidal ideation were significant even after controlling for changes in depression severity. This means the drug's effects on this critical aspect of depression may be partially independent from its effects on mood, they say. This will undoubtedly be the focus of future research.


Study Shows Exposure to Bright Light at Midday Reduces Depression in Patients with Bipolar Disorder

Light therapy can be an effective treatment for seasonal depression, but there has been concern that the treatment might induce mania in people with bipolar disorder. Participants in the new trial did not experience any manic episodes, despite daily exposure to bright light.

The study, published in the *American Journal of Psychiatry*, was led by 2013 and 2002 Young Investigator Dorothy K.Y. Sit, M.D., and 1998 Independent Investigator Katherine L. Wisner, M.D., M.S., both at Northwestern University.

Forty-six patients participated in the study. All had been diagnosed with bipolar disorder and were taking medication to manage the illness. At the time of the study, which for most participants began in the fall or winter, all patients were suffering from an episode of moderate depression.

Trial participants were randomly assigned to receive daily treatments of either bright white light or dim red light, with the red light serving as a placebo. Treatments were administered midday, beginning with 15 minutes of light exposure and increasing daily until treatments reached a duration of one hour. The light dose was similar to that used to treat seasonal affective disorder.

After six weeks of treatment, 68 percent of those who received bright light therapy experienced a remission of their depression. In contrast, only 22 percent of those in the placebo group achieved remission.

In an earlier study involving some of the same patients, Dr. Sit and colleagues tested the effects of administering light therapy in the morning, and found that some patients responded with episodes of mania. Timing of light exposure may be critical for managing depression in patients with bipolar disorder, they say.

New Analysis Finds Behavioral Therapy Should Be Combined with Medication to Relieve Severe Anxiety in Children

Both therapy and anti-anxiety medications can help relieve the symptoms of anxiety in children and adolescents. According to new findings reported October 2 in the Journal of Clinical Child & Adolescent Psychology, however, children whose anxiety symptoms are severe likely need both.

The study, led by Michael H. Bloch, M.D., M.S., a 2013 and 2009 Young Investigator and Associate Professor in the Yale Child Study Center, and his Yale colleague Professor Wendy K. Silverman, Ph.D., is a more detailed analysis of a previously reported trial in which children and adolescents with anxiety disorders were randomly assigned to receive either cognitive behavioral therapy (CBT), the antidepressant medication sertraline (Zoloft), a combination of sertraline and CBT, or a placebo.

While behavioral therapy combined with medication was found to be most effective, the groups who received only CBT or sertraline also experienced an overall decline in anxiety symptoms after 12 weeks of treatment.

Based on those findings, which were reported in 2008, many doctors and parents have chosen behavioral therapy alone as a first-line treatment for childhood anxiety. After taking a closer look at the data, however, Dr. Bloch and colleagues, including 2017 Young Investigator Jerome H. Taylor, M.D., at the University of Pennsylvania and 2013 Young Investigator Eli R. Lebowitz, Ph.D., at Yale University, say patients with severe symptoms may be better off beginning with combination therapy.

Of the 448 children and adolescents with generalized, social, or separation anxiety disorders who participated in the trial, 220 had symptoms that were considered severe. The team found that these patients achieved remission during the trial only if they received a combination of sertraline and CBT. For individuals with severe anxiety, remission rates following medication or behavioral therapy alone were similar to those of study participants who received a placebo.

The team also investigated factors that might make children more or less likely to respond to treatment. They found that anxiety was most resistant to treatment in children from lower socioeconomic backgrounds and in those who had been diagnosed with obsessive-compulsive disorder (OCD).

Journal: Journal of Clinical Child & Adolescent Psychology, November 14, 2017
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52 Members of the National Academy of Medicine
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Led by Dr. Herbert Pardes, the founding President of our Scientific Council, the all-volunteer group of pre-eminent mental health researchers review more than 1,200 grant applications each year and select the most promising research ideas with the greatest potential to lead to breakthroughs.

The Scientific Council guides the Foundation to fund creative and impactful research relevant to the whole spectrum of mental health.

We welcome our newest members.

“The reach of the Brain & Behavior Research Foundation’s Grants knows no borders. Research projects are selected by the Foundation’s Scientific Council comprised of leading experts across disciplines in brain and behavior research. The impact of our effort is not only in the development of promising scientists, but also in the focus it brings to the challenge and urgent need of bringing hope and better lives to all those living with mental illness.”

—Dr. Herbert Pardes
CARRIE E. BEARDEN, PH.D. received her Ph.D. in Clinical Psychology from the University of Pennsylvania and joined the UCLA faculty in 2003. Currently, she is a Professor (George and Joanne Miller Family Endowed Term Chair) at the Semel Institute for Neuroscience and Human Behavior, with a joint appointment in the Department of Psychology at UCLA. Dr. Bearden’s research aims to understand neurobiological risk factors for the development of serious mental illness, using converging methods to study cognition and neuroanatomy in clinical high-risk samples (e.g., adolescents with early symptoms of psychosis), and in highly penetrant genetic subtypes of the illness. Her recent work focuses on translational approaches to understanding disrupted brain circuitry in developmental neuropsychiatric disorders, particularly in the context of unique genetic populations. She is the Director of the Staglin Music Festival Center for the Assessment and Prevention of Prodromal States (CAPPS), and is the UCLA Principal Investigator of the multi-site North American Prodromal Longitudinal Study (NAPLS) Consortium. She also co-directs a Neurobehavioral Genetics Training Grant at UCLA, serves on the DSM-V Revision Committee, and on the Editorial Boards of Biological Psychiatry, Neuropsychology and Schizophrenia Bulletin. Dr. Bearden has received numerous awards and honors, both for her research achievements and for teaching and mentorship.

“[I am particularly honored to join the Scientific Council because the Foundation was essential for launching my career as an independent scientist. I am forever grateful for the opportunity that first Young Investigator grant gave me, and am excited to play a larger role in the society that had faith in me ‘way back when.”

• 2005 & 2003 Young Investigator

ANTONELLO BONCI, M.D. joined the National Institutes of Health (NIH) in 2010 as Scientific Director of the National Institute on Drug Abuse (NIDA). Dr. Bonci’s laboratory was the first to demonstrate that drugs of abuse such as cocaine produce long-lasting modifications on the strength of the connections between neurons. This form of cellular memory is called long-term potentiation (LTP). This finding cast a new light on the phenomenon of drug addiction, which may represent a process of maladaptive learning and memory at the cellular level. In turn, this information helped explain why drug taking can often become such a long-lasting phenomenon. Subsequently, his work has used a combination of electrophysiology, optogenetic, molecular and behavioral procedures to keep on studying the basic cellular mechanisms and circuits underlying stress, reward and substance use disorders. His lab is currently developing an optogenetic-based treatment against cocaine use disorders, by using a non-invasive technique called transcranial magnetic stimulation.

“I’m honored to serve the Foundation because I’ve admired for many years the Foundation’s extraordinary work and commitment toward helping scientists.”

• 2004 Distinguished Investigator

EDWARD THOMAS BULLMORE, MB, PH.D., FRCP, FRCPSYCH, FMEDSCI trained in medicine at the University of Oxford and St. Bartholomew’s Hospital, London; then in psychiatry at the Bethlem Royal & Maudsley Hospital, London. He moved to Cambridge as Professor of Psychiatry in 1999 and is currently Scientific Director of the Wolfson Brain Imaging Centre, and Head of the Department of Psychiatry, in the University. He is also an honorary Consultant Psychiatrist and Director of R&D in Cambridgeshire & Peterborough Foundation NHS Trust; and, since 2005, he has worked half-time for GlaxoSmithKline, currently focusing on immuno-psychiatry. He has published more than 500 scientific papers and his work on brain network science and brain imaging has been highly cited. He has been elected a Fellow of the Royal College of Physicians, the Royal College of Psychiatrists, and the Academy of Medical Sciences.

“I joined the Council because I believe in the mission of BBRF, and think BBRF does a great job in funding mental health research that is generally under-funded in proportion to the level of unmet clinical need. I was attracted to serve alongside the outstanding clinicians and scientists already on Council.”

The Foundation is a driving force in advancing the understanding of mental illness, and we are able to do that thanks to the generosity of our donors and the dedication of our Scientific Council members. Over the past 30 years, they have reviewed more than 25,000 grant applications.”

—Dr. Jeffrey Borenstein
TYRONE D. CANNON, PH.D. is the Clark L. Hull Professor of Psychology and Professor of Psychiatry at Yale University. Dr. Cannon earned his bachelor's degree at Dartmouth College (1985) and his doctoral degree at the University of Southern California (1990). He took his first academic appointment in the Department of Psychology at the University of Pennsylvania, where he advanced to Associate Professor. He joined the faculty at UCLA in 1999 as Professor of Psychology and Psychiatry and Biobehavioral Sciences, before moving to his current position at Yale in 2012. Dr. Cannon's research addresses the interplay between psychological-level phenomena and neurobiological mechanisms as they relate to disturbances of perception, belief, motivation, and emotional processing in people with mental illness, principally schizophrenia. A primary aim of his work is to identify mechanisms underlying the emergence of psychosis during adolescence and early adulthood and to develop effective intervention and prevention strategies targeting these mechanisms.

"I agreed to join the Scientific Council because I am committed to the field of psychiatric disorders and to the development and promotion of junior investigators, and the BBRF contributes substantially to these goals through its research awards programs."

- 2006 Distinguished Investigator
- 1997 Independent Investigator

ZAFIRIS J. DASKALAKIS, M.D., PH.D., FRCPC is a Professor of Psychiatry, Temerty Chair in Therapeutic Brain Intervention and Chief of the Mood and Anxiety Division at CAMH. The Temerty Centre uses magnetic brain stimulation to study the role of cortical inhibition, plasticity and connectivity as potential pathophysiological mechanisms in schizophrenia, depression and obsessive compulsive disorder. Dr. Daskalakis also conducts treatment studies using repetitive transcranial magnetic brain stimulation (rTMS), magnetic seizure therapy (MST) and electroconvulsive therapy (ECT) for resistant symptoms in these disorders. He has received several national and international awards and distinctions including the Samarthji Lal Award in Mental Health Research from the Graham Boeckh Foundation for the top mid-career neuropsychopharmacology researcher in Canada in 2013. He also holds or has held NIMH and CIHR peer-reviewed funding and has also mentored numerous BBRF Young Investigator awardees. Finally, he has over 290 peer-reviewed publications, books and book chapters and is an editorial board member for Biological Psychiatry and an Associate Editor for Clinical Neurophysiology.

"The Brain & Behavior Research Foundation is one of the most coveted and valued awards for any investigator in the field of psychiatry and neuroscience. The Foundation’s impact on our field is remarkable and as a previous award winner, there is no greater privilege than to be able to reciprocate the Foundation’s generous support by serving on the Scientific Council with some of the greatest luminaries in our field."

- 1999 & 1989 Young Investigator
- 2008 Independent Investigator
- 2006 & 2004 Young Investigator

KELVIN LIM, M.D., holds the Drs. T. J. and Ella M. Arneson Land-Grant Chair in Human Behavior at the University of Minnesota where he is a Professor of Psychiatry and Vice Chair for Research. Dr. Lim began his undergraduate work at the Massachusetts Institute of Technology, completing his Bachelor and M.D. degrees at Johns Hopkins University. He completed a psychiatry residency and fellowship in neuroimaging at Stanford University where he also served on the faculty in the Department of Psychiatry. He joined the University of Minnesota in 2001.

"I am honored to join the Foundation's Scientific Council. The Foundation serves a critical role in launching new investigators and catalyzing new research ideas. I know this first hand; my first grant was a Young Investigator Award which was critical to launching my research career. I am delighted to be able to directly support the mission of the Foundation."

- 2008 Independent Investigator
- 2006 & 2004 Young Investigator
STEPHEN MAREN, PH.D. is the Claude H. Everett, ’47 Jr. Chair of Liberal Arts, Professor of Psychology, and Presidential Impact Fellow at Texas A&M University. He is also a member of the Texas A&M University Institute for Neuroscience. Dr. Maren’s research seeks to understand the neural basis of anxiety disorders and post-traumatic stress disorder (PTSD). His research on the neurobiology of Pavlovian fear conditioning and extinction in animals has revealed interactions between a triad of interconnected brain areas, including the hippocampus, amygdala, and prefrontal cortex that are essential for the regulation of emotional memory. Dr. Maren is a recipient of the American Psychological Association (APA) Distinguished Scientific Award for an Early Career Contribution to Psychology (2001) and the D. O. Hebb Distinguished Scientific Contributions Award (2017). He is also a Fellow of the American Psychological Association and Association for Psychological Science, Past-President of the Pavlovian Society, and is currently the Editor-in-Chief of Behavioural Brain Research. He has been continuously funded by the NIH since 1995 and is a recipient of the 2015 McKnight Memory and Cognitive Disorders award.

“It is an honor to join the Foundation Scientific Council to help serve its mission to support the most promising research on the biological basis of mental disorders. I have no doubt that these efforts will go a long way to relieve the burden that mental illness levies on afflicted individuals, their families, and society at large.”

VICTORIA RISBROUGH, PH.D. is a Professor of Psychiatry at the University of California San Diego and Associate Director of Neuroscience for the Center of Excellence for Stress and Mental Health for Veterans Affairs. Her research is centered on translational mechanisms and treatments of anxiety and depression particularly trauma-related disorders. She leads a dual preclinical/clinical research program focusing on identifying mechanisms of risk and resilience to post-traumatic stress disorder, as well as development of new pharmacological treatments for these disorders. Her preclinical laboratory uses behavioral, pharmacological, genetic and molecular techniques to identify genetic and circuit mechanisms of enduring trauma responses. Her clinical work examines mechanisms underlying core disruptions of fear learning and inhibition in trauma-related disorders, as well as development of novel pharmacological treatments targeting these mechanisms. She is on the Scientific Council for the Anxiety and Depression Association of America, is a Member of the American College of Neuropsychopharmacology and is Associate Editor of Neurobiology of Stress.

“Receiving a Young Investigator Award was a major catalyst for me to start my career in PTSD research, and has continued to be so for my trainees. The Foundation is a cornerstone for the neuropsychiatric discipline in nurturing the next generation of scientists that are developing innovative and transformative research programs. I am honored to give back to the foundation that gave me ‘a leg up’ and encouragement at a critical juncture of my career.”

LAURA M. ROWLAND, PH.D. is an Associate Professor in the Maryland Psychiatric Research Center (MPRC), Department of Psychiatry at the University of Maryland, School of Medicine. She is the Director of the Chemical Imaging Core, housed within the Neuroimaging Research Program at the MPRC and the co-director of the MPRC post-doctoral training program. Supported by NIMH and BBRF, her research focuses on proton magnetic resonance spectroscopy studies of glutamatergic and GABAergic function and bioenergetic alterations in schizophrenia and related disorders. Her research program integrates these in vivo neurochemistry measures with functional paradigms, multimodal neuroimaging, and translational behavioral neuroscience to better understand perceptual and learning mechanisms, aging/illness course, and novel treatments in schizophrenia and related disorders. In addition to research and training, Dr. Rowland currently serves as co-director for the Young Investigator Program for the International Congress on Schizophrenia Research, Associate Editor for Schizophrenia Bulletin, and a member of an NIH study section.

• 2017 Independent Investigator
• 2006 Young Investigator
• 2006 Young Investigator
VIKAAS SINGH SOHAL, M.D. studied applied mathematics at Harvard and Cambridge before completing his M.D. and Ph.D. degrees at Stanford. During his psychiatry residency at Stanford, he worked with Dr. Karl Deisseroth on some of the first experiments using optogenetics to study the function of brain circuits. In 2010, he started his laboratory at the University of California, San Francisco, which studies how circuits in the prefrontal cortex produce patterns of brain activity that contribute to normal cognition as well as symptoms of psychiatric disorders. Dr. Sohal is a board-certified psychiatrist and continues to see outpatients one half-day each week.

“Finding cures for mental illness is incredibly important to me both personally and professionally. Having an opportunity to work with leaders in the field to identify the most promising new directions is an incredible opportunity for me to contribute to this enterprise and keep informed about the most cutting edge research. I have benefited from a Foundation grant in the past, and it played a critical role in helping my lab get off the ground. So, I now look to helping this organization carry on this essential work.”

- 2009 Young Investigator

FLORA VACCARINO, M.D., PH.D. is the Harris Professor at the Child Study Center and Professor of Neuroscience at Yale University. She directs the Developmental Neurobiology Laboratory and the Program in Neurodevelopment and Regeneration at Yale University. Her lab uses animal models and human brain tissue to unravel the pathophysiology of neuropsychiatric disorders. She pioneered a “cortical organoid” model, where human brain organoids derived from induced pluripotent stem cells (iPSCs) grown in a tri-dimensional culture recapitulate the early development of the human telencephalon. Dr. Vaccarino participates in the PsychENCODE consortium, and her lab is mapping noncoding RNAs and functional DNA elements in human iPSCs, brain organoids and corresponding postmortem fetal human brain specimens. She is part of the Brain Somatic Mosaicism Network, a NIMH-sponsored consortium that studies somatic genomic variation in neurodevelopmental disorders. Dr. Vaccarino is a member of the Kavli Institute for Neuroscience at Yale and Fellow of the American Association for the Advancement of Science.

“I have been helped by the Foundation in the crucial transition between training and independence. I would like to contribute to the continued effort of the Foundation to help meritorious scientists studying the biological basis of neuropsychiatric disorders in their career trajectory.”

- 2011 Distinguished Investigator
- 2003 & 2000 Independent Investigator
- 1994 & 1990 Young Investigator

JEREMY VEESTRA-VANDERWEELE, M.D. is the Mortimer D. Sackler, MD, Professor, and Director of the Division of Child and Adolescent Psychiatry at Columbia University and the New York State Psychiatric Institute. He is a child and adolescent psychiatrist who uses molecular and translational neuroscience research tools in the pursuit of new treatments for autism spectrum disorder and pediatric obsessive compulsive disorder. His molecular laboratory focuses on the serotonin transporter and neuronal glutamate transporter in genetic mouse models with abnormal social or compulsive-like behavior. His translational research program at the NewYork-Presbyterian Hospital Center for Autism and the Developing Brain studies potential treatments for autism spectrum disorder and related genetic syndromes. Dr. Veenstra-VanderWeele’s work has been recognized with a number of awards, including the Blanche Ittelson Award for Research in Child and Adolescent Psychiatry from the American Psychiatric Association.

“I am excited to join the Scientific Council because the Foundation supports early investigators who are often pursuing the first project that is truly their own idea, including support that I was fortunate to have early in my career. This support is critical to launching the next generation of researchers who will tackle the challenging problem of how changes in brain development and function lead to mental illness. This unique niche protects junior investigators during this time when we are in an ongoing funding crisis for scientific research in general and for mental health research (and treatment) in particular.”

- 2010 Young Investigator
What Will Your Legacy Be?

SUPPORT CUTTING EDGE MENTAL HEALTH RESEARCH AND ADVANCEMENTS

Name the Brain & Behavior Research Foundation as a beneficiary of your:

• Will or Trust
• IRA or other retirement plan
• Life Insurance policy

• Charitable Gift Annuity, Remainder Trust, or Lead Trust

Bequests and other planned gifts have a profound and lasting impact on the field of research. Your support enables scientists to pursue new, pioneering ideas to answer important questions or help identify new potentially game-changing targets for treatment in brain and behavior research.

100% of every dollar donated for research is invested in our research grants. Our operating expenses are covered by separate foundation grants.

For more information bbrfoundation.org/plannedgiving | plannedgiving@bbrfoundation.org | Call 800-829-8289
Dr. Jeffrey Borenstein hosts the monthly “Meet the Scientist” webinar series where leading brain and behavior researchers discuss their current work on the latest in new technologies, early intervention strategies, and next-generation therapies for mental illness. Each hour-long webinar includes time for researchers to answer questions posed by the online participants.

These popular complimentary webinars offer the general public access to some of the world's top scientists who present their cutting-edge research that could lead to breakthroughs to alleviate the suffering caused by mental illness. The 2017 season of webinars received more than 22,000 post event views on YouTube. Episodes in the 2017 series are:

**January 10**
Bipolar Disorder: Course and (Possible) Mechanism  
Fritz A. Henn, M.D., Ph.D.  
Icahn School of Medicine at Mount Sinai  
Scientific Council Member  
2014 Colvin Prize winner for Outstanding Achievement in Mood Disorders Research

**February 14**
Prefrontal Cortical Circuits in Schizophrenia: Molecular Vulnerabilities, and Clues for Treatments  
Amy F.T. Arnsten, Ph.D.  
Yale University School of Medicine  
Scientific Council Member  
2015 Goldman-Rakic Prize winner for Cognitive Neuroscience  
2008 Distinguished Investigator  
1998 Independent Investigator

**March 14**
Prevention of Depression  
Michael Berk, Ph.D., MBCH, MMED, FF(Psych)SA, FRANZP  
Deakin University School of Medicine  
2015 Colvin Prize winner for Outstanding Achievement in Mood Disorders Research

**April 11**
Metabolomics and Psychiatric Disease: NextGen Frontiers in Pathophysiology & Treatment  
Lisa A. Pan, M.D.  
University of Pittsburgh School of Medicine  
2012 Young Investigator

**May 9**
Borderline Personality Disorder: Diagnosis, Course, and Treatment  
D. Bradford Reich, M.D.  
McLean Hospital  
2012 Young Investigator

**June 13**
Toward Rapid-Acting Treatments for OCD  
Carolyn Rodriguez, M.D., Ph.D.  
Stanford University, School of Medicine  
2017 Kleiman Prize for Exceptional Clinical Research–Honorable Mention  
2014, 2009 Young Investigator

**July 11**
The Microbiome and Mental Health  
Christopher Lowry, Ph.D.  
University of Colorado, Boulder  
2010, 2007 Young Investigator

**August 8**
Searching for the Seeds of Psychosis  
Dolores Malaspina, M.D., M.S., MSPH  
NYU Langone Medical Center  
2007 Distinguished Investigator  
2001 Independent Investigator  
1995, 1993 Young Investigator

**September 12**
Finding and Fixing Broken Brain Circuits in Depression  
Conor Liston, M.D., Ph.D.  
Weill Cornell Medical College  
2016 Freedman Prize for Exceptional Basic Research–Honorable Mention  
2013 Young Investigator

**October 10**
Psychosocial Interventions for Maternal Depression: Impact on School Age Children  
Holly A. Swartz, M.D.  
University of Pittsburgh  
2006 Young Investigator

**November 14**
Research Updates: Improving Functioning in Schizophrenia  
Stephen R. Marder, M.D.  
University of California, Los Angeles  
2016 Lieber Prize winner for Outstanding Achievement in Schizophrenia Research  
2011 Distinguished Investigator

**December 12**
Robert Lowell: Courage, Genius, and Bipolar Disorder  
Kay Redfield Jamison, Ph.D.  
Johns Hopkins University School of Medicine / Johns Hopkins Hospital  
2010 Productive Lives Award  
2000 Falcone Prize for Outstanding Achievement in Mood Disorders Research
Connecting on Social Media
The Brain & Behavior Research Foundation maintains a strong social media presence in order to communicate and engage with all of our constituents and group members.

360k+
FACEBOOK LIKES

6,000k+
TWITTER FOLLOWERS

400+
YOUTUBE VIDEOS
348k+ VIDEO VIEWS
668k+ MINUTES WATCHED

314%
INCREASE IN FOLLOWERS FOR LINKEDIN PAGE IN 2017

Getting the Word Out: Brain & Behavior Research Foundation In the News

January 11, 2017
HEALTH DAY
‘Stress Ball’ in Your Brain May Be Key to Heart Risks

February 15, 2017
SELF
Ricki Lake’s Ex-Husband Died After Struggling With Bipolar Disorder

May 1, 2017
THE NEW YORK TIMES
Helping Children Cope with a Parent’s Death—Letter to the Editor

May 9, 2017
SCIENTIFIC AMERICAN
A Shot Against Post-Traumatic Stress Disorder

June 20, 2017
US NEWS AND WORLD REPORT
How to Help Someone Else Who Has Depression

June 26, 2017
FOX NEWS HEALTH
PTSD: What Is It and How to Spot It?

November 2017
INSIDE PHILANTHROPY
“Proof of Concept.” How this Funder Backs Young Researchers on Mental Health

December 10, 2017
THE HILL
We Need to Do More Than Just Talk About Mental Illness

December 20, 2017
WIRED
The Best Places to Donate for Last Minute Science Gifts
SINCE 1987, THE FOUNDATION HAS AWARDED MORE THAN $380 MILLION TO FUND MORE THAN 5,500 GRANTS TO MORE THAN 4,500 LEADING SCIENTISTS AROUND THE WORLD.

Our Grants support a broad range of the best ideas in brain research. Funding is focused on four priority areas to better understand and treat mental illness, aiming toward prevention and ultimately cures:

**BASIC RESEARCH**
To understand what happens in the brain to cause mental illness.

**NEW TECHNOLOGIES**
To advance or create new ways of studying and understanding the brain.

**DIAGNOSTIC TOOLS/EARLY INTERVENTION**
To recognize early signs of mental illness and treat as early as possible.

**NEXT GENERATION THERAPIES**
To reduce symptoms of mental illness and retrain the brain.

**DISTINGUISHED INVESTIGATOR GRANTS**
- Enable outstanding scientists to pursue new, cutting edge ideas with the greatest potential for breakthroughs.
  - $100,000 for one year.
  - More than $41 million funded.

**INDEPENDENT INVESTIGATOR GRANTS**
- Initiated in 1995.
- Support mid-career scientists during the critical period between initiation of research and receipt of sustained funding.
  - Up to $100,000 for two years.
  - More than $81 million funded.

**YOUNG INVESTIGATOR GRANTS**
- Initiated in 1987.
- Help researchers launch careers in neuroscience and psychiatry and gather pilot data to apply for larger federal and university grants.
  - Up to $70,000 for two years.
  - More than $257 million funded.

BBRF Grant recipients have gone on to receive more than $3.8 billion in additional research funding in next stage NIMH and NIH grants.

No other organization outside of the federal government has funded the number of mental health research grants that the Foundation has—or been responsible for more breakthroughs in the field.

An independent measure of the success of our grants is a 2016 RAND Europe analysis of the global mental health research funding landscape over the previous five years. This report found that we are the top non-government mental health research funder mentioned in published articles.
Distinguished Investigators

140 Applications  |  17 Grants Approved  |  $1.7 Million Awarded

The Distinguished Investigator Grants provide support for experienced investigators (full professor or equivalent) conducting neurobiological and behavioral research. One-year grants of $100,000 each are provided for established scientists pursuing particularly innovative project ideas.

Distinguished Investigator Grants fund talented, established scientists with a record of outstanding research accomplishments. These research projects might provide new approaches to understanding or treating severe mental illness. If successful, the grants could result in later funding from other sources. These grants are among the most competitive in mental health research and demonstrate the power of investigator-initiated research for bringing out new and creative ideas.

“As funds for research from the National Institutes of Health have declined by 20 percent over the past decade, the Foundation’s Distinguished Investigator program has become extraordinarily important for the field and its potential to help severe mental illness. This year’s Distinguished Investigators use a remarkable range of methodologies to sharpen current treatments and define potential new targets, including previously unstudied or understudied neuroregulators, interactions and circuits, using newer and more precise methods and improved psychosocial approaches.

We were impressed by the variety of new approaches, which could prove helpful or even transformative, and would supported by this seed capital. These include studies focusing on the immune system; looking at pre-birth events and stressors of all types; and examining large important databases for new clues.”

JACK D. BARCHAS, M.D.
Chair, Distinguished Investigator Selection Committee
Founding Member of the Foundation's Scientific Council
Chair and Barklie McKee Henry Professor of Psychiatry
Weill Cornell Medical College
Psychiatrist-in-Chief
Weill Cornell Medical Center, NewYork-Presbyterian Hospital
and Payne Whitney Clinic
“The uncertainty surrounding future prospects for government funding reinforces the need to support the important work of these scientists, whose research will help us better understand, prevent, diagnose and treat psychiatric illnesses. The generosity of our donors makes these awards possible, and we are grateful to the members of our Scientific Council, who volunteer their time to select the most impactful research.”

—Dr. Jeffrey Borenstein

Independent Investigators

304 Applications  |  40 Grants Approved  |  $3.9 Million Awarded

“This year’s Independent Investigators will explore many new and exciting potential approaches to the therapeutics of serious mental disorders, and a better understanding of their molecular and neuro-biological underpinnings, providing additional new targets for treatment.”

—Dr. Robert Post

Ground-breaking scientists already proven in their field receive the Independent Investigator Grant. These scientists seek to produce experimental results that will put them in a position to initiate major research programs. This support comes at the critical middle period in the investigators’ careers – the phase between the initiation of research and the receipt of sustained funding. With proven success as highly productive scientists, they seek to make clinically relevant advances in the study and treatment of a range of brain and behavior disorders.

Independent Investigator Grants provide each scientist with $50,000 per year for up to two years to support their work during the critical period between the start of the research and the receipt of sustained funding.

This year’s 40 Independent Investigator grantees represent an exciting group of basic and clinical proposals which should make major contributions to the better understanding and treatment of serious psychiatric illness. 304 grants were reviewed by 60 members of the Scientific Council.

ROBERT M. POST, M.D., PH.D.
Chair, Independent Investigator Selection Committee
Foundation Scientific Council Member
Head, Bipolar Collaborative Network
Professor of Psychiatry
George Washington School of Medicine
**Young Investigators**

864 Applications  |  196 Grants Approved  |  $13.6 Million Awarded

BBRF Young Investigator Grants cover a broad spectrum of mental illnesses and serve as catalysts for additional funding, providing researchers with “proof of concept” for their work. The Foundation awarded a total of $13.6 million to its 2017 Young Investigators, strengthening its investment in the most promising ideas to lead advancements in understanding and treating brain and behavior disorders.

Young Investigator Grants provide each scientist with $35,000 per year for two years totaling $70,000 to enable promising investigators to either extend research fellowship training or begin careers as independent research faculty. Every Young Investigator gets support and guidance from a scientific mentor designated by the Scientific Council.

“The Young Investigator program represents the intersection of cutting-edge brain and behavior research and innovation. The grants enable outstanding scientists to pursue bold new ideas to answer important questions or help identify potentially game-changing targets for treatment. The awards function as seed funding for new directions which would otherwise be highly unlikely.”

—Herbert Pardes, M.D. 
President of the Scientific Council

**JUDY M. FORD, PH.D.**
Co-Chair of the Young Investigator Grant Selection Committee
Professor, Department of Psychiatry
University of California, San Francisco
2003 Independent Investigator
Foundation Scientific Council Member

“These grants to young investigators are the mother’s milk for launching a career in research. They come at a time when these young researchers are starting their own programs of research, and they need both the recognition and funding that these YI awards provide. The applicants, and their proposals this past year [2017], were outstanding. It was often difficult to choose the best of the best.”

**SUZANNE N. HABER, PH.D.**
Co-Chair of the Young Investigator Grant Selection Committee
Professor, Department of Pharmacology and Physiology
University of Rochester School of Medicine and Dentistry
2011 Distinguished Investigator
Foundation Scientific Council Member

“This year we had an especially outstanding group of Young Investigator applicants. It’s exciting to be able to help these young stars reach their goals.”
2017 GRANTS BY ILLNESS

**ADDICTION**

**BRIAN A. ANDERSON, PH.D.**
Texas A&M University
Young Investigator Grant
Basic Research

**KASIA MARIA BIESZCZAD, PH.D.**
Rutgers University
Young Investigator Grant
Basic Research

**SHAUNNA L. CLARK, PH.D.**
Virginia Commonwealth University
Young Investigator Grant
Basic Research

**LINDSAY MITCHELL DE BIASE, PH.D.**
National Institute on Drug Abuse (NIDA/NIH)
Young Investigator Grant
Basic Research

**TRISTEN KIMIKO INAGAKI, PH.D.**
University of Pittsburgh
Young Investigator Grant
Next-Generation Therapies

**JEE HYUN KIM, PH.D.**
Florey Neuroscience Institutes, University of Melbourne, Australia
Young Investigator Grant
Basic Research

**DREW DONOVAN KIRALY, M.D., PH.D.**
Icahn School of Medicine at Mount Sinai
Young Investigator Grant
Basic Research

**XIAOFAN LI, PH.D.**
Icahn School of Medicine at Mount Sinai
Young Investigator Grant
Basic Research

**TIFFANY LOVE, PH.D.**
University of Utah
Young Investigator Grant
Basic Research

**KATE MCDONNELL-DOWLING, PH.D.**
Tufts University
Young Investigator Grant
Basic Research

**ELIZABETH GENEVIEVE MIETLICKI-BAASE, PH.D.**
State University of New York (SUNY), University of Buffalo
Young Investigator Grant
Basic Research

**HYUNG WOOK NAM, PH.D.**
Louisiana State University Health Sciences Center
Young Investigator Grant
Diagnostic Tools/Early Intervention

**JAMES MARK OTIS, PH.D.**
University of North Carolina at Chapel Hill
Young Investigator Grant
Basic Research

**MICHAEL P. SADDORIS, PH.D.**
University of Colorado, Boulder
Young Investigator Grant
Basic Research

**FAIR MACLAREN VASSOLER, PH.D.**
Tufts University
Young Investigator Grant
Next-Generation Therapies

**LEORA YENIKOFF, PH.D.**
City University of New York, College of Staten Island
Young Investigator Grant
Basic Research

**PANOS ZANOS, PH.D.**
University of Maryland, Baltimore
Young Investigator Grant
Next-Generation Therapies

**ATTENTION–DEFICIT HYPERACTIVITY DISORDER (ADHD)**

**MICHELLIE MARIE DOWNES, PH.D.**
University College Dublin, Ireland
Young Investigator Grant
Diagnostic Tools/Early Intervention

**CLAUDIA AMORIM LOPES, PH.D.**
Harvard Medical School
Young Investigator Grant
New Technologies

**SARAH ELIZABETH MEDLAND, PH.D.**
QIMR Berghofer Medical Research Institute, Australia
Independent Investigator Grant
Basic Research

**TIMOTHY SPELLMAN, PH.D.**
Weill Cornell Medical College
Young Investigator Grant
Basic Research

**ANXIETY**

**GAURAV BEDSE, PH.D.**
Vanderbilt University Medical Center
Young Investigator Grant
Next-Generation Therapies

**KEVIN THOMAS BEIER, PH.D.**
Stanford University
Young Investigator Grant
Basic Research
LAURA BEVILACQUA, M.D., PH.D.  
Icahn School of Medicine at Mount Sinai  
Young Investigator Grant  
Next-Generation Therapies

NADEEKA NIRUPAMA DISSANAYAKA, PH.D.  
University of Queensland, Australia  
Young Investigator Grant  
Next-Generation Therapies

ORIEL FELDMANHALL, PH.D.  
Brown University  
Young Investigator Grant  
Basic Research

KATHRYN M. HARPER, PH.D.  
University of North Carolina at Chapel Hill  
Young Investigator Grant  
Basic Research

JENNIFER ANN HONEYCUTT, PH.D.  
Northeastern University  
Young Investigator Grant  
Basic Research

ZHENG JIANG, PH.D.  
Johns Hopkins University  
Young Investigator Grant  
Basic Research

ANTONIA N. KACZKURKIN, PH.D.  
University of Pennsylvania  
Young Investigator Grant  
Diagnostic Tools/Early Intervention

JOANNA SPENCER-SEGAL, M.D., PH.D.  
University of Michigan  
Young Investigator Grant  
Basic Research

CHAD MICHAEL SYLVESTER, M.D., PH.D.  
Washington University  
Young Investigator Grant  
Basic Research

AUTISM / AUTISM SPECTRUM DISORDER (ASD)

KONSTANTINOS AMPATZIS, PH.D.  
Karolinska Institute, Sweden  
Young Investigator Grant  
Basic Research

ADRIAAN JOHANNES BOENDER, PH.D.  
Emory University  
Young Investigator Grant  
Basic Research

LUKE BURY, PH.D.  
Case Western Reserve University  
Young Investigator Grant  
New Technologies

CHRISTINA GROSS, PH.D.  
Cincinnati Children's Hospital Medical Center, University of Cincinnati  
Independent Investigator Grant  
Basic Research

DHANANJAY HUILGOL, PH.D.  
Cold Spring Harbor Laboratory  
Young Investigator Grant  
Basic Research

BIPOLAR DISORDER

CYNTHIA V. CALKIN, M.D.  
Dalhousie University, Canada  
Independent Investigator Grant  
Basic Research

STEFANO COMAI, PH.D.  
San Raffaele Vita-Salute University, Italy  
Young Investigator Grant  
Next-Generation Therapies

MICHELE PELCOVITZ, PH.D.  
Weill Cornell Medical College  
Young Investigator Grant  
Next-Generation Therapies

JOHANNES KOHL, PH.D.  
Harvard University  
Young Investigator Grant  
Basic Research

INDIRA MENDEZ-DAVID, PH.D.  
Université Paris-Sud 11, France  
Young Investigator Grant  
Basic Research

JUDITH K. MORGAN, PH.D.  
University of Pittsburgh  
Young Investigator Grant  
Basic Research

HUI-CHEN LU, PH.D.  
George Washington University  
Young Investigator Grant  
Basic Research

GRAINNE M. MCALONAN, M.B.B.S., PH.D.  
Institute of Psychiatry/King’s College London, UK-England  
Independent Investigator Grant  
Next-Generation Therapies

TERUNAGA NAKAGAWA, M.D., PH.D.  
Vanderbilt University  
Independent Investigator Grant  
Basic Research

ANNABELLA PIGNATARO, PH.D.  
IRCCS Fondazione Santa Lucia, Italy  
Young Investigator Grant  
Basic Research

RANDALL JEFFREY PLATT, PH.D.  
Washington University School of Medicine  
Young Investigator Grant  
Basic Research

EUNICE Y. YUEN, PH.D.  
Yale University  
Young Investigator Grant  
Basic Research

NATHANIEL SNYDER, PH.D., M.P.H.  
A.J. Drexel Autism Institute  
Young Investigator Grant  
Basic Research

CHRISTINA GROSS, PH.D.  
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Basic Research

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Next-Generation Therapies

JASON J. YI, PH.D.  
Washington University School of Medicine  
Young Investigator Grant  
Basic Research

ANABELLA PIGNATARO, PH.D.  
IRCCS Fondazione Santa Lucia, Italy  
Young Investigator Grant  
Basic Research

LIPING HOU, PH.D.  
National Institute of Environmental Health Sciences  
Young Investigator Grant  
Basic Research

HUI-CHEN LU, PH.D.  
George Washington University  
Young Investigator Grant  
Basic Research
KOKO ISHIZUKA, M.D., PH.D.
Johns Hopkins University
Independent Investigator Grant
Basic Research

PO-HSIU KUO, PH.D.
National Taiwan University, Taiwan
Independent Investigator Grant
Basic Research

BRADLEY JOHN MACINTOSH, PH.D.
Sunnybrook Health Sciences Centre,
University of Toronto, Canada
Independent Investigator Grant
Diagnostic Tools/Early Intervention

CHRISTIAN GEORG SCHUETZ, M.D., PH.D., M.P.H.
University of British Columbia, Canada
Independent Investigator Grant
Next-Generation Therapies

BORDERLINE PERSONALITY DISORDER

KEITH BUSH, PH.D.
University of Arkansas for Medical Sciences
Young Investigator Grant
New Technologies

DEPRESSION

FLORENT BARTHAS, PH.D.
Yale University
Young Investigator Grant
Basic Research

ALEXANDRE BONNIN, PH.D.
University of Southern California
Independent Investigator Grant
Basic Research

TJEERD WILLEM BOONSTRA, PH.D.
University of New South Wales, Australia
Young Investigator Grant
Next-Generation Therapies

PATRICIA A. BRENNAN, PH.D.
Emory University
Distinguished Investigator
Diagnostic Tools/Early Intervention

JULIA BRILL, PH.D.
Johns Hopkins University
Young Investigator Grant
Basic Research

DAVID BULKIN, PH.D.
Cornell University
Young Investigator Grant
Basic Research

LAUREN M. BYLSMA, PH.D.
University of Pittsburgh
Young Investigator Grant
Basic Research

MAITHE AURURA CARVALHO, PH.D.
University of Toronto, Canada
Young Investigator Grant
Basic Research

BASAR CENIK, M.D., PH.D.
University of Texas Southwestern Medical Center at Dallas
Young Investigator Grant
Diagnostic Tools/Early Intervention

GLORIA CHOI, PH.D.
Massachusetts Institute of Technology
Independent Investigator Grant
Basic Research

ALEXANDRA ELYSE D’AGOSTINO, PH.D.
Stony Brook University School of Medicine
Young Investigator Grant
Next-Generation Therapies

ROBERT DANTZER, DVM, PH.D.
University of Texas MD Anderson Cancer Center
Distinguished Investigator
Basic Research

ELENA GOETZ DAVIS, PH.D.
Stanford University
Young Investigator Grant
Diagnostic Tools/Early Intervention

ZHI-DE DENG, PH.D.
National Institute of Environmental Health Sciences (NIEHS/NIH)
Young Investigator Grant
Next-Generation Therapies

GABRIEL S. DICHTER, PH.D.
University of North Carolina at Chapel Hill
Independent Investigator Grant
Basic Research

SAM EMAMINEJAD, PH.D.
University of California, Los Angeles
Young Investigator Grant
Diagnostic Tools/Early Intervention

LORNA ALICE FARRELLY, PH.D.
Icahn School of Medicine at Mount Sinai
Young Investigator Grant
Basic Research

TRACY LEE GILMAN, PH.D.
University of Texas Health Science Center at San Antonio
Young Investigator Grant
Basic Research

RONALD GERARDO GARCIA GOMEZ, M.D., PH.D.
Brigham and Women’s Hospital and Harvard University
Young Investigator Grant
Next-Generation Therapies

STEPHANIE MARIE GORKA, PH.D.
University of Illinois at Chicago
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Diagnostic Tools/Early Intervention

ELSELINE HOEKZEMA, PH.D.
Leiden University, Netherlands
Young Investigator Grant
Diagnostic Tools/Early Intervention

RAQUEL INIESTA, PH.D.
King’s College London, UK
Young Investigator Grant
Diagnostic Tools/Early Intervention

ORNAL Issler, PH.D.
Icahn School of Medicine at Mount Sinai
Young Investigator Grant
Basic Research

KRISTEN C. JACOBSON, PH.D.
University of Chicago
Independent Investigator Grant
Basic Research
CHUNG SUB KIM, PH.D.
University of Texas at Austin
Young Investigator Grant
Basic Research

PILYOUNG KIM, PH.D.
University of Denver
Independent Investigator Grant
Basic Research

DAPHNE JENNIFER KORCZAK, M.D., MSC
University of Toronto, Canada
Young Investigator Grant
Basic Research

BENOIT LABONTÉ, PH.D.
Laval University, Canada
Young Investigator Grant
Basic Research

JACOPO LAMANNA, PH.D.
San Raffaele Vita-Salute University, Italy
Young Investigator Grant
Basic Research

MATTHEW S. MILAK, M.D.
Columbia University
Independent Investigator Grant
Next-Generation Therapies

ANDREW H. MILLER, M.D.
Emory University
Distinguished Investigator
Diagnostic Tools/Early Intervention

JOSE A. MORON-CONCEPCIÓN, PH.D.
Washington University
Independent Investigator Grant
Basic Research

TALIA NEWCOMBE LERNER, PH.D.
Northwestern University
Young Investigator Grant
Basic Research

THOMAS M. OLINO, PH.D.
Temple University
Independent Investigator Grant
Basic Research

CARMINE MARIA PARIANTE, M.D., PH.D.
King’s College London, UK
Distinguished Investigator
Basic Research

DIEGO A. PIZZAGALLI, PH.D.
McLean Hospital and Harvard University
Distinguished Investigator
Basic Research

FLORIAN PLATTNER, PH.D.
University of Texas Southwestern Medical Center at Dallas
Young Investigator Grant
Basic Research

CHRISTOPHE PROULX, PH.D.
Laval University, Canada
Young Investigator Grant
Basic Research

THOMAS L. RODEBAUGH, PH.D.
Washington University
Independent Investigator Grant
Diagnostic Tools/Early Intervention

FRANCISCO ROMO-NAVA, PH.D.
University of Cincinnati
Young Investigator Grant
Next-Generation Therapies

JOHN PATRICK RYAN, PH.D.
University of Pittsburgh
Young Investigator Grant
Basic Research

SURJO RAPHAEL SOEKADAR, M.D.
University of Tubingen, Germany
Young Investigator Grant
Next-Generation Therapies

JONATHAN P. STANGE, PH.D.
University of Illinois at Chicago
Young Investigator Grant
Diagnostic Tools/Early Intervention

HANNA MARIA VAN LOO, M.D., PH.D.
University of Groningen, Netherlands
Young Investigator Grant
Diagnostic Tools/Early Intervention

CRYSTAL VERGARA-LOPEZ, PH.D.
The Miriam Hospital, Brown University
Young Investigator Grant
Basic Research

VERONIKA VILGIS, PH.D.
University of California, Davis
Young Investigator Grant
Basic Research

EATING DISORDER

CYNTHIA MARIE BULIK, PH.D.
University of North Carolina at Chapel Hill
Distinguished Investigator
Basic Research

JASON MATTHEW LAVENDER, PH.D.
University of California, San Diego
Young Investigator Grant
Basic Research

MENTAL ILLNESS–GENERAL

MEGAN CROW, PH.D.
Cold Spring Harbor Laboratory
Young Investigator Grant
Basic Research

STEVEN WILLEM FLAVELL, PH.D.
Massachusetts Institute of Technology
Young Investigator Grant
Basic Research

JULIJANA GJORGJIEVA, PH.D.
Max-Planck Institute of Brain Research, Germany
Young Investigator Grant
Basic Research

ELIZABETH J. GLOVER, PH.D.
Medical University of South Carolina
Young Investigator Grant
Basic Research

ADAM JOHN HARRINGTON, PH.D.
Medical University of South Carolina
Young Investigator Grant
Basic Research

KOICHI HASHIKAWA, PH.D.
New York University School of Medicine
Young Investigator Grant
Basic Research
BRYAN M. HOOKS, PH.D.  
University of Pittsburgh  
Young Investigator Grant  
Basic Research

ELIZABETH DIANA KIRBY, PH.D.  
Ohio State University  
Young Investigator Grant  
Basic Research

LEE LOVEJOY, M.D., PH.D.  
Columbia University  
Young Investigator Grant  
Basic Research

MIKAEL LARS LUNDQVIST, PH.D.  
Massachusetts Institute of Technology  
Young Investigator Grant  
Basic Research

THOMAS HATTON MCCOY, M.D.  
Massachusetts General Hospital/  
Harvard University  
Young Investigator Grant  
Diagnostic Tools/Early Intervention

ANDREA MELE, PH.D.  
Universita’ di Roma La Sapienza, Italy  
Independent Investigator Grant  
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ERIC MATTHEW MORROW, M.D., PH.D.  
Brown University  
Independent Investigator Grant  
Basic Research

FRANCESCA MARIA PIA NOTARANGELO, PH.D.  
University of Maryland, Baltimore  
Young Investigator Grant  
Basic Research

MARCO ONORATI, PH.D.  
University of Italy, Pisa, Italy  
Young Investigator Grant  
Basic Research

IRVING MICHAEL RETI, M.B.B.S.  
Johns Hopkins University  
Independent Investigator Grant  
Next-Generation Therapies

MARTIN SCHAIN, PH.D.  
Columbia University  
Young Investigator Grant  
New Technologies

ELLIO H. SMITH, PH.D.  
Columbia University  
Young Investigator Grant  
Basic Research

RYAN T. STRACHAN, PH.D.  
University of North Carolina at Chapel Hill  
Young Investigator Grant  
Next-Generation Therapies

RODRIGO SUAREZ, PH.D.  
University of Queensland, Australia  
Young Investigator Grant  
Basic Research

ELSA SUBERBIELLE, D.V.M, PH.D.  
INSERM, France  
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Basic Research

CINZIA VICIDOMINI, PH.D.  
Massachusetts General Hospital,  
Harvard University  
Young Investigator Grant  
Basic Research

KAREN L. WHITEMAN, PH.D., MSW  
Dartmouth Medical School,  
Dartmouth College  
Young Investigator Grant  
Next-Generation Therapies

ANDREA YOUNG, PH.D.  
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Young Investigator Grant  
Diagnostic Tools/Early Intervention

MENTAL ILLNESS–MULTIPLE DISORDERS

BRENT WILLIAM ASRICAN, PH.D.  
University of North Carolina at Chapel Hill  
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Basic Research

ELISABETH B. BINDER, M.D., PH.D.  
Max-Planck Institute of Psychiatry, Germany  
Distinguished Investigator  
Basic Research

STEVE DAVIDSON, PH.D.  
University of Cincinnati  
Young Investigator Grant  
Basic Research

ANNEGRET LEA FALKNER, PH.D.  
New York University  
Young Investigator Grant  
Basic Research

VINCENZO ALESSANDRO GENNARINO, PH.D.  
Baylor College of Medicine  
Young Investigator Grant  
Basic Research

LAURA GERMINI, PH.D.  
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Young Investigator Grant  
Basic Research

OLIVIER GSCHWEND, PH.D.  
New York University  
Young Investigator Grant  
Basic Research

SARAH M. HAIHG, PH.D.  
University of Pittsburgh  
Young Investigator Grant  
Basic Research

KEREN HAROUSH, PH.D.  
Stanford University  
Young Investigator Grant  
Basic Research

MATTHEW CARL HEARING, PH.D.  
Marquette University  
Young Investigator Grant  
Basic Research

SARAH RACHEL HEILBRONNER, PH.D.  
University of Rochester  
Young Investigator Grant  
Basic Research

LAURA MARIANNE HUCKINS, PH.D.  
Icahn School of Medicine at Mount Sinai  
Young Investigator Grant  
Basic Research

SOONJO HWANG, M.D.  
University of Nebraska Medical Center  
Young Investigator Grant  
Next-Generation Therapies
LUKE WILLIAMSON HYDE, PH.D.
University of Michigan
Young Investigator Grant
Basic Research

EMILY G. JACOBS, PH.D.
University of California, Santa Barbara
Young Investigator Grant
Basic Research

SUN-HONG KIM, PH.D.
Johns Hopkins University
Young Investigator Grant
Basic Research

EMMA EILEEN MARY KNOWLES, PH.D.
Yale University
Young Investigator Grant
Basic Research

ROMAN LIGNEUL, PH.D.
Fundação Champalimaud, Portugal
Young Investigator Grant
Basic Research

QING-SONG LIU, PH.D.
National Institutes of Health
Young Investigator Grant
Basic Research

CRISTINA MARQUEZ, PH.D.
Instituto de Neurociencias de Alicante, Universidad Miguel Hernandez, Spain
Young Investigator Grant
Basic Research

NATALIE MATOSIN, PH.D.
Max-Planck Institute of Psychiatry, Germany
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Basic Research

CHRISTIAN MEISEL, M.D., PH.D.
National Institute of Mental Health
Young Investigator Grant
Diagnostic Tools/Early Intervention

JUAN MENA-SEGÖVIA, M.D., PH.D.
Rutgers University
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Basic Research

NATHAN OKERLUND, PH.D.
University of Utah
Young Investigator Grant
Basic Research

CARLOS J. A. B. PANTOJA, M.D., PH.D.
Max Planck Institute of Neurobiology, Germany
Young Investigator Grant
Basic Research

KRISTEN ELIZABETH PLEIL, PH.D.
Weill Cornell Medical College
Young Investigator Grant
Basic Research

GIOVANNI PROVENZANO, PH.D.
University of Trento, Italy
Young Investigator Grant
Basic Research

CANDACE MARIE RAIO, PH.D.
New York University
Young Investigator Grant
Basic Research

PATRICK ELDREDGE ROTHWELL, PH.D.
University of Minnesota
Young Investigator Grant
Next-Generation Therapies

ATSUSHI SAITO, M.D., PH.D.
Johns Hopkins University
Young Investigator Grant
Basic Research

CODY A. SICILIANO, PH.D.
Massachusetts Institute of Technology
Young Investigator Grant
Basic Research

TANYA SIPPY, M.D., PH.D.
New York University
Young Investigator Grant
Basic Research

KATHARINE RACHEL SMITH, PH.D.
University of Colorado, Denver
Young Investigator Grant
Basic Research

MARTA ELAINE SODEN, PH.D.
University of Washington
Young Investigator Grant
Basic Research

JAMES FITZHUGH STURGILL, PH.D.
Cold Spring Harbor Laboratory
Young Investigator Grant
Basic Research

LOURDES FAÑANÁS SAURA, M.D., PH.D.
University of Barcelona, Spain
Distinguished Investigator
Diagnostic Tools/Early Intervention

STEVEN A. SIEGELBAUM, PH.D.
Columbia University
Distinguished Investigator
Basic Research

ZHIBING TAN, M.D., PH.D.
Augusta VA Medical Center,
Georgia Health Sciences University
Young Investigator Grant
Basic Research

JEROME H. TAYLOR, M.D.
Yale University
Young Investigator Grant
Next-Generation Therapies

PAUL MATTHEW THOMPSON, PH.D.
University of Southern California
Distinguished Investigator
Basic Research

JILLIAN LEE WIGGINS, PH.D.
San Diego State University
Young Investigator Grant
Diagnostic Tools/Early Intervention

RALF DIETER WIMMER, PH.D.
New York University
Young Investigator Grant
Basic Research

SUSAN K. WOOD, PH.D.
University of South Carolina
Young Investigator Grant
Basic Research

OBSESSIVE–COMPULSIVE DISORDER (OCD)

THOMAS V. FERNANDEZ, M.D.
Connecticut Mental Health Center,
Yale University
Young Investigator Grant
Basic Research
PSYCHOSIS

ODED KLAVIR, PH.D.
University of Haifa, Israel
Young Investigator Grant
Basic Research

CLAUDIA M. HAASE, PH.D.
Northwestern University
Young Investigator Grant
Basic Research

MANREENA KAUR, PH.D.
Monash University, Australia
Young Investigator Grant
Next-Generation Therapies

DEEPAK KUMAR SARPAL, M.D.
University of Pittsburgh
Young Investigator Grant
Basic Research

GISELA SUGRANYES, M.D., PH.D.
Institut D’investigacions Biomèdiques August Pi i Sunyer, Spain
Young Investigator Grant
Basic Research

LAURI TUOMINEN, M.D., PH.D.
Massachusetts General Hospital,
Harvard University
Young Investigator Grant
Basic Research

POST–TRAUMATIC STRESS DISORDER (PTSD)

ROEE ADMON, PH.D.
University of Haifa, Israel
Young Investigator Grant
Basic Research

TIMOTHY WILLIAM BREDY, PH.D.
University of Queensland, Australia
Independent Investigator Grant
Basic Research

JENNIFER R. FANNING, PH.D.
University of Chicago
Young Investigator Grant
Basic Research

DAMION GRASSO, PH.D.
University of Connecticut and
Hartford Hospital
Young Investigator Grant
Basic Research

BENJAMIN FRIEDRICH GREWE, PH.D.
Brain Research Institute of the
University of Zurich, Switzerland
Young Investigator Grant
Basic Research

KATHERINA HAUNER, PH.D.
Northwestern University
Young Investigator Grant
Next-Generation Therapies

THU HUYNH, PH.D.
Weill Cornell Medical College
Young Investigator Grant
Basic Research

JONATHAN LEVY, PH.D.
Interdisciplinary Center,
Herzliya (IDC), Israel
Young Investigator Grant
Basic Research

PERSPECTIVES ON NEXT-GENERATION THERAPIES

STEPHEN MAREN, PH.D.
Texas A&M University
Distinguished Investigator
Basic Research

PIA-KELSEY O’NEILL, PH.D.
Columbia University
Young Investigator Grant
Basic Research

JENNIFER BROOKE TREWEEK, PH.D.
California Institute of Technology
Young Investigator Grant
Basic Research

SCHIZOPHRENIA

JENNIFER BROOKE TREWEEK, PH.D.
California Institute of Technology
Young Investigator Grant
Basic Research

TRACY ANN BARBOUR, M.D.
Massachusetts General Hospital
Young Investigator Grant
Basic Research

MERA SUN BARR, PH.D.
Centre for Addiction and Mental Health
at the University of Toronto, Canada
Young Investigator Grant
Diagnostic Tools/Early Intervention

CLARE L. BEASLEY, PH.D.
University of British Columbia, Canada
Independent Investigator Grant
Diagnostic Tools/Early Intervention

HADAR BEN-YOAV, PH.D.
Ben-Gurion University of the Negev, Israel
Young Investigator Grant
New Technologies

JAMES ANDREW BOURNE, PH.D.
Monash University, Australia
Independent Investigator Grant
Basic Research

MADDALENA DELMA CAIATI, M.D., PH.D.
Harvard University
Young Investigator Grant
Basic Research
CHRISTIN SCHIFANI, PH.D.
Centre of Addiction and Mental Health, University of Toronto, Canada
Young Investigator Grant
Diagnostic Tools/Early Intervention

JOSEPH JAMES SHAFFER, PH.D.
University of Iowa
Young Investigator Grant
Next-Generation Therapies

PATRICK DAVID SKOSNIK, PH.D.
Yale University
Independent Investigator Grant
Basic Research

DEEPAK PRAKASH SRIVASTAVA, PH.D.
Institute of Psychiatry/King’s College London, UK-England
Independent Investigator Grant
Basic Research

BRYAN ANDREW STRANGE, M.B.B.S., PH.D.
Technical University of Madrid, Spain
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Next-Generation Therapies

PING SU, PH.D.
Centre for Addiction and Mental Health, University of Toronto, Canada
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ROBERT ALAN SWEET, M.D.
University of Pittsburgh
Distinguished Investigator
Basic Research

DUJE TADIN, PH.D.
University of Rochester
Independent Investigator Grant
Basic Research

HALENE TOBIAS, M.D., PH.D.
Icahn School of Medicine at Mount Sinai
Young Investigator Grant
Basic Research

JOHN B. TOROUS, M.D.
Beth Israel Deaconess Medical Center, Harvard University
Young Investigator Grant
Diagnostic Tools/Early Intervention

ELISABET VILELLA, PH.D.
Institute Pre Mata (IISPV-HPU), Spain
Independent Investigator Grant
Basic Research

HENRIK WALTER, M.D., PH.D.
Charité Universitätsmedizin Berlin, Germany
Distinguished Investigator
Basic Research

JAMES T.R. WALTERS, M.D., PH.D.
Cardiff University, United Kingdom
Independent Investigator Grant
Basic Research

JARI G. WILLING, PH.D.
University of Illinois at Urbana-Champaign
Young Investigator Grant
Basic Research

SUICIDE PREVENTION

HENRY WILLIAM CHASE, PH.D.
University of Pittsburgh
Young Investigator Grant
Next-Generation Therapies

SAKINA RIZVI, PH.D.
University of Toronto, Canada
Young Investigator Grant
Basic Research

OTHER DISORDERS
[RETT SYNDROME]

ANNIE VOGEL CIERNIA, PH.D.
University of California, Davis
Young Investigator Grant
Basic Research

RALF S. SCHMID, PH.D.
University of North Carolina at Chapel Hill
Young Investigator Grant
Next-Generation Therapies
2017 FOUNDATION EVENTS

Photo Credits: Chad David Kraus
The Foundation celebrated its 30th Annual International Awards Dinner at The Pierre. The evening included the presentation of the Pardes Humanitarian Prize in Mental Health and the awarding of the Foundation’s Outstanding Achievement Awards to nine exceptional scientists for their significant contributions to the advancement of our understanding of schizophrenia, mood disorders, child and adolescent psychiatry and cognitive neuroscience.

PARDES HUMANITARIAN PRIZE IN MENTAL HEALTH
The Pardes Humanitarian Prize in Mental Health was established in 2014 and is awarded annually to recognize individuals or organizations that are making a profound and lasting impact in advancing the understanding of mental health and improving the lives of people suffering from mental illness.

Honoree:
Doctors Without Borders/Médecins Sans Frontières (MSF)
The 2017 Pardes Humanitarian Prize in Mental Health was awarded to the international medical humanitarian organization Doctors Without Borders/Médecins Sans Frontières (MSF), for its visionary and pioneering work providing urgent and often neglected mental health care to people facing crises across the globe.

Honorary Tribute:
Constance E. Lieber
For her extraordinary and enduring legacy of generosity, brilliance and compassion, which has inspired others to improve the lives of people suffering from mental illness.

LIEBER PRIZE FOR OUTSTANDING ACHIEVEMENT IN SCHIZOPHRENIA RESEARCH
John M. Davis, M.D.
University of Illinois at Chicago

MALTZ PRIZE FOR INNOVATIVE & PROMising SCHizophrenia RESEARCH
Deanna L. Kelly, Pharm.D., BCPP
University of Maryland School of Medicine

COLVIN PRIZE FOR OUTSTANDING ACHIEVEMENT IN MOOD DISORDERS RESEARCH
Hilary P. Blumberg, M.D.
Yale School of Medicine

Tadafumi Kato, M.D., Ph.D.
RIKEN Brain Science Institute, Japan

Mary L. Phillips, M.D., M.D. (Cantab)
University of Pittsburgh, Western Psychiatric Institute and Clinic

RUANE PRIZE FOR OUTSTANDING ACHIEVEMENT IN CHILD AND ADOLESCENT PSYCHIATRIC RESEARCH
Nathan A. Fox, Ph.D.
The University of Maryland, College Park

Charles A. Nelson III, Ph.D.
Harvard Medical School & Boston’s Children’s Hospital

Charles H. Zeanah, Jr., M.D.
Tulane University School of Medicine

GOLDMAN-RAKIC PRIZE FOR OUTSTANDING ACHIEVEMENT IN COGNITIVE NEUROSCIENCE
Trevor W. Robbins, Ph.D.
University of Cambridge, UK

Dr. Jeffrey Borenstein, Stephen Lieber, Dr. Herbert Pardes, and Jason Cone, Executive Director MSF
The evening includes a presentation of the Pardes Humanitarian Prize in Mental Health and the Outstanding Achievement Prizewinners.

Anne and Ronald Abramson
Carol Atkinson
Patricia and Eric Bam
Janet and Donald Boardman
Raymonde and J. Anthony Boeckh
Jeffrey Borenstein, M.D.
Susan Lasker Brody
Suzanne and John Golden
Bonnie and Alan Hammerschlag
Marla Press and Ken Harrison
Kathy and John Hollister
Judith and Thomas Iovino
Stephen A. Lieber
Carole and Harvey Mallement
Tamar and Milton Maltz
Miriam Katowitz and Arthur Radin, CPA
Léa Dartevelle and Marc R. Rappaport
Virginia and Mark Silver, M.D.
Kenneth Sonnenfeld, Ph.D, J.D.
Barbara and John Streicker
Barbara Toll
Frances and Robert Weisman, Esq.

Please join us at the Brain & Behavior Research Foundation’s 30th Anniversary Celebration INTERNATIONAL AWARDS DINNER 2017 FRIDAY, OCTOBER 27th The Pierre 2 East 61st Street, New York City 6:30pm Cocktails  |  7:30pm Dinner

The Brain & Behavior Research Foundation is committed to alleviating the suffering caused by mental illness by awarding grants that will lead to advances and breakthroughs in scientific research.

Dr. Charles Zeanah, Jr., Dr. Jeffrey Borenstein, Dr. Charles Nelson, Ill and Dr. Nathan Fox
Dr. Herbert Pardes and Dr. Max Gomez
Dr. Jeffrey Borenstein and Dr. Deanna Kelly
Dr. Norman Sartorius and Dr. William Carpenter
The 29th International Mental Health Research Symposium featured a keynote presentation by Dr. Herbert Pardes, the President of the Foundation’s Scientific Council. The day also included scientific presentations by the eight 2017 Outstanding Achievement Prizewinners and two exceptionally promising Young Investigator Grantees and was held at The Kaufman Music Center.

**Presentations Included:**

**Keynote Speaker:**
**ARE THERE BREAKTHROUGH OPPORTUNITIES FOR MENTAL HEALTH?**
Herbert Pardes, M.D.

**THE BRAIN CIRCUITRY OF BIPOLAR DISORDER: A VIEW FROM BRAIN SCANNING RESEARCH**
Hilary P. Blumberg, M.D.

**MECHANISMS OF MOOD DISORDER IN THE HUMAN BRAIN: NEURAL TARGETS FOR NEW TREATMENTS**
Mary L. Phillips, M.D., M.D. (Cantab)

**RECOVERY FROM SEVERE PSYCHOSOCIAL DEPRIVATION**
Nathan A. Fox, Ph.D.
Charles A. Nelson III, Ph.D.
Charles H. Zeanah, Jr., M.D.

**ADDICTION AS BRAIN DISORDER OF SELF-CONTROL**
Trevor W. Robbins, Ph.D.

**HARNESING THE MICROBIOTA-GUT-BRAIN AXIS DURING PREGNANCY TO IMPROVE MOTHER AND CHILD’S HEALTH**
Mary C. Kimmel, M.D.

**BRAIN DEVELOPMENT AND THE IMMUNE SYSTEM: THE BASIC SCIENCE OF STRESS**
Anna V. Molofsky, M.D., Ph.D.
This very special evening celebrated the 30th anniversary of the Brain & Behavior Research Foundation and honored the members of our Scientific Council for their service.

Six Young Investigator Grantees were honored for their outstanding contributions to mental health research at The Metropolitan Club in New York City. These researchers were chosen by a committee of the Foundation’s Scientific Council for their exceptional BBRF grant projects in terms of insight and potential new approaches to the treatment of mental illness.

Each investigator has demonstrated exceptional promise in the pursuit of deeper understanding of the human brain to ultimately result in cures through research.

**KLEMAN PRIZEWINNER**

*Jennifer C. Felger, Ph.D.* of Emory University School of Medicine for her work on “The Neurocircuitry of Inflammation-Induced Anhedonia in Depression.”

**HONORABLE MENTIONS**

*Danai Dima, Ph.D.*, of City, University of London and Kings College London for her grant research project, “An Integrative Genomics and Imaging Approach to Identify Resilient Mechanisms for Bipolar Disorder.”

*Carolyn Rodriguez, M.D., Ph.D.* of Stanford University for her grant project, “Pilot Study of the NMDAR Modulator Rapastinel (formerly GLYX-13) in Obsessive-Compulsive Disorder.”

**FREEDMAN PRIZEWINNER**

*Ilanan B. Witten, Ph.D.*, of Princeton University for her work on “Dopamine, Working Memory, and Schizophrenia: Dissecting Spatiotemporal Dynamics.”

**HONORABLE MENTIONS**

*Marcelo de Oliveira Dietrich, M.D., Ph.D.*, of the Yale School of Medicine for his grant project titled “Interplay Between Sustained Activation of AgRP Neurons and Dopamine Signaling in the Etiology of Anorexia Nervosa.”

Dr. Myrna Weissman and Dr. Anissa-Abi Dargham

Dr. Herbert Pardes and Freedman Prizewinner Dr. Ilana Witten

Dr. Carolyn Rodriguez, Klerman Prize Honorable Mention and Dr. Herbert Pardes

Dr. Danai Dima, Klerman Prize Honorable Mention and Dr. Herbert Pardes

Dr. Marcelo de Oliveira Dietrich, Freedman Prize Honorable Mention and Dr. Herbert Pardes

Dr. Eric Kandel and Dr. Solomon Snyder

Dr. Amy Arnsten, Dr. Helen Mayberg, and Dr. Daniel Weinberger
Women Breaking the Silence About Mental Illness Luncheon
New York, April 15, 2017

Our third Women’s Luncheon featured Ellen Levine as our moderator who led a wide-ranging conversation with pioneering mental health researchers Dolores Malaspina, M.D. (schizophrenia) and Myrna Weissman, Ph.D. (mood and anxiety disorders) before a sold-out audience of 300 at the Metropolitan Club in Manhattan. The event, co-chaired by board members Suzanne Golden, Carole Mallement and Barbara Streicker, raised more than $250,000.

Our Women’s Luncheon is designed to pay tribute to those women (often the primary caregivers) who are willing to speak candidly and personally about mental illness and how they inspire others to speak out against the stigma surrounding brain and behavior disorders.

Moderator
Ellen Levine, Editor and Innovator, Hearst Magazines

Speakers
Dolores Malaspina, M.D., M.S., MSPH
Director, Psychosis Program
Icahn School of Medicine at Mount Sinai

Myrna Weissman, Ph.D.
Diane Goldman Kemper Family Professor of Epidemiology in Psychiatry
Columbia University College of Physicians & Surgeons

Dr. Dolores Malaspina, Dr. Myrna Weissman and Ellen Levine

Dr. Jeffrey Borenstein, Barbara Streicker, Dr. Myrna Weissman, Ellen Levine, Carole Mallement, Dr. Dolores Malaspina and Suzanne Golden
BECOME A RESEARCH PARTNER

UNITING DONORS WITH SCIENTISTS

“My brother first exhibited symptoms of schizophrenia in 1960 at age 17. When we were able to support psychiatric research as a family, we found the Brain & Behavior Research Foundation. I became a Research Partner because the satisfaction of enabling a Young Investigator’s work to unlock the pathways to understanding the sources of psychiatric illness is incredibly satisfying. Now I support three Young Investigators each year. My brother knew that whatever science discovered, it would be too late for him, but he wanted to know that others could avoid the illness that had ruined his life. I donate to honor his wish.”

—Barbara Toll, Foundation Board Member

BENEFITS OF BECOMING A RESEARCH PARTNER

- Personally select & sponsor a scientist conducting research that is important to you and your family
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Please contact us at 800-829-8289

Email researchpartner@bbrfoundation.org. Visit bbrfoundation.org/researchpartner.
WHY GIVE TO THE BRAIN & BEHAVIOR RESEARCH FOUNDATION

WHEN YOU SUPPORT THE BRAIN & BEHAVIOR RESEARCH FOUNDATION YOU ARE:

• Impacting the future and moving the needle forward in the search for better treatments and cures for mental illness.
• Driving commitment forward to change and to increase the understanding of mental illness.
• Keeping the pipeline of scientific research flourishing with sustained momentum in the field.

BBRF donors know that scientific progress has been made, but much more work is needed to help alleviate the suffering caused by mental illness.

Thanks to our generous donors, the Brain & Behavior Research Foundation will continue to fund the development of new treatments, cures and methods of prevention for these devastating conditions. Please know that your support has an impact.

“The John and Polly Sparks Foundation strives to advance mental health by helping individuals and families who face challenges, improving the quality of care and supporting research. We are very fortunate to have as our research partner the Brain and Behavior Research Foundation. It is wonderful to know that 100% of our contributions support cutting edge research selected by world renowned scientists.”

—Richard Hallock, Distribution Committee of the John and Polly Sparks Foundation, BBRF Donor

“When my brother and I decided to donate to what was then NARSAD, he said ‘I know that research probably won’t find anything in time to help me, but it could help someone else’. I have never forgotten that I am involved in the Brain & Behavior Research Foundation for my brother, and to alleviate future suffering for both patients and families.”

—Barbara Toll, BBRF Board Member

“I am consistently impressed and amazed how BBRF has advanced the intersection between world-class science and the world of those whose lives are touched by serious mental illness. For those who are afflicted with mental illness and those who support the cause for progress towards a cure, I salute this wonderful organization.”

—Don Boardman, BBRF Board Member

“I chose to fundraise for BBRF because the research that is conducted covers so many illnesses that either you or someone close to you has been afflicted with— and 100% of donation goes towards research. Nothing can compare to what individuals go through on a daily basis battling different illnesses but training for something so grueling as an ironman triathlon and preparing yourself for a 14 hour day is not easy. Knowing that I was trying to help raise money and thinking of all the people that really suffer pushed me further.”

—Darren DelPriore, Team Up for Research Fundraiser, Montvale, NJ
Thank You

The generous support of our donors is what allows us to celebrate 30 years of remarkable research achievements. We’re honored by the trust you, our donors, have placed in the Brain & Behavior Research Foundation to fund the development of new treatments, cures, and methods of prevention to help alleviate the suffering caused by mental illness.
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All of the brave souls that fight Depression
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All the good causes
All those in need of mental health help
All those struggling with mental illness
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<tr>
<td>John (Jack) R. Ruder</td>
<td>John T. Sinnott</td>
<td>Steven C. Sutton</td>
</tr>
<tr>
<td>Mark Ruhaj</td>
<td>Toni M. Skifstad</td>
<td>Dorothy E. Suver</td>
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<tr>
<td>Donald J. Rully</td>
<td>Pamela B. Sklar, M.D., Ph.D.</td>
<td>T.C. Swafford</td>
</tr>
<tr>
<td>Charles C. Ruotolo</td>
<td>Thomas M. Sklios</td>
<td>Patricia Swanjord</td>
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<tr>
<td>Patrick J. Russell</td>
<td>Carol R. Smith</td>
<td>Jeffrey G. Sweeney</td>
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<tr>
<td>Mary Russo</td>
<td>Edmund Smith</td>
<td>Joshua J. Sweeney</td>
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<tr>
<td>Linda Sacks</td>
<td>Edward J. Smith</td>
<td>Andrew Taddy</td>
</tr>
<tr>
<td>Zachary Sallaway-Schneier</td>
<td>Gary J. Smith</td>
<td>Katrina Tagget</td>
</tr>
<tr>
<td>John R. Sans, Jr.</td>
<td>Gregg R. Smith</td>
<td>Betty R. Tarantola</td>
</tr>
<tr>
<td>Lourdes M. Santos</td>
<td>Greig Smith</td>
<td>Cindy L. Taylor</td>
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<td>Michael Satran</td>
<td>Peter E. Smith</td>
<td>Wiley E. Taylor</td>
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<td>Kerri N. Saunders</td>
<td>Tyler Smith</td>
<td>Bruce G. Taymor</td>
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<tr>
<td>Linda Schamp</td>
<td>John C. Snowdon</td>
<td>Gerald P. Tchir</td>
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<td>William Schatz</td>
<td>Warren Solomon</td>
<td>Thalia A. Tellez</td>
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<tr>
<td>Brian Scheessele</td>
<td>Hanan Somali</td>
<td>Thomas D. Thacher II</td>
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<tr>
<td>Terry Scheffler</td>
<td>Charles Sommers</td>
<td>Kelsey M. Thomas</td>
</tr>
<tr>
<td>Betsy Scheld</td>
<td>Chris E. Sorensen</td>
<td>Camilla (Cammie) L. Thompson</td>
</tr>
<tr>
<td>Victoria Scheld</td>
<td>Kelly L. Sorensen</td>
<td>Maria C. Thompson</td>
</tr>
<tr>
<td>Scott W. Scheurer</td>
<td>Tim Soule</td>
<td>Barbara Thompson-Brindle</td>
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<tr>
<td>Barbara Rose (Gladsden) Schindler</td>
<td>Geri Sowa-Karol</td>
<td>Ainsley R. Thornhill</td>
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<tr>
<td>Reid Schmidt</td>
<td>Susan K. Soyka</td>
<td>Patrick Tierney</td>
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<tr>
<td>Helga Schmidt-Gengenbach</td>
<td>Timothy Spada</td>
<td>Nick Tindall</td>
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<tr>
<td>Sarah Schoenthal</td>
<td>Louis A. Spadaccini</td>
<td>Kiwa Toomer</td>
</tr>
<tr>
<td>Lee Schoolmeesters</td>
<td>Russell Sparrow</td>
<td>Steven M. Toro</td>
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<tr>
<td>Richard B. Schreiber</td>
<td>Cynthia A. Sprouse-Wright</td>
<td>Filippo V. Toscano</td>
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<tr>
<td>S. Charles (Chuck) Schulz, M.D.</td>
<td>Ronald W. Staab</td>
<td>Leanne Townsend</td>
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<tr>
<td>Rob Schumacher</td>
<td>Kevin C. Stack</td>
<td>Mario A. Tozzi, Jr.</td>
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<tr>
<td>Michael L. Schwartz</td>
<td>Samuel R. Stack</td>
<td>Frances S. Trager</td>
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<tr>
<td>Peter Scontras</td>
<td>Ian J. Stancato</td>
<td>Morris Trager</td>
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<tr>
<td>David J. Scott</td>
<td>Alicyn Stander</td>
<td>Jacqueline (Jackie) S. Trantham</td>
</tr>
<tr>
<td>Rich Searle</td>
<td>Frances B. Stanik</td>
<td>Samuel P. Trice</td>
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<tr>
<td>Briston J. Segraves</td>
<td>John A. Stapleton</td>
<td>Susan Trocheset-Havran</td>
</tr>
<tr>
<td>Paz Selo</td>
<td>Mary Louise Stauffer-Bray</td>
<td>Clarence (Bud) Trombly</td>
</tr>
<tr>
<td>Werner A. Selo</td>
<td>Clarence Steadman</td>
<td>Richard Trommer</td>
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</tbody>
</table>
Jeffrey S. Trott
Christian Truong
Donald Trybula
Michael Tuhy
Lucy Turcotte
Sussie Tyrrell
Robert D. Uhl
Richard L. Underwood
Anthony W. Vagnoni
Gerald Van de Bruinhorst
Stephanie L. Van Gundy
Steven Van Lew
Charles Varkoly
Christopher C. Vella
Benjamin B. Vendeland
Keith A. Vinkofski
The 32 lives of those Hokies lost at Virginia Tech on 4/16/2007
Kurt A. Vogt
Dean Voukelatos
Alexa (Lexie) L. Wach
Quartense E. Wade
William F. Wagner, Jr.
Barry M. Walden
Don Walsh
Justin Z. Wang
Eric R. Ward
Betsy A. Watkins
Morton Wax
Stephanie Wayment
Leone H. (Wisneski) Weber
Mary Weber
Imaam Wehab
Daniel Weiss
James C. Welbourne
Darren Welch
Catherine Welford-Delva
Michael Welsh
Thomas J. Wendt
Timothy R. Wentz
Susan L. Wessman
Michael Westforth
Heidi A. Westhoven
Robert Wetzel
Phyllis Wheatley-Cameron
Matthew W. Wheeler
Austin R. White
Harry Whiteman
Sir Aaron Marcus Whitfield
Eamonn D. Wholley
John A. Wiederkehr II
Carol Wiedower-Walls
Michael G. Wieman
Zack Wiener
Cathy (Chick) S. Wiggins McCulloch Bowers
Brent Willard
Gregory S. Williams
Robin Williams
Sylvia Williams
Margaret Wills
Richard K. Wilson
Holiday P. Wilson-Camhi
Betty J. Winberg
David Winter
Douglas Wistner
Terrance D. Witherill
Cheryl E. Wolfe
Theresa L. Wolff
Farrell J. Wolfson
John M. Wolverton
Ivan Wood
Evan Woods
Laura Wren-Polansky
David Wussler
Matthew Yaghoobian
Sally Yates
Diane L. Young
Shervin Zahedi
Peter W. Zartman
Jack Zaugg
Maria Zeier
Clare Zeleznik
Barry L. Zimmerman
Richard M. Zirlen
Luis E. Zurita
# Team Up for Research

## $25,000+

### 7th Annual Let the Sun Shine Run/Walk
Kathy & Kurt Robbins
Cold Spring, MN

### HIKE FOR MENTAL HEALTH
Leo Walker & Tom Kennedy
Houston, TX

## $10,000+

### Chriissy’s Wish
Linda & Mario Rossi
Dix Hills, NY

### Horizon Group Properties
Gary Skoien & Connie Dyer
Rosemont, IL

### Michael Mattoon Golf Outing
Kathleen Mattoon
Gilberts, IL

### Team Daniel: Running for Recovery from Mental Illness
Drs. Ann & Robert Laitman
Armonk, NY & Port Washington, NY

## $5,000+

### 2nd Annual Timmy Spada Memorial Golf Classic
Myke Furhman
Sherman, CT

### Andre’s Kilimanjaro Ascent
Andre Stapleton
Brooklyn, NY

### Ben’s Memorial Mile
Paul Silver
Downers Grove, IL

## $1,000+

### Fighting Mental Illness Ironman Triathlon
Darren Del Priore
Montvale, NJ

### NAMI - Eastside Support Group
Dr. Tom B. Coles
Gross Pointe Woods, MI

### Run for Research
Lindsey Rappleyea
Bear, DE

### Virtual Strides
Mark Petriillo
Melbourne, FL

### Zelda’s Breath
Zelda Williams
Internet Campaign

## $500+

### Dave Green Memorial Golf Classic
John Hagerty
Glen Dale, MD

### Drum Against Depression
Kevin M. Lois
Corpus Christi, TX

### Herman, Charity Fair
County of Santa Clara Warrant
San Jose, CA

### In Memory of Chester Bennington - Linkin Park
Melissa Wilke
Düsseldorf, Germany

### MakeAneffort: 2017 NYC Marathon
John Marangello
Morganville, NJ

### Noa Talmor’s Bat Mitzvah
Talmor Family
San Jose, CA

### Robert Buchanan Art Show
Megan Buchanan
West Plains, MO

### RPG Crossing Fundraiser
Mark Englehardt
Ottawa, Canada

### Seare’s Special Commemorative Shirts
Tommy Searle
Internet Campaign

### Talonro Gaming
Internet Campaign

### Twitch TV Fundraising
Gibi Asmr
Internet Campaign

## EVERYDAY HERO
Coastal Community Foundation of South Carolina
Charleston, SC

### Haiwen and Bob
Haiwen Chen
Baltimore, MD

### Headstrong Club
Mira Costa High School
Manhattan Beach, CA

### HIKE HAPPY: 2,190 MILES FOR MENTAL HEALTH
Lynsey Abrams
Eldersburg, MD

### HR Networking Dinner
Martin Fretwell
Lakewood, CO

### Humble Bundle, Inc.
San Francisco, CA

### Lularoe Fundraiser
Erin Adams
San Clemente, CA

### Nostalgia Critic
Doug Walker
Internet Campaign

### The Order of St. Benedict of New Jersey
Delbarton School
Morristown, NJ

### Zaslav Wedding
Ashley and Jordan Zaslav
New York, NY
We are pleased to report on the financial position and results of the Brain & Behavior Research Foundation for 2017. With great thanks and appreciation, we acknowledge the outstanding commitment of Foundation leadership, dedicated staff, volunteers and our donors that allow the Foundation to perform its vital work. We are grateful to the Foundation Scientific Council, our distinguished research leaders covering virtually every major discipline within brain and behavior science, who volunteer their expertise to select and recommend the most promising projects to fund.

In 2017, contributions remained strong and bequests continued to provide major support for which we are truly thankful to all of our supporters for their generosity. We would like to again acknowledge the extraordinary bequest from the late Oliver D. Colvin, Jr. that continues to impact the work of the Foundation. Together, all these donations further the Foundation’s mission to alleviate the suffering caused by mental illness by awarding grants that will lead to advances and breakthroughs in scientific research.

With another strong year of results, we continue to move forward with our aim of accelerating research accomplishments to help those living with mental illness to live full and productive lives. During 2017, the Foundation awarded additional NARSAD Grants to bring the total investment in mental health research to more than $380 million since inception.

We remain very appreciative and thankful for the generosity of the two family foundations who have underwritten, once again, the Foundation’s fundraising and administration expenses. This allows for contributions targeted for research to go directly to funding NARSAD Grants. The financial report shown herein has been summarized from our 2017 audited financial statements. The Foundation’s complete audited financial statements and our most recent IRS Form 990 are available online at bbrfoundation.org or contact our office at 800.829.8289 for copies of the material.
### Combined Statement of Financial Position

<table>
<thead>
<tr>
<th>ASSETS</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash and cash equivalents</td>
<td>$4,634,731</td>
</tr>
<tr>
<td>Investments, at fair value</td>
<td>21,240,187</td>
</tr>
<tr>
<td>Contributions receivable</td>
<td>855,135</td>
</tr>
<tr>
<td>Pledges receivable, net</td>
<td>2,480,769</td>
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<tr>
<td>Prepaid expenses and other assets</td>
<td>40,433</td>
</tr>
<tr>
<td>Assets held in charitable remainder trusts</td>
<td>1,466,530</td>
</tr>
<tr>
<td>Fixed assets, net</td>
<td>13,933</td>
</tr>
<tr>
<td>Security deposits</td>
<td>77,110</td>
</tr>
<tr>
<td><strong>Total Assets</strong></td>
<td><strong>$30,808,828</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>LIABILITIES AND NET ASSETS</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Liabilities</td>
<td></td>
</tr>
<tr>
<td>Accounts payable and accrued expenses</td>
<td>$102,346</td>
</tr>
<tr>
<td>Grants payable</td>
<td>20,280,242</td>
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<tr>
<td>Accrued compensation</td>
<td>80,869</td>
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<tr>
<td>Annuities payable</td>
<td>802,586</td>
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<tr>
<td>Charitable gift annuities payable</td>
<td>263,234</td>
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<tr>
<td><strong>Total Liabilities</strong></td>
<td><strong>21,529,277</strong></td>
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<table>
<thead>
<tr>
<th>Net Assets</th>
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<tbody>
<tr>
<td>Unrestricted</td>
<td>4,366,051</td>
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<tr>
<td>Permanently restricted</td>
<td>4,913,500</td>
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<tr>
<td><strong>Total Net Assets</strong></td>
<td><strong>9,279,551</strong></td>
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</table>

**$30,808,828**
## Combined Statement of Activities

<table>
<thead>
<tr>
<th>SUPPORT AND REVENUE</th>
<th>YEAR ENDED DECEMBER 31, 2017</th>
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<tbody>
<tr>
<td><strong>Contributions</strong></td>
<td>$13,748,895</td>
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<td>Special events, net</td>
<td>372,252</td>
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<td>Contribution of services</td>
<td>1,918,998</td>
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<td>Bequests</td>
<td>2,617,803</td>
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<td>Net realized and unrealized gains on investments</td>
<td>2,807,211</td>
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<tr>
<td>Net appreciation of assets held in charitable remainder trusts</td>
<td>155,988</td>
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<tr>
<td>Dividend and interest income</td>
<td>540,212</td>
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<tr>
<td><strong>Total Support and Revenue</strong></td>
<td><strong>22,161,359</strong></td>
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<table>
<thead>
<tr>
<th>EXPENSES</th>
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<table>
<thead>
<tr>
<th><strong>Program Services</strong></th>
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</thead>
<tbody>
<tr>
<td>Research grants and awards</td>
</tr>
<tr>
<td>Scientific advancement</td>
</tr>
<tr>
<td>Program support</td>
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<tr>
<td><strong>Total Program Services</strong></td>
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</table>

<table>
<thead>
<tr>
<th><strong>Supporting Services</strong></th>
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</thead>
<tbody>
<tr>
<td>Fundraising*</td>
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<tr>
<td>Administration*</td>
</tr>
<tr>
<td><strong>Total Supporting Services</strong></td>
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</table>

<table>
<thead>
<tr>
<th><strong>Change in Net Assets</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>(1,976,814)</td>
</tr>
</tbody>
</table>

| **Net Assets, beginning of year** | 11,256,365 |
| **Net Assets, end of year** | **$9,279,551** |

*All fundraising and administration expenses are funded by specially designated grants.*
Investing in Breakthroughs to Find a Cure

100% of every dollar donated for research is invested in our research grants. Our operating expenses are covered by separate foundation grants.

Our Mission:
The Brain & Behavior Research Foundation is committed to alleviating the suffering caused by mental illness by awarding grants that will lead to advances and breakthroughs in scientific research.

How We Do It:
The Foundation funds the most innovative ideas in neuroscience and psychiatry to better understand the causes and develop new ways to treat brain and behavior disorders. These disorders include addiction, ADHD, anxiety, autism, bipolar disorder, borderline personality disorder, depression, eating disorders, OCD, PTSD, schizophrenia, and suicide prevention.

Our Credentials:
Since 1987, we have awarded more than $380 million to fund more than 5,500 grants to more than 4,500 scientists around the world.

Our Vision:
To dramatically improve the lives of those with mental illness and ultimately enable people to live full, happy, and productive lives.

BBRF’s four-star rating from Charity Navigator, the most well-respected nonprofit rating organization, provides our donors with confidence that their funds are being used appropriately. BBRF’s four-star rating means that we adhere to best practices including accountability and transparency. Our stellar track record for donor stewardship ensures that every dollar donated for research goes directly to research.

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