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** PUBLIC DISCLOSURE COPY **

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No. 1848-0047

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

Open to Public Inspection

Description	
Comparison Com	
Doing Business As Number and street (of P.O. box if mail is not delivered to street address) Room/sulte To33 - 526 - 9720	
See Number and street (or Po. box if mall is not delivered to street address) Room/sulte	
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Cross readpins Local Local Cross readpins Local	
RRLINGTON, VA 22209	O E O
F Name and address of principal officer CATHLEEN CAMPBELL 1 530 WILLSON BLVD., 3RD FLOOR, ARLINGTON, VA 1 Trace excempt status:	930.
Tax-exempt status: X SOTION BIVD	<u>ت</u> ا
Texexempt status:	_
Website: WWW.CRDF.ORG H(c) Group exemption number Type of organization: Copporation Trust Association Other L. Year of formation: 1.995 M. State of legal dom Part II Summary	
Type of organization: X Corporation Trust Association Other L Year of formation: 1995 M State of legal dom Part Summary	ns)
Part Summary Briefly describe the organization's mission or most significant activities: CRDF 'S MISSION IS TO PROVIDE COOPERATIVE R&D OPPORTUNITIES, (SBE SCHEDULE O FOR CONTINUATION)	
Briefly describe the organization's mission or most significant activities: CRDF'S MISSION IS TO PROVIDE COOPERATIVE RED OPPORTUNITIES, (SRE SCHEDULE O FOR CONTINUATION) 2 Check this box If the organization discontinued its operations or disposed of more than 25% of its assets. 3 Number of voting members of the governing body (Part VI, line 1a) 4 Number of independent voting members of the governing body (Part VI, line 1b) 5 Total number of endependent voting members of the governing body (Part VI, line 1b) 6 Total number of volunteers (estimate if necessary) 7a Total gross unrelated business revenue from Form 990-T, line 34 PriorYear Current Ye 8 Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 1p) 10 Investment income (Part VIII, column (A), line 34, 4, and 7d) 11 Cither revenue (Part VIII, column (A), lines 3, 4, and 7d) 12 Total revenue -add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), lines 1-3) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 17 Other expenses (Part IX, column (A), line 25) 18 Total fundralsing expenses (Part IX, column (A), line 25) 18 Total fundralsing expenses (Part IX, column (A), line 25) 19 Professional fundralsing fees (Part IX, column (A), line 25) 10 Other expenses (Part IX, column (A), line 25) 10 Total assets (Part X, line 16) 11 Cotal individual professional fundralsing fees (Part IX, column (A), line 25) 11 Cotal individual professional fundralsing fees (Part IX, column (A), line 25) 12 Ottal assets (Part X, line 16) 13 (Part III Signature Block 14 Lotal revenue (Part X, line 26) 15 Salaries or fund balances, Subtract line 21 from line 20 15 Salaries or fund balances, Subtract line 21 from line 20 17 Ottal revenue (Part X, line 26) 18 Subtract line 21 from line 20 19 Subtract line 20 (INSPECSION) in line 20 (INSPECSION) in line	:lle: VA
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Net unrelated business taxable income from Form 990-T, line 34 Prior Year Current Ye 8	14
Net unrelated business taxable income from Form 990-T, line 34 Prior Year Current Ye	134
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and complete. Declaration of prepare (Curry than officer) to based on all information of which prepare these any knowledge.	
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ZE+4 GAITHERSBURG, MD 20878-7340 Phone no. ► (301) 296-	
May the IRS discuss this return with the preparer shown above? (see instructions)	No
Total 12-18-08 LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. Form 99 SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION	(2008)

	U.S. CIVILIAN RESEARCH AND DEVELOPMENT 1,990 (2008) FOUNDATION 54-1773406 Page 2
Pa	rt III Statement of Program Service Accomplishments (see instructions)
1	Briting describe the organization's mission: SEE SCHEDULE O FOR CONTINUATION
	CRDF WAS FORMED IN AUGUST 1995 AND BEGAN OPERATIONS ON OCTOBER 1,
	1995. CRDF WAS CREATED BY THE DIRECTOR OF THE NATIONAL SCIENCE
	FOUNDATION, PURSUANT TO THE FREEDOM SUPPORT ACT OF 1992.
	(SEE SCHEDULE O FOR CONTINUATION)
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes", describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
3	
	If "Yes", describe these changes on Schedule O.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and
	allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 5,355,187. including grants of \$ 3,315,558.) (Revenue \$
	CENTERS & INSTITUTIONAL BUILDING: WORKS INTERNATIONALLY TO BUILD
	SUSTAINABLE SCIENTIFIC INSTITUTIONS AND PROGRAMS THAT ENHANCE CRUCIAL
	CAPABILITIES NECESSARY FOR INCREASED RESEARCH PRODUCTIVITY IN EMERGING
	COUNTRIES.
	COONTRIED:
	·
4b	(Code:) (Expenses \$ 4,242,321. including grants of \$ 2,981,964.) (Revenue \$
	COOPERATIVE GRANTS COMPETITIONS: SUPPORTS SCIENTIFIC AND TECHNOLOGICAL
	COLLABORATION BETWEEN THE U.S. AND FOREIGN SCIENTISTS SELECTED THROUGH
	A COMPETITIVE, MERIT-BASED REVIEW PROCESS.
	A COMPRITITIVE, MERCI-BASED REVIEW PROCESS.
4c	(Code:) (Expenses \$ 7,301,139. including grants of \$ 3,917,947.) (Revenue \$
10	NONPROLIFERATION & THREAT REDUCTION: PROVIDES RESEARCH AND TRAINING
	PROGRAMS TO ENGAGE SCIENTISTS OVERSEAS IN CIVILIAN PROJECTS AND
	PROVIDES PROGRAM SUPPORT TO GLOBAL THREAT REDUCTION INITIATIVES.
<u> </u>	Otherwise was in a /Daniel in Orbital - Ox
4d	Other program services. (Describe in Schedule O.)
	[Expenses \$ 2,779,714. including grants of \$ 337,919.) (Revenue \$ 1,688,425.)
	LOTEL BY DESCRIPTION OF A STATE O

Page 3

Yes No 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A X Is the organization required to complete Schedule B, Schedule of Contributors? X Did the organization engage in direct or Indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II ... 4 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I X Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II X Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III X 8 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 10 11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable X 11 Did the organization receive an audited financial statement for the year for which it is completing this return that was 12 prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII 12 is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 14a Did the organization maintain an office, employees, or agents outside of the U.S.? b Dld the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity 15 located outside the United States? If "Yes," complete Schedule F, Part II 15 X Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals 16 located outside the United States? If "Yes," complete Schedule F, Part III 16 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? if "Yes," complete Schedule G, Part I 17 17 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 18 18 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 19 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 20 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 X 21 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 22 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J 23 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. if "No", go to question 25 24a X b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I X b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? if "Yes," complete Schedule L, Part I X 25b Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II X Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III Form **990** (2008)

Part IV Checklist of Required Schedules (continued) Form 990 (2008)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an		1	
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other	1		
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28 <u>a</u>		X
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		X
C	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
	corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	x	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36	1	х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х

Form 990 (2008)

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Form 990 (2008)	FOUNDATION
Part V Statements	Regarding Other IRS Filings and Tax Compliance
- dit i Otatemento	riegarding editer into I mings and Tax Compitance

	- Joseph Grand Company				
	•	1		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of				
	U.S. Information Returns. Enter -0- if not applicable	1a 81	1		
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0	4		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re				
20	(gambling) winnings to prize winners?		<u>1c</u>		
23	filed for the calendar year ending with or within the year covered by this return	0- 124			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax return		1	x	
D	Note, If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see		2b		
30	Did the organization have unrelated business gross income of \$1,000 or more during the year covered				_X
b			3a 3b		<u>~~</u>
	At any time during the calendar year, did the organization have an Interest in, or a signature or other a	uthority over a	30		
74	financial account in a foreign country (such as a bank account, securities account, or other financial a		4 a	x	
h	If "Yes," enter the name of the foreign country:		-44		
_	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign E	Rank and			
	Financial Accounts.	an Coro			
5a	The state of the s		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction		5b		X
c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity				
	Tax Shelter Transaction?		5c		
6a	The state of the s		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributi				
	were not tax deductible?	_	6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more	than \$75?	7a		X
b		***************************************	7b_		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was				
	to file Form 8282?	1	7c		<u>X</u>
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Dld the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a pro-				
_	benefit contract?	***************************************	7e		<u>X</u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra		7f		<u> </u>
9	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C		7h		
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and sect				
	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization business heldings at any time during the ward.				
	excess business holdings at any time during the year? Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		8	-	
a	Did the organization make any taxable distributions under section 4966?		_		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9a	-	
10	Section 501(c)(7) organizations. Enter: N/A		9b		
а	1 11 11 11 11 11 11 11 11 11 11 11 11 1	10a			
ь	_ · · · · · · · · · · · · · · · · · · ·	10b			
11	Section 501(c)(12) organizations, Enter: N/A	104			
a		11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against	-		j	
		11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a		
		12b			

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FOUNDATION

54-1773406 Part VI | Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Sec	tion A. Governing Body and Management											
			Yes	No								
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,											
	processes, or changes in Schedule O. See Instructions.											
1a	1a Enter the number of voting members of the governing body1a14											
	b Enter the number of voting members that are independent 15 14											
2												
	officer, director, trustee, or key employee?	2		X								
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision											
	of officers, directors or trustees, or key employees to a management company or other person?	3_		X								
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X								
5												
6												
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the	1	Į									
	governing body?	7a		X								
þ	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X								
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year		1									
	by the following:											
а	The governing body?	8a	X									
b	Each committee with authority to act on behalf of the governing body?	8b	X									
	Does the organization have local chapters, branches, or affiliates?	9a		X								
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,											
	and branches to ensure their operations are consistent with those of the organization?	9b		<u> </u>								
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must											
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X	<u> </u>								
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the		1	İ								
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		X								
Sec	tion B. Policies											
			Yes	No								
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	<u> </u>								
þ	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			ĺ								
	to conflicts?	12b	X									
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			ł								
	in Schedule O how this is done	12c	X	<u> </u>								
13	Does the organization have a written whistleblower policy?	13	<u>X</u>	—								
14	Does the organization have a written document retention and destruction policy?	14	X	<u> </u>								
15	Did the process for determining compensation of the following persons include a review and approval by independent											
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision:											
	The organization's CEO, Executive Director, or top management official?	15a										
b	Other officers or key employees of the organization?	15b	Х	<u> </u>								
40-	Describe the process in Schedule O. (see instructions)											
юа	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a											
	taxable entity during the year?	16a		<u>X</u>								
D	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			1								
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's											
Saci	exempt status with respect to such arrangements?	16b										
				Tra								
17 18	List the states with which a copy of this Form 990 is required to be filed ►AK, AL, AR, AZ, CA, CO, CT, DC, FI Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available		<u>, 1, 1</u>	<u>'VD</u>								
10	public inspection. Indicate how you make these available. Check all that apply.	ior										
	Own website X Another's website X Upon request											
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	.d &	nala!									
	statements available to the public.	io fina	iciai									
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	ion. ►										
	STEPHEN WOLK - (703)526-9720	uori: 🏴	_									
	1530 WILSON BLVD., 3RD FLOOR, ARLINGTON, VA 22209											
832006 12-18-0	SEE SCHEDULE O FOR FULL LIST OF STATES	Form	gan	(2008)								
·2- 10-1	and poundant o for found nice of plated	LOHI	JJU (2000)								

Form 990 (2008)

FOUNDATION

54-1773406

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A)	(B)			-	C)			(D)	(E)	(F)
Name and Title	Average hours	 (c			ition that	app	iv)	Reportable compensation	Reportable compensation	Estimated amount of
	per week	director	Institutional frustea		<u> </u>	Highest compensated employes		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
DR. JALEH DAIE										
DIRECTOR	2.00	X		ļ	<u> </u>			0.	0.	0.
DAVID KAY									_	_
DIRECTOR CLORES DUREN	2.00	X					_	0.	0.	0.
GLORIA DUFFY	200	~						_		_
DIRECTOR	2.00	X			-		-	0.	0.	0.
DR. RODNEY NICHOLS DIRECTOR	2.50	.						0.	0.	•
DR. IRMA GIGLI	2.50	^	-		\vdash	\vdash	 	U •	U.	0.
DIRECTOR	2.50	v						0.	о.	0.
DR. VICTOR RABINOWITCH	2.50	^	-		_	\vdash			U .	<u> </u>
DIRECTOR	3.00		ļ					0.	0.	0.
DR. KENNETH RIND	3.00	^	 		-	-		<u>V•</u>	<u></u>	<u> </u>
DIRECTOR	2.00	v						0.	0.	0.
DR. MARJORIE L. SENECHAL	2.00							- 0.		
DIRECTOR	3.00	x						0.	0.	0.
DR. ALBERT WESTWOOD		_								
DIRECTOR	2.50	x						0.	0.	0.
DR. BILL WOLF										
DIRECTOR	2.50	X						0.	0.	0.
DR. JOHN MOORE										
CHAIR	4.50			X				0.	0.	0.
ROSE GOTTEMOELLER	_							, ,		
VICE-CHAIR	3.00			X				0.	0.	0.
DONA CRAWFORD										
SECRETARY	3.00			X				0.	0.	0.
FRED JOHNSON									}	
TREASURER	4.00			X				0.	0.	0.
CATHLEEN CAMPBELL							ĺ			
PRESIDENT & CEO	40.00	Щ		X				226,967.	0.	<u>35,407.</u>
STEPHEN WOLK										
CFO TOTAL	40.00			X		L.,	\Box	170,485.	0.	<u> 29,723.</u>
ERIC NOVOTNY	40.00							400 045		
SR VP PROGRAMS	40.00	L	لسا	X		L		182,019.	0.	<u>16,169.</u>

832007 12-18-08

Form 990 (2008)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (A)	Form,990 (2008) FOUNDATI									<u>54-1773</u>	406	Pa	age 8
Name and title Average hours per week Week Average hours per week Week Average hours per week Average hours per week Week Average hours per week Week Average hours per week We	Part VII Section A. Officers, Directors, Tr	ustees. Key E	mplo	yee	s, a	nd l	High	est	Compensated Employ	ees (continued)			
hours week week week week week week week wee												(F)	
### week ### ### ### ### ### ### ### ### ###	Name and title								-	•	Es	timate	d
SHAWN WHEELER VP GLOBAL OPERATIONS 40.00 X 159,626. 0. 20,536. JOHN ZIMMERMAN SR ADVISOR 40.00 X 129,124. 0. 15,378. JOHN MODZELEWSKI PROGRAM DIRECTOR 40.00 X 127,006. 0. 23,002. DAVID LINDEMAN PROGRAM DIRECTOR 40.00 X 129,025. 0. 17,330. JOSEPH DETHOMAS PROGRAM DIRECTOR 40.00 X 122,206. 0. 15,389. 1b Total LINDEMAN PROGRAM DIRECTOR 40.00 X 122,206. 0. 15,389. 1c Total number of individuals (including those in 1s) who received more than \$100,000 in reportable compensation from the organization and related organization and related organization greater than \$150,000? If 'Yes,' complete Schedule J for such individual or such indi		1	(d	reck	(all	that	app	ly)	•	•			of
SHAWN WHEELER VP GLOBAL OPERATIONS			횭								1		
SHAWN WHEELER VP GLOBAL OPERATIONS		week	퉏				3		T				
SHAWN WHEELER VP GLOBAL OPERATIONS			뫓	rusie			E			(** 25 1000 *********************************			-
SHAWN WHEELER VP GLOBAL OPERATIONS			불	ional (90	58						
VP GLOBAL OPERATIONS	•		Individ	înstiitat	Officer	Кеуел	Hahes	Former			orga	nizatio	ons
JOHN ZIMMERMAN SR ADVISOR 40.00 X 144,611. 0. 29,622.							-						
SR ADVISOR	VP GLOBAL OPERATIONS	40.00			X		<u>L</u> .		159,626.	0.	2	0,5	36.
ALBERT JONES SR ADVISOR JOHN MODZELEWSKI PROGRAM DIRECTOR 40.00 X 129,124. 0. 15,378. JONES SR ADVISOR 40.00 X 127,006. 0. 23,002. DAVID LINDEMAN PROGRAM DIRECTOR 40.00 X 129,025. 0. 17,330. JOSEPH DETHOMAS PROGRAM DIRECTOR 40.00 X 122,206. 0. 15,389. 1b Total 1b Total 1c Total mumber of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization 3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 4 For any Individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to	JOHN ZIMMERMAN		i			ļ							
SR ADVISOR		40.00					X		144,611.	0.	2	9,6	22.
JOHN MODZELEWSKI PROGRAM DIRECTOR 40.00 X 127,006. 0. 23,002. DAVID LINDEMAN PROGRAM DIRECTOR 40.00 X 129,025. 0. 17,330. JOSEPH DETHOMAS PROGRAM DIRECTOR 40.00 X 122,206. 0. 15,389. 1b Total 100							l						
PROGRAM DIRECTOR 40.00 X 127,006. 0. 23,002. DAVID LINDEMAN PROGRAM DIRECTOR 40.00 X 129,025. 0. 17,330. JOSEPH DETHOMAS PROGRAM DIRECTOR 40.00 X 122,206. 0. 15,389. 1b Total		40.00	Щ				X	_	129,124.	0.	1!	<u>5,3</u>	<u>78.</u>
DAVID LINDEMAN PROGRAM DIRECTOR 40.00 X 129,025. 0. 17,330. JOSEPH DETHOMAS PROGRAM DIRECTOR 40.00 X 122,206. 0. 15,389. 1b Total													
PROGRAM DIRECTOR 40.00 X 129,025. 0. 17,330. JOSEPH DETHOMAS PROGRAM DIRECTOR 40.00 X 122,206. 0. 15,389. 1b Total 12,206. 0. 15,389. 1 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization 1st any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 4 X Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to		40.00					X	<u> </u>	127,006.	0.	2:	3,0	02.
DISEPH DETHOMAS PROGRAM DIRECTOR 40.00 X 122,206. 0. 15,389. 1					ŀ	ŀ		İ					
PROGRAM DIRECTOR 40.00 X 122,206. 0. 15,389. 1b Total		40.00	Ш			<u> </u>	X		129,025.	<u> </u>	1'	<u>7 , 3</u>	<u>30.</u>
1b Total			1	i									
Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization Yes No	PROGRAM DIRECTOR	40.00	Ш			_	X	_	122,206.	0.	1!	5,3	<u>89.</u>
Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization Yes No					,		١,						
Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization Yes No Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to		 	Ш			<u> </u>		<u> </u>				•	
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Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization Yes No Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to				_		-		 -					
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compensation from the organization 12 Yes No Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to					ore	tha	n \$1	00.0			, 20.	<u>. ,</u>	50.
Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to										•			12
line 1a? If "Yes," complete Schedule J for such individual 4 For any Individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to					,							Yes	No
line 1a? If "Yes," complete Schedule J for such individual 4 For any Individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to	3 Did the organization list any former officer	director or tru	stee	. ke	v em	olar	vee.	or h	ighest compensated er	nolovee on			
For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 4 X 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to											3	1	X
and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 4 X 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to											<u> </u>		
6 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to											4	\mathbf{x}	
											5		X

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation
IMPLEMENTATION PARTNERS, 7302 PINEWOOD STREET, FALLS CHRUCH, VA 22046	CONTRACTING	408,965.
SOZER, NIEZGODA & ASSOCIATES, LLC, 1410 HAMPTON ROAD, FAIRFAX STATION, VA 22039	CONTRACTING	177,501.
RCG HEALTH CARE CONSULTING P.O. BOX 3662, BOSTON, MA 02241	CONTRACTING	159,860.
ROBERT HECKERT CONSULTING 8306 TRIPLE CROWN ROAD, BOWIE, MD 20715	CONTRACTING	108,790.
SAND DOLLAR SOFTWARE, INC PO BOX 3509, WARRENTON, VA 20188	103,375.	
2 Total number of independent contractors (including those in 1) who received from the organization ▶ 5	more than \$100,000 in compensation	

Form 990 (2008)

Section B. Independent Contractors

Contributions, gifts, grants and other similar amounts by	<u>VII</u> .`	Statement of Revenue			(A)	(B)	(C)	(7)
gifts, grants lar amounts					(A)	(B)	(C)	(D)
gifts, grants lar amounts					Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
gifts, gra lar amour		Federated campaigns	··)]
gifts, g lar am		Membership dues				}		
声		Fundraising events						
	d	Related organizations	1d					1
Sing,		Government grants (contributions)		766760.				i
흕ם	f	All other contributions, gifts, grants, and						ĺ
끊뒴		similar amounts not included above						1
泛립	_	Noncash contributions included in lines 1a-1f:			12379221.			
- 	<u>n</u>	Total, Add lines 1a-1f		Business Code		,		<u></u>
<u>, l</u>) a	CONTRACTS				1,688,425.		
Program Service Revenue				700075	1,000,425.	1,000, 425.	_	
Ser	c							
e e	d							
9	e							
ፈ	f	All other program service revenue						
	9	Total. Add lines 2a-2f	····	<u> </u>	<u>1,688,425.</u>			
1	3	Investment income (including divide				İ		
		other similar amounts)			1,244,741.		<u> </u>	1244741
	4	Income from investment of tax-exer		•				
*	5	Royalties						
1,	. .		i) Real	(ii) Personal				<u> </u>
'		Gross Rents						
		Rental income or (loss)			1			
		Net rental income or (loss)		1	1			
;			Securities	(ii) Other	-			
	_		386563			1		
	b	Less: cost or other basis				İ		
		and sales expenses 335	96178		J			
	С	Gain or (loss)	<u> 9615.</u>	<u> </u>				i
	d	Net gain or (loss)		<u></u>	-709,615.			-709,615
2	3 a	Gross income from fundraising ever	•	}				
9		including \$	_					
æ		contributions reported on line 1c). S						
Other Revenu		Part IV, line 18						
₹		Less: direct expenses						
١,		Gross income from gaming activitie	-	<u>\</u>				
'		Part IV, line 19						
	b	Less: direct expenses]	j		
		Net income or (loss) from garning ac						
10		Gross sales of inventory, less return						
-		and allowances						
- 1		Less: cost of goods sold						
<u> </u>	c	Net income or (loss) from sales of in	ventory					_
	_	Miscellaneous Revenue		Business Code				
11	18							
-	b							
1	4	All other revenue		-	 	 		
	P	Total. Add lines 11a-11d	•••••	<u> </u>	 			
12		Total Revenue. Add lines 1h, 2g, 3, 4, 5, 8d			14602772	1,688,425.	Ω .	535,126.

Form, 990 (2008)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must comp		e not required to comple		(D).
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	1,866,449.	1,866,449.		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	377,638.	377,638.		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S.			Į	
	See Part IV, lines 15 and 16	8,309,301.	8,309,301.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	739,096.	247,049.	492,047.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	1			
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	5,731,289.	3,745,931.	1,912,914.	72,444.
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	384,307.		128,269.	4,858.
9	Other employee benefits	788,462.		224,221.	10,705.
10	Payroll taxes	580,650.	379,509.	193,802.	7,339.
11	Fees for services (non-employees):		•		
8	Management				
	Legal	136,663.	96,024.	39,045.	1,594.
	Accounting	89,345.		89,345.	
d					
е	Professional fundralsing services. See Part IV, line 17				
1	Investment management fees	60,154.		60,154.	
g	Other	601,022.	526,271.	65,376.	9,375.
12	Advertising and promotion	44,410.	3,674.	10,100.	30,636.
13	Office expenses	602,520.	349,941.	250,680.	1,899.
14	Information technology	117,005.		13,713.	
15	Royalties				
16	Оссиралсу	1,166,393.	831,951.	321,330.	13,112.
17	Travel	1,761,301.	1,374,237.	368,482.	18,582.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	333,357.	244,400.	85,814.	3,143.
20	Interest				
21	Payments to affiliates			_	
22	Depreciation, depletion, and amortization	133,972.		133,972.	
23	Insurance	8,503.	90.	8,413.	
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	DUES AND SUBSCRIPTIONS	362,550.	326,546.	29,093.	6,911.
b	TRAINING	98,381.	40,185.	58,196.	
C	OTHER EXPENSES	76,766.	21,529.	48,488.	6,749.
d	TEMPORARY HELP	39,182.	3,720.	35,462.	
е	PANEL REVIEW	25,908.	25,908.		
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	24,434,624.	19,678,361.	4,568,916.	187,347.
26	Joint Costs. Check here 🕨 🔲 if following				
	SOP 98-2. Complete this line only if the organization		[
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
83201	0 12-18-08				Form 990 (2008)

832010 12-18-08

U.S. CIVILIAN RESEARCH AND DEVELOPMENT FOUNDATION

Form	990 (2008) FOUNDATION		54-	1773406	Pa	ige 11			
Pa	rt X	Balance Sheet								
			(A) Beginning of year		(B End of					
	1	Cash · non-interest-bearing	920.			7	718.			
	2	Savings and temporary cash investments	33,412,525.		28,24	9,1	27.			
	3	Pledges and grants receivable, net	796,208.	3			000.			
	4	Accounts receivable, net	4,738,700.	4	3,21	<u>.5,3</u>	18.			
	5	Receivables from current and former officers, directors, trustees, key								
	ļ	employees, or other related parties. Complete Part II of Schedule L		5						
	6	Receivables from other disqualified persons (as defined under section								
	ł	4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete	ī							
		Part II of Schedule L		6						
Assets	7	Notes and loans receivable, net	_ 	7						
\$	8	Inventories for sale or use	101 000	8						
•	9	Prepaid expenses and deferred charges	191,909.	9		0,7	764.			
	10a	Land, buildings, and equipment: cost basis 10a 1,099,405.		1 1						
	b	Less: accumulated depreciation. Complete	005 053	1 1	0.1	- 4				
	l	Part VI of Schedule D 10b 884,234.	227,973.				<u>171.</u>			
	11	Investments - publicly traded securities	7,999,694.		8,25					
	12	Investments - other securities. See Part IV, line 11	5,365,940.		3,60	1,2	<u> </u>			
	13	Investments · program-related. See Part IV, line 11		13						
	14	Intangible assets	105 004	14	1.0		<u> </u>			
	15	Other assets. See Part IV, line 11	125,204.				<u> </u>			
	_16	Total assets. Add lines 1 through 15 (must equal line 34)	<u>52,859,073.</u>		44,66					
	17	Accounts payable and accrued expenses	987,827.		1,14					
Liabilities	18	Grants payable	11,498,365.		13,15					
	19	Deferred revenue	484,635.		32	9,9	04.			
	20	Tax-exempt bond liabilities		20						
	21	Escrow account liability. Complete Part IV of Schedule D		21_						
	22	Payables to current and former officers, directors, trustees, key employees,								
Liat		highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22						
	23	Secured mortgages and notes payable to unrelated third parties		23						
	24	Unsecured notes and loans payable		24						
	25	Other liabilities. Complete Part X of Schedule D	320,949.		29	5 7	357.			
	26	Total flabilities. Add lines 17 through 25	13,291,776.		14,93					
_		Organizations that follow SFAS 117, check here X and complete		-		<u> </u>				
en	.	lines 27 through 29, and lines 33 and 34.								
9	27	Unrestricted net assets	12,065,829.	27	11,14	6 4	196			
alar	28	Temporarily restricted net assets	27,501,468.		18,58					
Net Assets or Fund Balance	29	Permanentity restricted net assets	27,301,400	29	10/50	يرين				
Š		Organizations that do not follow SFAS 117, check here and								
F	l	complete lines 30 through 34.								
<u>ş</u>	30	Capital stock or trust principal, or current funds		30						
SS	31	Paid-in or capital surplus, or land, building, or equipment fund		31						
₹ .	32	Retained earnings, endowment, accumulated income, or other funds		32						
ž	33	Total net assets or fund balances	39,567,297.		29,73	5.4	45.			
'	34	Total liabilities and net assets/fund balances	52,859,073.		44,66					
Par	rt XI	Financial Statements and Reporting								
						Yes	No			
1	Acco	unting method used to prepare the Form 990: Cash X Accrual	Other							
2a	Were	Were the organization's financial statements compiled or reviewed by an independent accountant?								
b		the organization's financial statements audited by an independent accountant?					Х			
c		es" to lines 2a or 2b, does the organization have a committee that assumes respor								
		w, or compilation of its financial statements and selection of an independent according				<u>L</u> .	<u></u>			
За		result of a federal award, was the organization required to undergo an audit or aud								
		ind OMB Circular A-133?	,	-	ı	X				
<u> </u>	lf "Y∈	es," did the organization undergo the required audit or audits?			3b	X				
	1 12-18	-				990	(2008)			

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

Inspection

Name of t	he organizati	ion U.S. CI	VILIAN RESEA	RCH A	ND DE	VELOP	MENT	E	mployer i	dentificati	on nui	mber
		FOUNDAT					···		54	<u>-1773</u>	<u>406</u>	
Part I			ity Status (All organiz				t.) (see ins	tructions)				
The organ 1	A church, co A school des A hospital or	nvention of churche cribed in section 17 a cooperative hospi search organization	because it is: (Please ches, or association of chur (0(b)(1)(A)(ii). (Attach South association) (at a service organization) (apperated in conjunction)	ches desc chedule E.) described	ribed in se	ection 170	(A)(iii). (At	tach Sch	-	ne hospital	's nam	18,
5 🗀	An organizati		benefit of a college or usete Part II.)	niversity o	wned or op	perated by	a govern	mental un	it describe	d in		
6	A federal, sta An organizati	ate, or local governm	ent or governmental uni eives a substantial part					or from the	e general p	ublic desc	ribed i	n
9 🗌	An organizati activities rela income and t	ion that normally rec ited to its exempt ful	section 170(b)(1)(A)(vi). seives: (1) more than 33 inctions - subject to certa axable income (less sected the Part III.)	1/3% of its ain excepti	support fons, and (2) no more	than 33 1	1/3% of it	s support f	rom gross	invest	ment
10	An organizati An organizati more publicly	ion organized and op ion organized and op y supported organiza	perated exclusively to te perated exclusively for the ations described in sections	he benefit ion 509(a)(of, to perfo 1) or section	orm the fur on 509(a)(2	nctions of	or to can	ry out the p	•		or
e 🗔	foundation m	this box, I certify tha nanagers and other t	Type II at the organization is not han one or more publichten determination from the contraction of the con	y supporte	l directly o	r indirectly ations desc	by one o	ection 50	qualified p		er tha	
•	-		nis box		-							
g			organization accepted a									
			lirectly controls, either al								Yes	No
			upported organization?								\vdash	
	(ii) A family	member of a persor	n described in (I) above?							. <u>119(ii)</u>	1	
			person described in (i)					• • • • • • • • • • • • • • • • • • • •	•••••	119(11)	II	
h 	Provide the fi	ollowing information	about the organizations	the organ	ization suj	oports.						
	of supported inization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section	in col. (i) lis governing	organization sted in your document?	organizat (i) of you	ion in col. support?	organizati (i) organi U.S	zed in the S.?	(vii) An sup	nount of	f
			(see instructions))	Yes	No	Yes	No	Yes	No			
					<u> </u>			_				
				ļ								
Total												
	rivacy Act an	d Paperwork Redu	ction Act Notice, see t	he Instruc	tions for F	orm 990.		Schedu	le A (Form	990 or 99	0-EZ)	2008

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

Schedule A (Form 990 or 990-EZ) 2008 FOUNDATION 54-1773406_Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2004 (e) 2008 **(b)** 2005 (c) 2006 (d) 2007 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 18214739.19682418.11099998. 7699162. 1777795,58474112. 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 18214739.19682418.11099998. 7699162. 1777795.58474112. 4 Total. Add lines 1 - 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11. column (f) 13879449. 6 Public Support. Subtract line 5 from line 4 44594663. Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2004 **(b)** 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total 18214739 19682418 11099998 7699162 1777795. 7 Amounts from line 4 58474112. 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties 550,161 and income from similar sources 373.844. 2289640. 2192660. 1244741. 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 11 Total support. Add lines 7 through 10 65125158. 12 Gross receipts from related activities, etc. (see instructions) 43,831,678. 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f) 68.48 14 % 15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f % 16a 33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization $\triangleright x$ b 33 1/3% support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here, Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions Schedule A (Form 990 or 990-EZ) 2008

Sch	nedule A (Form 990 or 990-EZ) 2008						Page 3
P	art III Support Schedule for	Organizations	Described in	Section 509(a	(Complete on	ly If you checked the b	ox on line 9 of Part I
	ction A. Public Support						
Cal	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not		ļ				
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-					1	
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to	1]			
	the organization without charge	1	}	}	1		
6	Total. Add lines 1 - 5						
	a Amounts included on lines 1, 2, and						
	3 received from disqualified persons					1	
	O Amounts Included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
,	Add lines 7a and 7b						
	Public support (Subtractline 7c from line 6)				<u> </u>	<u> </u>	l
Se	ction B. Total Support	· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·		
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	Amounts from line 6			ļ	<u> </u>		
10:	a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
1	Unrelated business taxable income					1	
	(less section 511 taxes) from businesses acquired after June 30, 1975						
(Add lines 10a and 10b	_				1	
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	r the organization's	s first, second, thi	rd, fourth, or fifth t	ax year as a sect	on 501(c)(3) organia	zation,
	check this box and stop here		<u></u>	·····	<u>,</u>		<u></u> ▶□
<u>Se</u>	ction C. Computation of Publ	ic Support Pe	rcentage				
15	Public support percentage for 2008 (line 8, column (f) d	ivided by line 13,	column (f))		15	%
16	Public support percentage from 2007						
	ction D. Computation of Inves						
17						17	%
18	Investment income percentage from						%
19:	33 1/3% support tests - 2008. If the						
	more than 33 1/3%, check this box a					-	
ı	33 1/3% support tests - 2007. If the						
_	line 18 is not more than 33 1/3%, che						
20							

Schedule A (Form 990 or 990-EZ) 2008

SCHEDULE O FOREIGN CORPORATION'S POSITION IN THE CHAIN OF STATEMENT 3 OWNERSHIP AND THE PERCENTAGES OF STOCK OWNERSHIP

CRDF TECHINNOVATION IS 100% OWNED BY U.S. CIVILIAN RESEARCH AND DEVELOPMENT FOUNDATION.

'SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2008 Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► To be completed by organizations described below.

Attach to Form 990 or Form 990-EZ.

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

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

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

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

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

• Sec	ction 501(c)(4), (5), or (6) organiza	ations: Complete Part III.	., , , , , , , , , , , , , , , , , , ,		
		VILIAN RESEARCH	AND DEVELO	PMENT Emp	loyer identification number
	FOUNDAT	NOI		i	54-1773406
Part	I-A To be completed b	y all organizations exem	pt under section	1 501(c) and section 5	27 organizations.
	See the instructions for S	Schedule C for details.			_
1 Pr	ovide a description of the organi	zation's direct and Indirect politic	cal campaign activities	s in Part IV.	· ·
			· -		6
Part	I-B To be completed b	y all organizations exem	pt under section	n 501(c)(3).	
	See the Instructions for 8	Schedule C for details.			
1 En	ter the amount of any excise tax	incurred by the organization und	der section 4955	> \$	S
2 En	ter the amount of any excise tax	incurred by organization manag	ers under section 495	55	S
3 If t	he organization incurred a section	on 4955 tax, did it file Form 4720	for this year?		Yes No
4a W	as a correction made?	***************************************	•••••••		Yes No
b if '	Yes." describe in Part IV.				
Part	i-C To be completed b	y all organizations exem	ipt under section	1 501(c), except section	on 501(c)(3).
	See the instructions for S				
		d by the filing organization for se			S
		nization's funds contributed to of			
					S
	<u>'</u>	function expenditures. Add lines			
Fo.	m 1120-POL, line 17b		***************************************		· —————
		1120-POL for this year?			
		mployer identification number (E			
Dro	noted and directly delivered to	e if the amount was paid from the a separate political organization,	euch se a conserte co	rungs or were political contri-	outions received and
	additional space is needed, provi		ocon as a separate se	agragated rund or a political	action committee (FAO).
	(a) Name	(b) Address	(e) EIN	(d) Amount poid from	(a) Amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds. If none, enter -0	promptly and directly
			1	, i	delivered to a separate
					political organization. If none, enter -0
					
			-	 	
			i	I	
		·			

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

Schedule C (Form 990 or 990-EZ) 2008

Schedule C (Form 990 or 990-EZ) 2008	FOUNDATION	<u> </u>		54-:	1773406 Page 2
Part II-A To be completed by	, organizations e	exempt under se		t filed Form 576	8
: (election under sec			nedule C for details.		
	ion belongs to an affi				
B Check 🕨 📖 if the filing organizat	ion checked box A a	nd "limited control" pro	ovisions apply.		
	s on Lobbying Expe litures" means amou	nditures ınts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to Influ	ence public opinion (grassroots lobbying)			
b Total lobbying expenditures to influ	rence a legislative bo	dy (direct lobbying)			
c Total lobbying expenditures (add lir	nes 1a and 1b)				
d Other exempt purpose expenditure	s				
e Total exempt purpose expenditures					
f Lobbying nontaxable amount. Ente	r the amount from th	e following table in bo	h columns.		
If the amount on line 1e, column (a) or	r (b) is: The lob	bying nontaxable am	ount is:		
Not over \$500,000	20% of	the amount on line 1e	·		
Over \$500,000 but not over \$1,000	0,000 \$100,00	00 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,50	00,000 \$175,00	00 plus 10% of the exc	ess over \$1,000,000		
Over \$1,500,000 but not over \$17,0	000,000 \$225,00	00 plus 5% of the exce	ess over \$1,500,000.		
Over \$17,000,000	\$1,000,	000.			
g Grassroots nontaxable amount (en					
h Subtract line 1g from line 1a. Enter				 	
Subtract line 1f from line 1c. Enter					
j If there is an amount other than zer	_				<u> </u>
reporting section 4911 tax for this y			04 504/4-1		Yes No
(Some organiza		eraging Period Under section 501(h) electio	section 601(n) n do not have to comp	lete all of the five	
			through 2f of the inst		
	Lobbying Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
33,000					
c Total lobbying expenditures					
d Grassroots non-taxable amount					1
e Grassroots celling amount				<u> </u>	
(150% of line 2d, column (e))					
f Grassroots lobbying expenditures		<u> </u>			

Schedule C (Form 990 or 990-EZ) 2008

Schedule C (Form 990 or 990-EZ) 2008 FOUNDATION

Part II-B To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768

clection under section 501(h)). See the instructions for Schedule C for details.

		<u> </u>	a)	(1)
		Yes	No		ount
1	During the year, did the filing organization attempt to Influence foreign, national, state or	 			
	local legislation, including any attempt to influence public opinion on a legislative matter			1	
	or referendum, through the use of:	ļ			
8	Volunteers?	<u> </u>	X		
	Paid staff or management (include compensation in expenses reported on lines 1c through 1))?	X			
C	Media advertisements?	_	X	 	
	Mailings to members, legislators, or the public? Publications, or published or broadcast statements?		X	<u> </u>	-
f			X	<u> </u>	
9				3,	7,314.
•	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?		х		11275
	Other activities? If "Yes," describe in Part IV		X		
	Total lines 1c through 1i			3	7,314.
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X		
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
<u>d</u>	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Pa	To be completed by all organizations exempt under section 501(c)(4)	, section	501(c)(5), or sect	ion
	501(c)(6). See the Instructions for Schedule C for details.				
_				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
Pai	Did the organization agree to carryover lobbying and political expenditures from the prior year? † III-B To be completed by all organizations exempt under section 501(c)(4)	section	<u> 3</u> 501/c\/5	orsect	ion
<u> </u>	501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR				
	answered "Yes." See Schedule C instructions for details.		, .,		
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political				
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
b	Carryover from last year				
C	***************************************	••••••	2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		····
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and			•	
_	expenditure next year?	••••••			
5 Par	Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4) t IV Supplemental Information		5		
	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; a	od Dod U.D.	las di Als		AL! A
	ny additional information.	10 Part II·B,	iine 11. Aisi	o, complete	tnis part
101 4	iy additional morniquoti.				
					
			···		

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

2008 Open to Public Inspection

Name of the organization

U.S. CIVILIAN RESEARCH AND DEVELOPMENT FOUNDATION

Employer Identification number 54-1773406

Pa	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in		ed funds
	are the organization's property, subject to the organization's	-	
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of		
Pa	t !! Conservation Easements. Complete if the or	ganization answered "Yes" to Form 990, Pa	art IV, line 7.
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).	
	Preservation of land for public use (e.g., recreation or p	pleasure) Preservation of an hist	torically important land area
	Protection of natural habitat	Preservation of certifie	ed historic structure
	Preservation of open space		
2	Complete lines 2a-2d if the organization held a qualified cons	servation contribution in the form of a cons	ervation easement on the last day
	of the tax year.		·
	·	•	Held at the End of the Year
а	Total number of conservation easements		2a
ь	Total acreage restricted by conservation easements		
c	Number of conservation easements on a certified histone str		
d	Number of conservation easements included in (c) acquired		
3	Number of conservation easements modified, transferred, re		
	year >	•	•
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the pe	nodic monitoring, inspection, violations, an	nd
	enforcement of the conservation easements it holds?		Yes No
6	Staff or volunteer hours devoted to monitoring, inspecting, a		
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing easements during the year ▶ \$	
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservat	ion easements in its revenue and expense	statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes t	he organization's accounting for
	conservation easements.		
Pa	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or Ot	ther Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116, no	ot to report in its revenue statement and ba	lance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pub	olic service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these		
b	If the organization elected, as permitted under SFAS 116, to	report in its revenue statement and balance	ce sheet works of art, historical treasures,
	or other similar assets held for public exhibition, education, of	or research in furtherance of public service,	provide the following amounts relating to
	these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		> \$
	(II) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical tre		
	the following amounts required to be reported under SFAS 1	16 relating to these items:	
a	Revenues included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		

832051 12-23-08

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

Schedule D (Form 990) 2008

	dule D (Form 990) 2008 FOUNDAT							54-17			
Par	t III Organizations Maintaining C	Collections of A	rt, Hist	torical Tre	easures, e	or Othe	r Simila	ır Asse	ts (cont	inued)	
3	Using the organization's accession and other	r records, check any	y of the fe	ollowing tha	t are a signıf	icant use	of its coll	ection Ite	ms (chec	k ali	
	that apply):										
8	Public exhibition	•			hange progn						
b	Scholarly research	•	الما ف	Other							
C	Preservation for future generations										
4	Provide a description of the organization's c	ollections and explai	in how th	ey further ti	ne organizati	nexe a'noi	npt purpo	se in Par	XIV.		
5	During the year, did the organization solicit of								_		_
	to be sold to raise funds rather than to be m								Yes		No
Par	rt IV Trust, Escrow and Custodia	_	. Compl	ete if organi	zation answ	ered "Yes	" to Form	990, Par	t IV, line	9, or	
	reported an amount on Form 990, Pa										
1a	Is the organization an agent, trustee, custod								_		_
	on Form 990, Part X?							ــــ	」Yes	<u> </u>	No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing t	table:							
									Amoun	<u>t</u>	
C	Beginning balance			••••			. 1c				
d	Additions during the year			•			. 1d				
8	Distributions during the year			*******			. 1e				
f	Ending balance						. 11				
2a	Did the organization include an amount on F	orm 990, Part X, line	217					∟	」 Yes	L	No
	If "Yes," explain the arrangement in Part XIV						·				
Pa	t V Endowment Funds. Complete		ered "Ye:	s" to Form 9							
		(a) Current year	(b) P	rior year	(c) Two yea	rs back (d) Three ye	ears back	(e) Four	years	<u>back</u>
1a	Beginning of year balance	•					_				
b	Contributions		}								
C	Investment earnings or losses								_		
d	Grants or scholarships										
e	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance		<u>l</u>								
2	Provide the estimated percentage of the year		as:								
а	Board designated or quasi-endowment		%								
b	Permanent endowment										
		%									
За	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are held a	nd administe	ered for th	e organiz	ation	r	 -	
	by:								r	Yes	No
	(i) unrelated organizations						••••••	•••••	3a(i)		
	(ii) related organizations					•••••	••••••		3a(ii)		
b	If "Yes" to 3a(ii), are the related organization:								3b	1	
4	Describe in Part XIV the intended uses of the								_		
Par	t VI Investments - Land, Building										
	Description of investment	(a) Cost or o basis (investi		(b) Cost basis		(c) De	preciation	ו	(d) Boo	k value	3
1a	Land										
Ь	Buildings										
C	Leasehold improvements				1,384.		7,71				<u>68.</u>
d	Equipment				<u>5,333.</u>		74,87				<u>60.</u>
	Other				2,688.	1	01,64	15.	1	<u>1,0</u>	<u>43.</u>
Total	. Add lines 1a-1e. (Column (d) should equal Fo	orm 990, Part X, colu	umn (B), i	line 10(c).)	********	**********			21	5,1	<u>71.</u>

Schedule D (Form 990) 2008

U.S. CIVILIAN RESEARCH AND DEVELOPMENT FOUNDATION

Schedule D (Form 990) 2008 FOUNDATION			54	-1773406 Page
Part VII Investments - Other Securities. Se	e Form 990, Part X, line		- 	
(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valua t or end-of-year mar	
Financial derivatives and other financial products				
Closely-held equity interests				
Other				
ALTERNATIVE INVESTMENTS	3,560,360	D. END-OF-Y	CAR MARKET	VALUE
CRDF TECHINNOVATIONS, LLC	41,000	COST		
Total. (Col (b) should equal Form 990, Part X, col (B) line 12.)	3,601,360	0.		
Part VIII Investments - Program Related. s	ee Form 990, Part X, lin	e 13.		
(a) Description of investment type	(b) Book value		(c) Method of value	tion:
(a) Description of investment type	(b) book value	Cos	t or end-of-year mar	ket value
•				
<u> </u>				
Total. (Col (b) should equal Form 990, Part X, col (B) line 13.)				
Part IX Other Assets. See Form 990, Part X, line	15.	· · · · · · · · · · · · · · · · · · ·		
	Description			(b) Book value
				
	- , <u>-</u>			<u> </u>
				
				
Total. (Column (b) should equal Form 990, Part X, col (B) li	ine 15.)			
Part X Other Liabilities. See Form 990, Part X,				
Fart A Other Liabilities, 588 form 990, Part X.		(b) Amount		
(a) Description of liability				
(a) Description of liability				
(a) Description of liability Federal income taxes		295 357		
(a) Description of liability Federal income taxes		295,357.		
		295,357.		
(a) Description of liability Federal income taxes		295,357.		
(a) Description of liability Federal income taxes		295,357.		
(a) Description of liability Federal income taxes		295,357.		
(a) Description of liability Federal income taxes		295,357.		
(a) Description of liability Federal income taxes		295,357.		
(a) Description of liability Federal income taxes		295,357.		
(a) Description of liability Federal income taxes		295,357.		

under FIN 48. 832053 12-23-08

	dule D (Form 990) 2008 FOUNDATION			<u>54-17734</u>	06 Page 4
Pai	t XI Reconciliation of Change in Net Assets from Form 9	90 to Financial S	tatements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	14,6	02,772.
2	Total expenses (Form 990, Part IX, column (A), line 25)				34,624.
3	Excess or (deficit) for the year. Subtract line 2 from line 1				31,852.
4	Net unrealized gains (losses) on investments		····		
	Donated services and use of facilities				
5			11		
6	Investment expenses		····		
7	Prior period adjustments				
8	Other (Describe in Part XIV)				
9	Total adjustments (net). Add lines 4-8				21 050
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and				31,852.
_	t XII Reconciliation of Revenue per Audited Financial Sta				
1	Total revenue, gains, and other support per audited financial statements		••••••	. _1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1			
а	Net unrealized gains on investments			4	
b	Donated services and use of facilities			_	
C	Recoveries of prior year grants	2c		_	
d	Other (Describe in Part XIV)	2d			
8	Add lines 2a through 2d	•••••		. 2e	
3	Subtract line 2e from line 1			. 3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
ь	Other (Describe in Part XIV)	4b		7	
C	Add lines 4a and 4b			4c	
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 1			. 5	
Pa	t XIII Reconciliation of Expenses per Audited Financial St	atements With E	xpenses pe	er Return	
1	Total expenses and losses per audited financial statements				
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	••••••••••••	***************************************	'	
 a	Donated services and use of facilities	2a			
b	Prior year adjustments			-1 1	
_	Losses reported on Form 990, Part IX, line 25		_		
c d	Other (Describe in Part XIV)			-	
_	Add lines 2a through 2d	···· ····· <u> </u>		\dashv	
_					
3	Subtract line 2e from line 1		••••••	. 3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1.1			
a	Investment expenses not included on Form 990, Part VIII, line 7b			-	
D	Other (Describe in Part XIV)			\dashv . I	
C	Add lines 4a and 4b		•••••	. <u>4c</u>	
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line	18.)	***************************************	. 5	
	t XIV Supplemental Information				
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9;	Part III, lines 1a and	4; Part IV, lines	i 1b and 2b; Part V	, line 4; Part
X; Pa	rt XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.				
	·····				
					
					_
_					
					. —
		 			
			-	Sebedule D/Fe	

Schedule F (Form 990)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States

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

2008
Open to Public Inspection

Name of the organization

U.S. CIVILIAN RESEARCH AND DEVELOPMENT

Employer identification number

FOUNDATION 54-1773406

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes"

to Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? _______X Yes No

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

	4	48	PROGRAM SERVICES, GRANTS AND OFFICE MAINTENANCE	PROGRAM MANAGEMENT, RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS	7,978,015
BAST ASIA AND THE PACIFIC	0	0			
FACIFAC			CRANTS	RESEARCH & DEVELOPMENT	215 717
			NACENTO	SCIENTIFIC GRANTS RESEARCH & DEVELOPMENT	315,717
EUROPB	0	0	GRANTS	SCIENTIFIC GRANTS	158,061
MIDDLE EAST AND NORTH AFRICA	0	0	crants	RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS	1,784,699
SOUTH ASIA	o	0	GRANTS	RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS	364,575
				RESEARCH & DEVELOPMENT	304,575
NORTH AMERICA	О	0	GRANTS	SCIENTIFIC GRANTS	26,690

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

Schedule F (Form 990) 2008

U.S. CIVILIAN RESEARCH AND DEVELOPMENT FOUNDATION

recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any 54-1773406 Schedule F (Form 990) 2008

Part II Grants and Other

Page 2

		STORES OF THE PROPERTY.						
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV appraisal, other)
		BAST ASIA AND THE	RESEARCH & DEVELOPMENT					
		נטרזניר	SCIENTIFIC GRANIS	700	WARE TRANSFER			
		EAST ASIA AND THE	RESEARCH & DEVELOPMENT					
		PACIFIC	SCIENTIFIC GRANTS	155,138.	155, 138, WIRE TRANSFER	0,		
			RESEARCH &					
			DEVELOPMENT	!				
		EUROPE	SCIENTIFIC GRANTS	21, 315.	WIRE TRANSFER	0		
			RESEARCH &					
		EUROPE	DEVELOPMENT SCIENTIFIC GRANTS	56,550,	56,550, WIRE TRANSPER	0		
			RESEARCH &					
		MIDDLE EAST AND	DEVELOPMENT	-				
		NORTH AFRICA	SCIENTIFIC GRANTS	97, 893.	WIRE TRANSFER	0		
			RESEARCH &					
		MIDDLE EAST AND	DEVELOPMENT					
		NORTH APRICA	SCIENTIFIC GRANTS	5,931.	WIRE TRANSFER	0		
			RESEARCH &					
		MIDDLE BAST AND	DEVELOPMENT					
		NORTH APRICA	SCIENTIFIC GRANTS	58,787	WIRE TRANSFER	0		
	·		RESEARCH &					
	-	MIDDLE RAST AND	DEVELOPMENT					
			SCIENTIFIC GRANTS	53,605,	53,605,WIRE TRANSFER	0		
2 Enter total number of	organizations that ar	re recognized as charities	Enter total number of organizations that are recognized as charities by the foreign country or for which the grantee or counsel has provided a	which the grante	e or counsel has pro	vided a		
	ivalency letter		***************************************			A		13
3 Enter total number of other organizations or entitles	other organizations	or entitles				A		7

25

Schedule F (Form 990) 2008

832072 12-18-08

U.S. CIVILIAN RESEARCH AND DEVELOPMENT FOUNDATION

Schedule F (Form 990) 2008 FOUNDATION 54-06

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

Use Schedule F-1 (Form 990) if additional space is needed.

Page 3

54-1773406

Use Schedule F-1 (Form 990) If additional space is needed.)) If additional space is ne	eded.					
(a) Type of grant or assistance	(b) Region	ımber of ipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
RESEARCH & DEVBLOPMENT	EAST ASIA AND THE						
SCIENTIFIC GRANTS	PACIFIC	4	81, 508.	WIRE TRANSPER	0		
RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS	EUROPE	4	50,288,	WIRE TRANSPER	ó		
RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS	MIDDLE BAST AND NORTH AFRICA	21	672 307	WIRE TRANSFER	c		
RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS	RUSSIA AND THE NEWLY INDEPENDENT STATES	177	3361971.	WIRE TRANSFER	0		
RESEARCH & DEVELOPMENT SCIENTIPIC GRANTS	SOUTH ASIS	7	106 350	106 350 WIRE TRANSFER	o		
RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS	NORTH AMERICA	F	8 643	ASPANSER STIM	0		
						,	
		:				Schedu	Schedule F (Form 990) 2008

<u>Schedule F (Form 990) 2008 FOUNDATION 54-1773406 Page 4</u>
Part IV Supplemental Information
Complete this part to provide the information required by Part I, line 2, and any other additional information.
SCHEDULE F, PART I, LINE 2: GRANT AND CONTRACT MANAGEMENT IS PERFORMED BY
THE GLOBAL OPERATIONS PROGRAM SUPPORT SERVICES (GOPSS). GOPSS REVIEWS ALL
ACTIVITY RELATED TO EACH AWARD, GRANT, CONTRACT THAT CRDF IS CURRENTLY
OBLIGATED UNDER. THEY SERVE AS A DIRECT INTERFACE WITH FIELD OFFICES.
THEIR RISK MITIGATION PRACTICES INCLUDE MULTI-LEVEL INTERNAL REVIEWS OF
ALL PAYMENT REQUESTS, REGULAR SITE VISITS AND PROJECT AUDITS, CLEARLY
DEFINED POLICIES AND PROCEDURES, DETAILED GRANTEE REPORTING REQUIREMENTS,
MANAGING DONOR AUDITS, INTERNAL REVIEWS, FREQUENT STAFF TRAINING AND
KNOWLEDGE TESTING, ROTATION OF STAFF AND PROMOTION OF BEST PRACTICES IN
LINE WITH THE COSO MODEL. GOPSS ALSO IMPLEMENTED IN 2008 AN INTERNAL
AUDIT OF ITS FUNCTIONS AND PROCEDURES BY EXTERNAL AUDITORS WHICH WILL BE
CONDUCTED ANNUALLY AND REGULAR REVIEWS AND UPDATES DEPARTMENTAL POLICIES
AND PROCEDURES INCLUDING DEVELOPMENT OF AN ENHANCED PROJECT AUDIT PROGRAM
TO BE IMPLEMENTED IN 2009.

Page 2	
54-1773406	(II)
	dule F (Form 990), Part
	the United States. (Sche
N(nce or Entities Outside
FOUNDATION	Grants and Other Assista
Schedule F-1 (Form 990) 2008	Continuation of
Schedu	Part

		Assistance of Enumes	Outside III OIIII Glates. (3	אכופסחום ב (בסווו ממס), במני וו	ago, ran II)			
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		MIDDLE EAST AND	RESEARCH & DEVELOPMENT	1				
		NORTH AFRICA	SCIENTIFIC GRANTS	43,800.	WIRE TRANSFER	0		
		RUSSIA AND THE	RESEARCH &					
		NEWLY INDEPENDENT	DEVELOPMENT			•		
		STATES	SCIENTIFIC GRANTS	700 07	MIRE TRANSFER	0		
		RUSSIA AND THE	RESEARCH &					_
		NEWLY INDEPENDENT	DEVELOPMENT		100000000000000000000000000000000000000	c		
		STATES	SCIENTIFIC GRANTS	7 000 47	44 000 WIRE TRANSFER	o o		
		RUSSIA AND THE	RESEARCH &					
		NEWLY INDEPENDENT	DEVELOPMENT					
		STATES	SCIENTIFIC GRANTS	132,245	WIRE TRANSFER	0.		
		RUSSIA AND THE	RESEARCH &					
		NEWLY INDEPENDENT	DEVELOPMENT	•		-		
		STATES	SCIENTIFIC GRANTS	162,240	WIRE TRANSFER	0	:	
		RUSSIA AND THE	RESEARCH &					
		NEWLY INDEPENDENT	DEVELOPMENT					
		STATES	SCIENTIFIC GRANTS	71,562,	WIRE TRANSFER	0		
		RUSSIA AND THE	RESEARCH &					
		NEWLY INDEPENDENT	DEVELOPMENT			•		
		CHIES	SCIENTIFIC GRANTS	16/ 000	WIRE TRANSFER	0		
		RUSSIA AND THE	RESEARCH &		•			
		NEWLY INDEPENDENT	DEVELOPMENT					
		STATES	SCIENTIFIC GRANTS	6.550.	WIRE TRANSFER	0		
		RUSSIA AND THE	RESEARCH &			_		
		ENT	DEVELOPMENT					
		STATES	SCIENTIFIC GRANTS	21,467.	21 467 WIRE TRANSFER	0		
·							Schedul	Schedule F-1 (Form 990) 2008

SCHEDULE I				,			OMB No. 1545-0047
(Form 990)		Grants and Governn	Grants and Other Assistance to Organizations, Governments, and Individuals in the U.S.	to Organizations uals in the U.S.			2008
Department of the Treasury	№ Сошр	Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.	n answered "Yes,'	on Form 990, Pa	rt IV, lines 21 or 22.		Open to Public
			► Attach to Form 990.	n 990.			Inspection
Name of the organization U.S. CIVIL FOUNDATION	IAN	RESEARCH AND DE	DEVELOPMENT			-	Employer Identification number 54-1773406
Part General Information on Grants and Assistance	ind Assistance						
1 Does the organization maintain records to substantiate the amount	to substantiate the		or assistance, the	grantees' eligibility	for the grants or ass	of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	
	stance?						No No
Part II	ocedures for mon	doing the use of grant	use of grant funds in the United States.	States.	\\ \frac{1}{2} \\ \fr	1 - 0	NY BOARD CONTRACTOR
_	Governments an	d Organizations in the	United States, Co	omplete if the orga	nization answered "Y	es on Form 990, Part	IV, line 21, for any
1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of non-cash assistance or government assistance assistance (e) Multiple of the control of the con	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AARON DIAMOND AIDS RESEARCH					Danto		
WE,			4	•			
NEW YORK, NY 10016	13-3540234	501 (C)(3)	10 870.	0			SCIENTIFIC GRANTS
THE ASSOCIATION OF ENERGY 4025 PLEASANTDALE RD, STE 420			•				RESEARCH & DEVELOPMENT
ATLANTA GA 30340	58-1306354		58,661.	0			SCIENTIFIC GRANTS
CA STATE U, FULLERTON 2600 EAST NUTWOOD AVENUE FULLERTON, CA 92831	95-2081258	501. (C)(3)	7, 273,	0			RESBARCH & DEVELOPMENT SCIENTIFIC GRANTS
CENTRAL NY RSCH CORP				•			
800 IRVING AVE	***************************************		r c	•			RESEARCH & DEVELOPMENT
THE CHIEF STORYBELLER	7.700		* TO CT				
333 ELMCROFT BLVD, SUITE 204							RESEARCH & DEVELOPMENT
ROCKVILLE, MD 20850	20-1313005		6.287.	0			SCIENTIFIC GRANTS
COMMERCIAL MEDIA, INC				-			
P.O. BOX 26165							RESEARCH & DEVELOPMENT
₽4.			12,189,	0.1			SCIENTIFIC GRANTS
2 Enter total number of section 501(c)(3) and government organizations	nd government or	ganizations			***************************************		•
-1	S			***************************************			15.
LHA Fer. Privacy Act and Paperwork Reduction Act Notice, see the	ction Act Notice,	see the instructions for Form 990	or Form 990.				Schedule I (Form 990) 2008

54-1773406

Schedule I (Form 990) 2008 FOUNDATION

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

Use Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS		377 638	c		
			•		
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	le the information	required in Part I, I	ine 2, and any other	additional information.	
SCHEDULE I, PART I, LINE 2: GRANT	AND CONTE	CONTRACT MANAGEMENT	IS	PERFORMED BY	
THE GLOBAL OPERATION PROGRAM SUPPORT		CES (GOPSS	SERVICES (GOPSS). GOPSS REVIEWS	EVIEWS ALL	
ACTIVITY RELATED TO EACH AWARD, GRA	GRANT, CONT	TRACT UNDE	CONTRACT UNDER WHICH CRDF	DF IS	
CURRENTLY OBLIGATED. THEY SERVE AS	Ø	CT INTERFA	CE WITH FI	DIRECT INTERFACE WITH FIELD OFFICES.	
THEIR RISK MITIGATION INCLUDES MULTI-	TI-LEVEL		REVIEWS OF	INTERNAL REVIEWS OF ALL PAYMENT	
REQUESTS, REGULAR SITE VISITS AND PR	PROJECT	AUDITS,	LEARLY DEF	CLEARLY DEFINED POLICIES	
AND PROCEDURES, DETAILED GRANTEE REPORTING REQUIREMENTS,	EPORTING	REQUIREME	NTS, MANAG	MANAGING DONOR	
AÚDITS, INTERNAL REVIEWS, FREQUENT	STAFF TRAINING	MAINING AN	AND KNOWLEDGE	E TESTING,	
ROTATION OF STAFF AND PROMOTION OF		ACTICES IN	BEST PRACTICES IN LINE WITH THE COSO	THE COSO	
832102 12-18-08		30			Schedule I (Form 990) 2008

Continuation Sheet for Schedule I (Form 990) SCHEDULE 1-1

OMB No. 1545-0047

SCHEDULE F-1 (Form 990)		Continua Attach to For	tion Sheet for Scl rm 990 to list edd	Continuation Sheet for Schedule I (Form 990) Attach to Form 900 to list additional information for)) , for		2008
he Treasury e Service			Part II and Part III, Schedule I (Form 990).	Jule I (Form 990).		;	Open to Public Inspection
Name of the organization U.S. CIVIL	IAN	RESEARCH AND DE	AND DEVELOPMENT			Employe	Employer Identification number
Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)	Assistance to Go	vernments and Organ	nizations in the U.	S. (Schedule I (For	m 990), Part II.)	,	004011-4
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
C-SCAN TECHNOLOGIES PO HOX 12996							
SCOTTSDALE, AZ 85267	86-0812664		7,988.	0			RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
GW UNIVERSITY 44983 KNOLL SQUARE ASHBURN, VA 20147	53-0196584	501 (C)(3)	92,573.				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
GLOBAL LANGUAGE SERVICES 825 NEW HAMPSHIRE AVE, NW WASHINGTON, DC 20037	59-3390053		50,895,	0			RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
IMPLEMENTATION PARTNERS 7302 PINEWOOD ST PALLS CHURCH, VA 22046	84-1660438		401.907.	0			RESEARCE & DEVELOPMENT SCIENTIFIC GRANTS
	56-2342253		22,086,	0			RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
MIDWEST RESEARCH INSTITUTE 425 VOLKER BLVD KANSAS CITY, MO 64110	44-0545878	501 (C)(3)	51.311.	0			RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
NATIONAL JEWISH MD & RC 1400 JACKGON STREET DENVER, CO 80206	74-2044647	501 (C)(3)	9.130.	0			RESEARCH & DEVELOPMENT SCIEWTIFIC GRANTS
PENN STATE UNIVERSITY 105 MALL BLVD, SUITE 313 WEST MONROEVILLE, PA 15146	25-6053773	501 (C)(3)	22,015.	0			RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS

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

SCHEDULE 1-1

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization FOUNDATION Part Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part III)		A Augen to re	Attach to Form 990 to list additional imormation for Part II and Part III, Schedule I (Form 990).	iuonai imormatio	יסו עי		Open to Public
Name of the organization U.S. C. FOUNDA. Part Continuation of Grants and C.				aule I (Form 590).			Inspection
\sqcup	IAN	RESEARCH AND DE	AND DEVELOPMENT			Employ	Employer identification number 54-1773406
	Other Assistance to Go	overnments and Orga	nizations in the U.	S. (Schedule I (Fo	im 990), Part II.)		00B0774
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisa, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RCG HEALTH CARE CONSULTANT P.O. BOX 3662 BOSTON, MA 02241	04-2807148		159,868,	0			RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
THE REGENTS UC, RIVERSIDE PO BOX 112 RIVERSIDE, CA 92521	23-7328167	501 (C)(3)	13,831,	0		-	RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
RESEARCH FOUNDATION OF STATE U OF NY - P.O. BOX 9 - ALBANY, NY 12201		501 (C)(3)	37,458	0			RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
RHODE ISLAND HOSPITAL 593 EDDY STREET PROVIDENCE, RI 02903	05-0377502	501 (C)(3)	16,941,	0			
ROBERT HECKERT CONSULTING 8306 TRIPLE CROWN RD BOWIE, MD 20715	30-0541007		118,790	0			RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
SOZER, NIEZGODA & ASSOC 407 CROWN VIEW DRIVE ALEXANDRIA, VA 22314	33-1071111		177, 501.	0			
STEPTOE & JOHNSON, LLP 1330 CONNECTICUT AVE NW, STE 700 WASHINGTON, DC 20036	52-1349790		21, 351.	0			RESEARCH & DEVELOPMENT SCIENTIEIC GRANTS
SUPERNOVA TRANSLATIONS 2306 HORSEFERRY COURT RESTON, VA 20191	54-1992741		32,692	o			RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
2 Enter total number of Section 501(c)(3) and government organizations	(3) and government or	ganizations					
s Einer total number of otner organizations	nd Paperwork Reducti	on Act Notice, see the	Instructions Zor F	Form 990.			Schedule I-1 (Form 990) 2008

OMB No. 1545-0047 Continuation Sheet for Schedule I (Form 990) SCHEDULE 1-1

SCHEDULE I-1			Continua	Continuation Sheet for Schedule I (Form 990)	nedule i (Form 99	6		0000
(Form 990) Department of the Treasury			A Attach to For Part II s	Attach to Form 990 to list additional information for Part II and Part III, Schedule I (Form 990).	itional informatio	n far		Open to Public
Name of the organization	U.S. CIVI	CIVILIAN RESEARCE	I	AND DEVELOPMENT			Employe	Employer identification number
L	FOUNDATION	Z						54-1773406
Part Continuation of	Grants and Other	Assistance to Go	Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)	nizations in the U.	S. (Schedule I (Fo	m 990), Part II.)		
(a) Name and address of organization or government	ddress of overnment	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TECHNOLOGY MANAGEMENT COMPANY 2500 LOUISIANA BLVD., NE, SUI ALHUQUEROUE, NM 87110	NT COMPANY ., NE, SUITE 300	20-1617646		13,439.	0	,		RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
TOTAL LANGUAGE RESOURCES INC 137 LUCERNE ST DECATUR, GA 30030	RCES INC			10,054.	0			RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
TRUSTEES OF DARTMOUTH COLLEGE 11 ROPE FERRY ROAD, #6210 HANOVER, NH 03755	H COLLEGE	02-022111	501 (C)(3)	6.356,	0			RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
AUBURN UNIVERSITY 317 SOUTH COLLEGE ST AUBURN, AL 36849		63-6022422	501 (C)(3)	5,078,	0			RESEARCH & DEVBLOPMENT SCIENTIFIC GRANTS
COLORADO STATE UNIVERSITY 555 S HOWES ST FORT COLLINS, CO 80523	RSITY 523	84-6000545	501 (C)(3)	16,952,	0			
EMORY UNIVERSITY 201 DOWMAN DRIVE ATLANTA, GA 30323		58-0566256	501 (C)(3)	19,863,	0			RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
FLORIDA ATLANTIC UNIVERSITY 777 GLADES ROAD BOCA RATON, FL 33431	VERSITY	59-0917284	501 (C)(3)	7,642.	0			RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
	SITY 6	59-1961248	501 (C)(3)	5,500,	0			RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
2 Enter total number of Section 501(c)(3) and government organizations	Section 501(c)(3) and	d government org	panizations					A

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

3 Enter total number of other organizations

83 Enter total number of other organization

Schedule I-1 (Form 990) 2008

SCHEDULE 1-1

Continuation Sheet for Schedule I (Form 990)

OMB No. 1545-0047

SCHEDULE I-1		Continua	Continuation Sheet for Schedule I (Form 990)	edule I (Form 990	~		2008
(FOLITION) Department of the Treasury Internal Revenue Service		▲ Attach to For Part II a	Attach to Form 990 to list additional information for Part II and Part III, Schedule I (Form 990).	tional informatior Iule I (Form 990).	ı for		Open to Public Inspection
tion U.S.	IAN	RESEARCH AND DE	AND DEVELOPMENT			Employe	Employer Identification number
Part Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)	Assistance to Go	overnments and Organ	nizations in the U.	S. (Schedule I (For	m 990), Part II.)	0	24-1//340b
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IDAHO STATE UNIVERSITY 921 S BTH AVE POCATELLO, ID 83209	82-6000924	501 (©)(3)	5,005,	0			RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
JOHNS HOPKINS UNIVERSITY 1101 E, 33RD ST BALTIMORE, MD 21218	52-0595110	501 (C)(3)	5,313	0.			RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
LEHIGH UNIVERSITY 27 MEMORIAL DRIVE WEST BETHLEHEN, PA 18015	24-0795445	501 (0)(3)	14,020	0			RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
MISSISSIPPI STATE UNIVERSITY 133 ETHEREDGE HALL MISSISSIPPI STATE, MS 39762	64-6000819	(3)	6,543	0			RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
NORTHWESTERN UNIVERSITY 2020 RIDGE AVE EVANSTON, IL 60208	36-2167817	501 (C)(3)	6,371	0			RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
OKLAHOMA STATE UNIVERSITY PO BOX 645 STILLMATER, OK 74076	73-6017987	501 (C)(3)	7,375.	0			RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
UNIVERSITY OF MARYLAND CHESAPEAKE BUILDING, ROOM 4101 COLLEGE PARK, MD 20742	52-6002033	501 (C)(3)	14,184.	0			
UNIVERSITY OF CENTRAL FLORIDA 4000 CENTRAL FLORIDA BOULEVARD ORLANDO, FL 32816	59-2924021	501 (C)(3)	10,461.	0			

² Enter total number of Section 501(c)(3) and government organizations
3 Enter total number of other organizations.

Schedul 832241 12-17-08 LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructional for Form 990.

SCHEDULE I-1 (Form 990) Department of the Treasury Infernal Revenue Service		Continua ▲ Attach to Fo Part II	Continuation Sheet for Schedule I (Form 990) tach to Form 990 to list additional information for Part II and Part III, Schedule I (Form 990).	hedule I (Form 990 itional information dule I (Form 990).	J) n for		OMB No. 1545-0047 2008 Open to Public Inspection
 	CIVILIAN RESE ATION	RESEARCH AND DE	AND DEVELOPMENT			Employe 5	Employer identification number 54-1773406
Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)	Assistance to Go	vernments and Orga	nizations in the U	S. (Schedule I (For	m 990), Part II.)		
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF ILLINOIS FOUNDATION 1305 W GREEN ST URBANA, IL 61801	37-6006007	501 (C)(3)	35,583	0			RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
UNIVERSITY OF KANSAS CITY 5100 ROCKHILL RD KANSAS CITY, MO 64110	44-0546001	501 (C)(3)	8.517.				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
UNIVERSITY OF LOUISVILLE UNIVERSITY OF LOUISVILLE LOUISVILLE	61-1014882	501 (C)(3)	16.640	0			
UNIVERSITY OF MASSACHUSETTS 140 HICKS WAY AMHERST, MA 01003	04-3167352	501 (C)(3)	14,000	0			RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
UNIVERSITY OF ROCHESTER 1325 MT HOPE AVE, SUITE 260 ROCHESTER, NY 14620	16-0743209		6,230.	0			RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
UNIVERSITY OF TEXAS AT AUSTIN P.O. BOX 7159 AUSTIN, TX 78713	74_6000203	501 (C)(3)	8, 383,	0,0			RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
UNIVERSITY OF TEXAS AT TYLER 3900 UNIVERSITY BLVD TXLER, TX 75799	75_1396988	501 (C)(3)	20.432.	0			
UNIVERSITY OF TEXAS MEDICAL BRANCH 301 UNIVERSITY BOULEVARD GALVESTON IX 77555	74-6000949	501 (C)(3)	19,555.	0			RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
2 Enter total number of Section 501(c)(3) and government organizations	nd government org	janizations					A

² Enter total number of Section 501 (5)(3) and government organizations

3 Enter total number of other organizations

82224, 12-17-06 LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions 50r Form 990.

Continuation Sheet for Schedule I (Form 990) SCHEDULE I-1 (Form 990)

Open to Public OMB No. 1545-0047 2008

RESEARCH & DEVELOPMENT RESEARCH & DEVELOPMENT RESEARCH & DEVELOPMENT RESEARCH & DEVELOPMENT RESEARCH & DEVELOPMENT RESEARCH & DEVELOPMENT LESEARCH & DEVELOPMENT RESEARCH & DEVELOPMENT Inspection (h) Purpose of grant or assistance Employer identification number SCIENTIFIC GRANTS SCIENTIFIC GRANTS SCIENTIFIC GRANTS SCIENTIFIC GRANTS SCIENTIFIC GRANTS SCIENTIFIC GRANTS SCIENTIFIC GRANTS SCIENTIFIC GRANTS 54-1773406 (g) Description of non-cash assistance appraisal, other) (f) Method of (book, FMV, Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.) valuation Attach to Form 990 to list additional information for Part II and Part III, Schedule I (Form 990). ö ö 0 (e) Amount of non-cash assistance U.S. CIVILIAN RESEARCH AND DEVELOPMENT 214 6,282 6 190 6,904 9 586 5,555, 6,973 19 333 (d) Amount of cash grant (c) IRC Code section if applicable 501 (C)(3) 501 (C)(3) 501 (C)(3) 501 (C)(3) 501 (C)(3) 501 (C)(3) 501 (C)(3) 501 (C)(3) 91-6001537 23-7318742 74-1238434 21-0634501 54-6001796 34-6401483 16-1609850 74-1109620 (B) EIN FOUNDATION NEW JERSEY - 3 RUTGERS PLAZA, 2ND RUTGERS, THE STATE UNIVERSITY OF FLOOR - NEW BRUNSWICK, NJ 08901 (a) Name and address of organization or government CHARLOTTESVILLE, VA 22904 COLLEGE STATION, TX 77843 UNIVERSITY OF WASHINGTON UNIVERSITY OF VIRGINIA STATE UNIVERSITY OF NY UNIVERSITY OF TOLEDO TEXAS A&M UNIVERSITY PRINCETON UNIVERSITY Name of the organization PRINCETON NJ 08544 2801 W BANCROFT ST SEATTLE WA 98195 HOUSTON IX 77005 TOLEDO OH 43606 5 NEW SOUTH BLDG **ALBANY NY 12246** Department of the Treasury Internal Revenue Service RICE UNIVERSITY PO BOX 400195 6100 MAIN ST 353 BROADWAY BOX 351210 3578 TAMU

² Enter total number of Section 501(c)(3) and government organizations Enter total number of other organizations

^{882241 12-17-08} LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990,

SCHEDULE 1-1 (Form 990)

Continuation Sheet for Schedule I (Form 990)

Open to Public OMB No. 1545-0047 2008

RESEARCH & DEVELOPMENT RESEARCH & DEVELOPMENT RESEARCH & DEVELOPMENT RESEARCH & DEVELOPMENT RESEARCH & DEVELOPMENT RESEARCH & DEVELOPMENT (h) Purpose of grant or assistance Employer identification number SCIENTIFIC GRANTS CIENTIPIC GRANTS CIENTIFIC GRANTS SCIENTIFIC GRANTS SCIENTIFIC GRANTS SCIENTIFIC GRANTS 54-1773406 (g) Description of non-cash assistance valuation (book, FMV, appraisal, other) (f) Method of Part | Continuation of Grants and Other Assistance to Governments and Organizations In the U.S. (Schedule | (Form 990), Part II.) Attach to Form 990 to IIst additional information for Part II and Part III, Schedule I (Form 990). (e) Amount of non-cash assistance U.S. CIVILIAN RESEARCH AND DEVELOPMENT 9 900 400 21, 505 9,000 5 292 7 172 (d) Amount of cash grant section if applicable (c) IRC Code 501 (C)(3) 501 (C)(3) 501 (C)(3) 501 (C)(3) (C) (3) 501 (C)(3) 84-6000555 56-6001393 62-0476821 43-0653611 38-6006309 (b) EIN FOUNDATION HEALTH AND SCIENCES CENTER - 13001 WASHINGTON UNIVERSITY IN ST. LOUIS UNIVERSITY OF COLORADO AT DENVER E 17TH PLACE - AURORA, CO 80045 THE REGENTS OF THE UNIVERSITY (a) Name and address of organization or government SE UNC LINEBERGER CC CENTER 1400 INDEPENDENCE AVE., 2301 VANDERBILT PLACE CHAREL HILL, NC 27599 VANDERBILT UNIVERSITY WASHINGTON, DC 20250 3003 S. STATE STREET Name of the organization ANN ARBOR, MI 48109 USDA FOREST SERVICE NASHVILLE, TN 37235 ST, LOUIS, NO 63112 700 ROSEDALE AVE Department of the Treasury Internal Revenue Service 450 WEST DRIVE

Enter total number of Section 501(c)(3) and government organizations Enter total number of other organizations

U.S. CIVILIAN RESEARCH AND DEVELOPMENT

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SCHEDULE J (Form 990)

Compensation Information

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

| 2008

54-1773406

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

FOUNDATION

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

CIVILIAN RESEARCH AND DEVELOPMENT

Inspection
Employer Identification number

Schedule J (Form 990) 2008

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

832111

initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III

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

Page 2

Schedule J (Form 990) 2008 FOUNDATION 54.0 bert II | Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J1 if additional space is needed.

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

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

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		(b) Dieakuowii di	אייב מווערטי וטפפיועווי	So compensation	(c) Defended	(D)	(E) Total of politimas	(r)
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(P-(D)	reported in prior Form 990 or Form 990-EZ
	Θ	207,775.	15,000.	4,192.	22,740.	14,059.	263,766.	0.
CATHLEEN CAMPBELL	(ii)		0	0.	0.		0	0
	ε	157,375.	8,000.	5,110.	17,056.	14,779.	202,320.	0
STEPHEN WOLK	(E)	0.	0	0	0		0	0
	€	167,32	10,00	69′₽	9,128.	8,988.	200,135.	0
ERIC NOVOTNY	Ξ	0	0.	0.	0.	0.	0.	0.
	Ξ	140,460.	10,000.	9,166.	16,168.	6,628.	182,422.	0.
SHAWN WHEELER	<u>(ii)</u>		0	0.	0.	0	0.	0
	Ξ	142,927.	0.	1,684.	. 7,146.	22,476.	174,233.	0.
JOHN ZIMMERMAN	▣		0.	0.	0.	0.	0.	0
	ε	120,816.	2,000.	4,190.	12,937.	11,157.	151,100.	0.
JOHN MODZELEWSKI	(ii)	0	0	• 0	0.	0	0	0
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Schedule J (Form 990) 2008

SCHEDULE 0

(Form 990)

Supplemental Information to Form 990

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

Department of the Treasury Internal Revenue Service

U.S. CIVILIAN RESEARCH AND DEVELOPMENT

Employer Identification number

OMB No. 1548-0047

Name of the organization FOUNDATION 54-1773406 FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: ADVANCE PEACE AND PROSPERITY BY FUNDING CIVILIAN R&D PROJECTS, PROMOTE THE APPLICATION OF SCIENCE AND TECHNOLOGY, AND STRENGTHEN UNIVERSITY RESEARCH AND EDUCATION IN SCIENCE AND ENGINEERING. FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: CRDF'S MISSION IS TO: -PROVIDE COOPERATIVE R&D OPPORTUNITIES THAT ENABLE SCIENTISTS AND ENGINEERS TO ADDRESS CRITICAL SECURITY, ECONOMIC, EDUCATION AND OTHER SOCIETAL NEEDS; -ADVANCE PEACE AND PROSPERITY BY FUNDING CIVILIAN R&D PROJECTS THAT CONTRIBUTE TO GLOBAL NONPROLIFERATION OBJECTIVES; -PROMOTE THE APPLICATION OF SCIENCE AND TECHNOLOGY TO ECONOMIC GROWTH THROUGH INTERNATIONAL PARTNERSHIPS AND TRAINING THAT FOSTER INVENTION. INNOVATION, ENTREPRENEURSHIP AND THE COMMERCIALIZATION OF TECHNOLOGY: AND -STRENGTHEN UNIVERSITY RESEARCH AND EDUCATION IN SCIENCE AND ENGINEERING FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: GAP SERVICES EXPENSES \$ 1414949. INCLUDING GRANTS OF \$ 254805. REVENUE \$ 1688425. MIDDLE EAST & NORTH AFRICA 1051128. INCLUDING GRANTS OF \$ 0. LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule O (Form 990) 2008 832211 12-18-08

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service Supplemental Information to Form 990

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

2008
Open to Public Inspection

Name of the organization

U.S. CIVILIAN RESEARCH AND DEVELOPMENT FOUNDATION

Employer identification number 54-1773406

CRDF FUNDED PROJECTS
EXPENSES \$ 313637. INCLUDING GRANTS OF \$ 83114. REVENUE \$ 0.
FORM 990, PART V, LINE 4B, LIST OF FOREIGN COUNTRIES:
KAZAKHSTAN, RUSSIA, UKRAINE, AZERBAIJAN
FORM 990, PART VI, SECTION A, LINE 10: THE FORM 990 WILL FIRST BE REVIEWED
THE CFO. THE FORM 990 WILL BE PRESENTED TO THE BOARD OF DIRECTORS PRIOR TO
FILING WITH THE INTERNAL REVENUE SERVICE.
FORM 990, PART VI, SECTION B, LINE 12C: ALL EMPLOYEES SIGN A CONFLICT OF
INTEREST STATEMENT UPON INITIAL EMPLOYMENT. BOARD MEMBERS AND SENIOR STAFF
SIGN ANNUAL STATEMENTS. IN ADDITION, ALL EMPLOYEES MUST TAKE AN ANNUAL
ETHICS COURSE WHICH COVERS CONFLICT OF INTEREST. THEY MUST PASS THE COURSE EXAM.
FORM 990, PART VI, SECTION B, LINE 15: THE BOARD OF DIRECTORS INCLUDES A
COMPENSATION COMMITTEE WHICH SETS THE ANNUAL SALARY OF THE PRESIDENT/CEO,
CHIEF FINANCIAL OFFICER AND TWO VICE PRESIDENTS. THE COMMITTEE REVIEWS
VARIOUS SALARY SURVEYS FOR COMPARABLE ORGANIZATIONS. THE COMMITTEE REPORTS
ITS DELIBERATIONS IN WRITING.
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:
AK,AL,AR,AZ,CA,CO,CT,DC,FL,GA,IL,KS,KY,MA,MD,ME,MI,MS,MN,MO,NC,ND,NJ,NH,NM
NY, OH, OK, OR, PA, RI, SC, SD, TN, VA, WI, WV LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule O (Form 990) 2008 832211
12-18-08

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

2008
Open to Public Inspection

Name of the organization

U.S. CIVILIAN RESEARCH AND DEVELOPMENT FOUNDATION

Employer Identification number 54-1773406

FORM 990, PART VI, SECTION C, LINE 19: CRDF INCLUDES SUMMARY FINANCIAL
INFORMATION IN ITS ANNUAL REPORT. THE 990 IS AVAILABLE ON GUIDESTAR AND TO
ANYONE WHO MAKES A WRITTEN REQUEST TO CRDF.
FORM 990, PART IX, LINE 2
AUDIT OF FINANCIAL STATEMENTS
ALTHOUGH THE ORGANIZATION DOES NOT RECEIVE STAND ALONE GAAP FINANCIAL
STATEMENTS IT DOES RECEIVE ON AN ANNUAL BASIS FROM INDEPENDENT AUDITORS
CONSOLIDATED ENTITY GAAP FINANCIAL STATEMENTS FOR IT AND ITS
AFFILIATES.
THE ORGANIZATION HAS AN AUDIT COMMITTEE THAT ASSUMES RESPONSIBILITY FOR
OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND THE SELECTION OF
AN INDEPENDENT ACCOUNTANT.
· · · · · · · · · · · · · · · · · · ·

Schedule R (Form 990) 2008 Employer Identification number 54-17734062008 Open to Public Inspection OMB No. 1545-0047 Direct controlling entity Direct controlling entity Ē status (if section 501(c)(3)) End-of-year assets Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, lines 33, 34, 35, 38, or 37. Public charity Œ Exempt Code section Total income 9 Related Organizations and Unrelated Partmerships Legal domicile (state or Legal domicile (state or foreign country) foreign country) ➤ See separate Instructions. U.S. CIVILIAN RESEARCH AND DEVELOPMENT LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Primary activity Primary activity Identification of Related Tax-Exempt Organizations FOUNDATION Identification of Disregarded Entitles Name, address, and EIN Name, address, and EIN of related organization of disregarded entity Name of the organization Department of the Treasury Internal Revenue Service SCHEDULER (Form 990) Part 11 Part

U.S. CIVILIAN RESEARCH AND DEVELOPMENT FOUNDATION

Page 2

54-1773406

Schedule R (Form 990) 2008

Part III Identification of Related Organizations Taxable as a Partnership

(J) eneral or temaging temper?		l_	
L Ø E 4 >			
Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)			
Sortion- ations?			
Disprograte atle			
(G) Share of end-of-year assets		•	
(F) Share of total income			
(E) Predominant income (related, investment, unrelated)			
(C) (D) Legal comicile Direct controlling (state or foreign country)			
(C) Legal domicile (state or foreign country)			
(B) Primary activity			
(A) Name, address, and EIN of related organization			

Part IV Identification of Related Organizations Taxable as a Corporation or Trust

(A)	(B)	0	(Q)	(E)	E	(5)	Œ
Name, address, and ElN of related organization	Primary activity	홏	Direct ,	Type of entity (C corp, S corp, or trust)	Sha	Share of end-of-year assets	Percentage ownership
CRDF TECHINNOVATION, LLC STR, 9 BLD, 1							
	PROGRAM MANAGEMENT	RUSSIA	N/A	C CORP	0.	41,000	1008
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832182 12-23-08	45					Schedule R (Form 990) 2008	n 990) 2008

U.S. CIVILIAN RESEARCH AND DEVELOPMENT FOUNDATION

Schedule R (Form 990) 2008

Page 3

54-1773406

××× ×× Schedule R (Form 990) 2008 × × (C) Amount involved Yes 19 4 10 19 9 횬 ŧ 를 우 4 티 + ᇻ Loans or loan guarantees by other organization(s) Purchase of assets from other organization(s) Gift, grant, or capital contribution to other organization(s) Lease of facilities, equipment, or other assets from other organization(s) Sharing of facilities, equipment, mailing lists, or other assets Sharing of paid employees Reimbursement paid to other organization for expenses Reimbursement paid by other organization for expenses If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds. (B) Transaction type (a·r) Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity Loans or loan guarantees to or for other organization(s) During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? 46 Performance of services or membership or fundraising solicitations by other organization(s) Performance of services or membership or fundraising solicitations for other organization(s) Name of other organization(s) Other transfer of cash or property from other organization(s) Lease of facilities, equipment, or other assets to other organization(s) Gift, grant, or capital contribution from other organization(s) q Other transfer of cash or property to other organization(s) Note. Complete line 1 if any entity is listed in Parts II, III, or IV. Sale of assets to other organization(s) Transactions With Related Organizations Exchange of assets 832153 12-23-08 Part V 0 N 되 ପ୍ର € ত্র ଷ මු

U.S. CIVILIAN RESEARCH AND DEVELOPMENT FOUNDATION

Page 4

54-1773406

Schedule R (Form 990) 2008

Part VI Unrelated Organizations Taxable as a Partnership

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue)

that was not a related organization. See instructions regarding exclusion for certain investment partnerships.	ion for certain investment partners	ships.					•
(y)	(8)	<u>(</u>)	<u>@</u>	Œ	Œ	(5)	£)
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	Are all partners section 501(c)(3)	Share of end-of-	Dispropor- tionate	Code V-UBI amount in box 20	General or managing
			Yes No			of Schedule K·1 (Form 1065)	1
					_		
		•	-				
		•			_		
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prec	iation and A	Amortiza	tion Det	tail F	ORM 990 PAGE	10		990
sset	ļ ,				Description	of property		
mber	Date placed in service	Method/ IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
	BUILDIN		<u> </u>					
				<u> </u>				
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	* 990 P				UILDINGS	·I	5,740.	1,96
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Ŧ	FURNITU VARIE		7.00		112,688.	1	98,812.	2,83
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					112,688.		98,812.	2,83
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	70-7777							
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					ACHINERY & EC		449,300.	33,00
			1011	Γ -	310,064.		229,366.	33,00
	TRANSPO	RTATIC	N EQU	IPM				
						•		
4	SOFTWARIE:		3.00	1 6	CCE 200	T	416 226	06.16
	* 990 P				665,269.		416,336.	96,16
		101110	1012		665,269.		416,336.	96,16
	* GRAND	TOTAL	990	PAG				30,20
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Form 8868 (Rev. April 2009) Department of the Treasury Internat Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

		
	you are filing for an Automatic 3-Month Extension, complete only Part I and check this boxyou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this	
	not complete Part II unless you have already been granted an automatic 3-month extension on a previously fi	· · · · · · · · · · · · · · · · · · ·
Pa	rt I Automatic 3-Month Extension of Time. Only submit original (no copies needed).	
A 00	rporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and con	ete
	lonly	•
	ther corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request er	
	e income tax returns.	
note (not you	tronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or community the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic file. Listing of the file for Charitles & Nonprofits.	cally if (1) you want the additional nsolidated Form 990-T. Instead.
Туре		Employer identification number
print		7. 4550404
File by		54-1773406
tiling y	1530 WILSON BLVD. 3RD FLOOR	
return. Instruc	500	
Che	k type of return to be filed (file a separate application for each return):	
X	Form 990 Form 990-T (corporation) Form 47	20
	Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 52	- -
	Form 990-EZ Form 990-T (trust other than above) Form 60	169
	Form 990-PF	70
	THE FOUNDATION	
• Tr	ne books are in the care of > 1530 WILSON BLVD., 3RD FLOOR - ARLINGTO	N, VA 22209
Тє	lephone No. ▶ (703)526-9720 FAX No. ▶	
• if	the organization does not have an office or place of business in the United States, check this box	▶□
• 15	this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If thi	s is for the whole group, check this
box	. If it is for part of the group, check this box > and attach a list with the names and EINs of all	members the extension will cover.
1	I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unti- AUGUST 15, 2009, to file the exempt organization return for the organization named at	
	is for the organization's return for:	
	► X calendar year 2008 or	
	tax year beginning, and ending	•
2	If this tax year is for less than 12 months, check reason: Initial return Final return	Change in accounting period
3a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	
	nonrefundable credits. See instructions.	3a \$
Ь	If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated	ob l é
_	tax payments made. Include any prior year overpayment allowed as a credit. Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,	3b \$
C	deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).	1
	See Instructions.	3c \$ N/A
Cauti	on. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form	8879-EO for payment instructions.

E-FILED

823831 03-11-09

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 4-2009)

Form 8868 (Rev. 4-2009)			Page 2			
• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and	check this bo	x	▶ 🗷			
Note. Only complete Part II if you have already been granted an automatic 3-month extension on a p						
 If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1). 						
Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the	original (no co	pies needed).				
Name of Exempt Organization	.,. ` · · · ·	Employer Ident	ification number			
Type or U.S. CIVILIAN RESEARCH AND DEVELOPMENT						
Print FOUNDATION File by the		<u> 54-1773</u>				
endended Number, street, and room of suite no. if a P.O. box, see instructions.		For IRS use only	7			
due date for 1530 WILSON BLVD., 3RD FLOOR	·					
return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. ARLINGTON, VA 22209	19 19 19					
Check type of return to be filed (File a separate application for each return):	-					
X Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form	n 1041∙A L	Form 5227	Form 8870			
Form 990-BL Form 990-PF Form 990-T (trust other than above) Form	n 4720 L	Form 6069				
STOP! Do not complete Part II if you were not already granted an automatic 3-month extension	on a previous	sly filed Form 88	68.			
STEPHEN WOLK						
• = ==						
The books are in the care of ► 1530 WILSON BLVD., 3RD FLOOR - ARLINGTON, VA 22209 Telephone No. ► (703)526-9720 FAX No. ►						
If the organization does not have an office or place of business in the United States, check this business.			▶ □			
If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)			group, check this			
box ▶ . If it is for part of the group, check this box ▶ . and attach a list with the names a						
4 I request an additional 3-month extension of time until NOVEMBER 15, 2009.						
5 For calendar year 2008, or other tax year beginning	and ending		· ·			
	ıl retum	Change in	accounting period			
7 State In detail why you need the extension						
INFORMATION REQUIRED TO FILE A COMPLETE AND ACC	URATE R	<u>ETURN WII</u>	L NOT BE			
AVAILABLE UNTIL AFTER THE FIRST EXTENDED DUE DA	TE.		··-			
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less	any					
nonrefundable credits. See instructions.		8a \$	· · · · · · · · · · · · · · · · · · ·			
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and en		:				
tax payments made. Include any prior year overpayment allowed as a credit and any amount p	aid					
previously with Form 8868.		8b \$	· · · ·			
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required		_	37/5			
with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See	instructions.	8c \$	N/A			
Signature and Verification		h	don and ballet			
Under penalties of perjury, Joeclare that have examined this form, including accompanying schedules and stater it is true, correct, and complete, and that appare the prepare this form.	nents, and to the	DEST OF MY KNOWIE	ope and belief,			
		Date > 8/	10/19			
Signature ACCOUNTANT			1 8868 (Rev. 4-2009)			

Form **8868**

(Rev. April 2009) Department of the Treasury

Application for Extension of Time To File an **Exempt Organization Return**

OMB No. 1545-1709

File a separate application for each return.

Internal Revenue Service **▶** 🗓 • If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Automatic 3-Month Extension of Time. Only submit original (no copies needed) A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filling of this form, visit www.irs.gov/efile and click on e-file for Chanties & Nonprofits Employer identification number Name of Exempt Organization Type or U.S. CIVILIAN RESERACH AND DEVELOPMENT print FOUNDATION 54-1773406 File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filing your 1530 WILSON BLVD., 3RD FLOOR City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions ARLINGTON, VA 22209 Check type of return to be filed (file a separate application for each return): X Form 990 Form 4720 Form 990-T (corporation) Form 990-T (sec. 401(a) or 408(a) trust) Form 5227 Form 990-BL Form 990-EZ Form 990-T (trust other than above) Form 6069 Form 990-PF Form 1041-A Form 8870 THE FOUNDATION • The books are in the care of ▶ 1530 WILSON BLVD., 3RD FLOOR - ARLINGTON, VA 22209 Telephone No. ► (703)526-9720 FAX No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box | If it is for part of the group, check this box | and attach a list with the names and EINs of all members the extension will cover. I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2009_ , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► X calendar year 2008 or 🔟 tax year beginning 🔃 , and ending If this tax year is for less than 12 months, check reason: Final return ☐ Change in accounting period If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit 3b Balance Due, Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 4-2009)

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