














See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



<div>Form 990</div> <div></div> <div>Department of the Treasury Internal Revenue Service</div>	<div>Return of Organization Exempt From Income Tax</div> <div>Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)</div> <div> The organization may have to use a copy of this return to satisfy state reporting requirements</div>	<div>OMB No 1545-0047</div> <div>2008</div> <div>Open to Public Inspection</div>
---	---	--

A For the 2008 calendar year, or tax year beginning 07-01-2008 and ending 06-30-2009				
B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization Midwest Research Institute		D Employer identification number 44-0545878
		Doing Business As		E Telephone number (816) 753-7600
		Number and street (or P O box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 158,489,230
		425 Volker Blvd		
		City or town, state or country, and ZIP + 4 Kansas City, MO 64110		
F Name and address of Principal Officer James L Spigarelli 425 Volker Blvd kansas city,MO 64110			H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No (If "No," attach a list See instructions) H(c) Group Exemption Number 	
I Tax-exempt status <input checked="" type="checkbox"/> 501(c) (3)  (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527				
J Web site:  www.mriresearch.org				
K Type of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> trust <input type="checkbox"/> association <input type="checkbox"/> other 				L Year of Formation 1943
				M State of legal domicile MO

Part I Summary				
Activities & Governance	1	Briefly describe the organization's mission or most significant activities NOT-FOR-PROFIT CORPORATION FOR THE PURPOSE OF PERFORMING SCIENTIFIC RESEARCH WHICH IS IN THE PUBLIC INTEREST		
	2	Check this box <input type="checkbox"/> 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)	3	17
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	14
	5	Total number of employees (Part V, line 2a)	5	783
	6	Total number of volunteers (estimate if necessary)	6	0
	7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	0
Revenue	b	Net unrelated business taxable income from Form 990-T, line 34	7b	0
	8 9 10 11 12	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
		Program service revenue (Part VIII, line 2g)	242,209,909	68,621,830
		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	80,194,864	84,248,509
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	943,052	298,053
		Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	620,855	155,516
			323,968,680	153,323,908
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	83,450	100,000
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	53,455,322	53,830,051
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0
	b	(Total fundraising expenses, Part IX, column (D), line 25 ⁰)		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	270,199,776	103,477,650
	18	Total expenses—add lines 13–17 (must equal Part IX, line 25, column (A))	323,738,548	157,407,701
Net Assets or Fund Balances	19	Revenue less expenses Subtract line 18 from line 12	230,132	-4,083,793
	20 21 22	Total assets (Part X, line 16) Total liabilities (Part X, line 26) Net assets or fund balances Subtract line 21 from line 20	Beginning of Year	End of Year
			166,742,886	88,222,439
			115,270,238	50,680,936
			51,472,648	37,541,503

Part II Signature Block				
Please Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge			
		*****	2010-05-17	
	Signature of officer Date			
Paid Preparer's Use Only		Richard T Fleener VP & CFO		
	Type or print name and title			
	Preparer's signature 	Date	Check if self-employed <input type="checkbox"/>	Preparer's PTIN (See Gen Inst)
Paid Preparer's Use Only	Firm's name (or yours if self-employed), address, and ZIP + 4	KPMG LLP 1000 Walnut St Suite 1000 Kansas City, MO 64106		EIN 
			Phone no  (816) 802-5200	

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

Part IIIS

Statement of Program Service Accomplishments (See the instructions.)

1

Briefly describe the organization’s mission

MRI solves challenging problems through science, engineering, and program management to benefit society and foster a safe, healthy, and sustainable environment
We acheive our mission through a dedicated workforce committed to quality

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes

☒

No

If “Yes,” describe these new services on Schedule O

3

Did the organization cease conducting or make significant changes in how it conducts any program services?

☒

Yes

☐

No

If “Yes,” describe these changes on Schedule O

4

Describe the exempt purpose achievements for each of the organization’s three largest program services by expenses

Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code) (Expenses \$ 67,066,855 including grants of \$ 0) (Revenue \$ 0)

National Renewable Energy Laboratory (NREL) NREL is a federally funded research and development center which MRI has been contracted for management and operations NREL's distinctive R&D competencies are positioned to advance national energy goals by developing innovations to change the way we power our homes and businesses, and fuel our vehicles NREL’s R&D competencies focus on developing and advancing renewable energy and energy efficiency technologies more effectively through the full R&D life-cycle-from basic scientific research through applied research and engineering, to testing, scale-up, and demonstration NREL's R&D competencies are Renewable electricity conversion and delivery systems, Renewable fuels formulation and delivery, Efficient and integrated energy systems, Strategic energy analysis Part of the laboratory’s mission is the deployment of NREL-developed technologies into the marketplace The Technology Transfer office works with private- and public-sector organizations to successfully transfer our technologies into commercially viable products and businesses NREL is funded solely by a grant from the Department of Energy totaling \$68,579,006 for the tax year

4b

(Code) (Expenses \$ 46,448,478 including grants of \$ 0) (Revenue \$ 60,351,008)

Midwest Operations (MWO) MWO is MRI's largest laboratory division that focuses research into 5 focus areas National Security and Defense, Life Sciences, Agriculture and Food Safety, Transportation Safety and Energy/Environment The largest client sector is the US government for which more than 90% of project work is performed specifically in areas of applied research and development and test and evaluation MRI's contract work is derived from the ability to work with highly regulated chemicals, biological pathogens and controlled materials in laboratories requiring high levels of oversight and certification MRI conducts a number of systems engineering and integration programs that target the development of national security technologies MRI is also conducting a number of specific studies that target the development of therapeutics and vaccines under federally mandated preparedness programs The MWO programs in transportation safety are in direct support of the Federal Highway Administration

4c

(Code) (Expenses \$ 13,851,730 including grants of \$ 0) (Revenue \$ 16,453,852)

Mid-Atlantic Operations (MAO) The MAO division focuses on biosafety, biosurety and biosecurity programs and conducts monitoring and analysis programs for biological pathogens and supports test and evaluation of emerging biotechnologies The programs are conducted (more than 95%) for federal customers The MAO provides staff and facilities that meet a number of federal requirements for safety and security and require significant interaction with federal sponsors on a routine basis The biosafety and biosecurity programs are conducted for the DOD (United States Department of Defense)/Defense Threat Reduction Agencies BioThreat Reduction Program and are focused on improving laboratories and relationships in the former Soviet Union The monitoring and analysis and test and evaluation programs provide support to the DOD, the Department of Homeland Security (DHS), and other government agencies

(Code) (Expenses \$ including grants of \$) (Revenue \$)

MRI conducts programs from our Florida Division

(Code) (Expenses \$ including grants of \$) (Revenue \$)

that complement skills and resources with MWO and

(Code) (Expenses \$ including grants of \$) (Revenue \$)

MAO The primary customer base for the Florida

(Code) (Expenses \$ 2,713,524 including grants of \$ 100,000) (Revenue \$ 7,443,649)

Division is DOD and DHS

4d

Other program services (Describe in Schedule O)

(Expenses \$ 2,713,524 including grants of \$ 100,000) (Revenue \$ 7,443,649)





















4e

Total program service expenses \$ 130,080,587 Must equal Part IX, Line 25, column (B).

Form 990 (2008)

Part IV

Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> 	1	Yes
2	Is the organization required to complete Schedule B, Schedule of Contributors? 	2	Yes
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	No
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>	4	No
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>	5	
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> 	6	No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i> 	7	No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> 	8	No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> 	9	No
10	Did the organization hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> 	10	No
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? <i>If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i> 	11	Yes
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i> 	12	No
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	No
14a	Did the organization maintain an office, employees, or agents outside of the U S?	14a	Yes
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S? <i>If "Yes," complete Schedule F, Part I</i> 	14b	Yes
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i> 	15	No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i> 	16	No
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I</i>	17	No
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18	No
19	Did the organization report more than \$15,000 on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	No
20	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>	20	No
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> 	21	Yes
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> 	22	No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? <i>If "Yes," complete Schedule J</i> 	23	Yes
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to question 25</i> 	24a	Yes
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	No
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	No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	No
25a	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> 	25a	No
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? <i>If "Yes," complete Schedule L, Part I</i> 	25b	No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i> 	26	No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i> 	27	No

Part IV

Checklist of Required Schedules (Continued)

		Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee		
a	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV		No
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV		No
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	Yes	
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	Yes	
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	Yes	
36	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		No
37	Did the organization conduct more than 5 percent of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		No

Part V

Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable	1a96		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return	2a783		
b	If at least one is reported in 2a, did the organization file all required federal employment tax returns? . . . Note: <i>If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return.</i>	2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts .			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, <i>Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction</i> ?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	Yes	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	Yes	
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12	10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders	11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		

Part VI

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

Section A. Governing Body and Management

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

1a

Enter the number of voting members of the governing body . . .

1a

17

1b

Enter the number of voting members that are independent . . .

1b

14

2

Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?

2

Yes

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

No

4

Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? . . .

4

No

5

Did the organization become aware during the year of a material diversion of the organization's assets? . . .

5

No

6

Does the organization have members or stockholders?

6

No

7a

Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?

7a

No

7b

Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . . .

7b

No

8

Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following

8a

the governing body?

8a

Yes

8b

each committee with authority to act on behalf of the governing body?

8b

Yes

9a

Does the organization have local chapters, branches, or affiliates?

9a

No

9b

If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?

9b

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

Yes

11

Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O

11

No

Section B. Policies

12a

Does the organization have a written conflict of interest policy? If "No", go to line 13 . . .

12a

Yes

12b

Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?

12b

Yes

12c

Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done

12c

Yes

13

Does the organization have a written whistleblower policy?

13

Yes

14

Does the organization have a written document retention and destruction policy?

14

Yes

15

Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision

15a

The organization's CEO, Executive Director, or top management official?

15a

Yes

15b

Other officers or key employees of the organization?

15b

Yes

Describe the process in Schedule O

16a

Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?

16a

No

16b

If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?

16b

Section C. Disclosure

17

List the States with which a copy of this Form 990 is required to be filed CA , NC

18

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
☐ own website ☐ another's website ☒ upon request

19

Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.

20

State the name, physical address, and telephone number of the person who possesses the books and records of the organization.
RICHARD T FLEENER
MIDWEST RESEARCH INSTITUTE 425 VOL
KC, MO 64110
(816) 360-1903

Form 990 (2008)

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

☐ Check this box if the organization did not compensate any officer, director, trustee or key employee

[illegible]

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)							(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former				
1b Total									4,983,476	0	306,878

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	No
4	For any individual listed online 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	Yes
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

1 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
BOSTON DYNAMICS 78 4TH AVE WALTHAM, MA 02451	R&D	1,489,361
BOOZ ALLEN HAMILTON INC 3190 FAIRVIEW PARK DR FALLS CHURCH, VA 22042	R&D	722,506
INDUSTRIAL CONSTRUCTORS 1432 STOCKYARD RD PUEBLO, CO 81001	R&D	690,002
SMITH CARTER CUH2A 1000 LENOX DR TRENTON, NJ 08648	R&D	534,417
JE DUNN CONSTRUCTION CO 929 HOLMES KANSAS CITY, MO 64106	CONSTRUCTION	4,281,427
2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization		17

Part VIII

Statement of Revenue

			(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns1a				
	b	Membership dues				
		1b				
	c	Fundraising events				
		1c				
	d	Related organizations1d				
	e	Government grants (contributions) 1e	68,579,006			
	f	All other contributions, gifts, grants, and similar amounts not included above	42,824			
		1f				
g	Noncash contributions included in lines 1a-1f \$					
h	Total (Add lines 1a-1f)	68,621,830				
Program Service Revenue			Business Code			
	2a	RESEARCH CONTRACTS	541,700	84,248,509	84,248,509	
	b					
	c					
	d					
	e					
	f	All other program service revenue				
	g	Total. Add lines 2a-2f				
		\$ 84,248,509				
Other Revenue	3	Investment income (including dividends, interest other similar amounts)		341,021		341,021
	4	Income from investment of tax-exempt bond proceeds		84,707		84,707
	5	Royalties		80,400		80,400
	6a	(i) Real				
		(ii) Personal				
	b	Less rental expenses				
	c	Rental income or (loss)				
	d	Net rental income or (loss)				
	7a	(i) Securities				
		(ii) Other				
	b	Less cost or other basis and sales expenses				
	c	Gain or (loss)				
	d	Net gain or (loss)		-127,675		-127,675
	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 Attach Schedule G if total exceeds \$15,000a		0		
	b	Less direct expensesb				
	c	Net income or (loss) from fundraising events				
	9a	Gross income from gaming activities See part IV, line 19 Complete Schedule G if total exceeds \$15,000a		0		
	b	Less direct expensesb				
	c	Net income or (loss) from gaming activities				
	10a	Gross sales of inventory, less returns and allowancesa		0		
	b	Less cost of goods soldb				
	c	Net income or (loss) from sales of inventory				
	Miscellaneous Revenue		Business Code			
11a	MISCELLANEOUS		900,099	75,116		75,116
b						
c						
d	All other revenue					
e	Total. Add lines 11a-11d					
		\$ 75,116				
12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e		153,323,908	84,248,509		453,569

Part IX

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).					
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	100,000	100,000		
2	Grants and other assistance to individuals in the U S See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations and individuals outside the U S See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	4,837,826	2,161,795	2,676,031	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	38,853,500	28,199,077		
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	3,435,372	2,421,435	1,013,937	
9	Other employee benefits	3,913,533	2,758,468	1,155,065	
10	Payroll taxes	2,789,820	1,966,415	823,405	
11	Fees for services (non-employees)				
a	Management	0			
b	Legal	151,135	5,000	146,135	
c	Accounting	234,396		234,396	
d	Lobbying	0			
e	Professional fundraising See Part IV, line 17	0			
f	Investment management fees	0			
g	Other	942,918	209,335	733,583	
12	Advertising and promotion	0			
13	Office expenses	1,671,224	809,159	862,065	
14	Information technology	1,840,791	1,045,433	795,358	
15	Royalties	0			
16	Occupancy	10,952,790	7,122,023	3,830,767	
17	Travel	638,315	302,002	336,313	
18	Payments of travel or entertainment expenses for any Federal, state or local public officials	0			
19	Conferences, conventions and meetings	179,476	85,793	93,683	
20	Interest	870,319	870,319		
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	4,691,400	2,024,958	2,666,442	
23	Insurance	621,790		621,790	
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a	PROJECT COSTS	63,608,655	63,608,655		
b	NREL OVERHEAD	14,052,523	14,052,523		
c	ALLOCATIONS	1,061,164	1,061,164		
d	CORPORATE EXPENSES	723,896	603,402	120,494	
e	OTHER ODC	630,261	386,106	244,155	
f	All other expenses	606,597	287,525	319,072	
25	Total functional expenses. Add lines 1 through 24f	157,407,701	130,080,587	27,327,114	0
26	Joint Costs. Check <input type="checkbox"/> if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X **Balance Sheet**

		(A)		(B)		
		Beginning of year		End of year		
Assets	1 Cash—non-interest-bearing	3,929,103	1	3,021,265		
	2 Savings and temporary cash investments		2			
	3 Pledges and grants receivable, net	5,028,957	3	1,777,107		
	4 Accounts receivable, net	11,583,481	4	11,284,772		
	5 Receivables from current and former officers, directors, trustees, key employees or other related parties <i>Complete Part II of Schedule L</i>		5			
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) <i>Complete Part II of Schedule L</i>		6			
	7 Notes and loans receivable, net	1,489,304	7	1,226,162		
	8 Inventories for sale or use	435,027	8	456,552		
	9 Prepaid expenses and deferred charges	868,367	9	754,291		
	10a Land, buildings, and equipment—cost basis	<table><tr><td>10a</td><td>88,058,216</td></tr></table>	10a	88,058,216		
	10a	88,058,216				
	b Less accumulated depreciation <i>Complete Part VI of Schedule D</i>	<table><tr><td>10b</td><td>39,553,126</td></tr></table>	10b	39,553,126	45,267,178	10c 48,505,090
	10b	39,553,126				
	11 Investments—publicly traded securities	2,141,106	11	1,667,920		
	12 Investments—other securities See Part IV, line 11 <i>Complete Part VII of Schedule D</i>	673,725	12	673,725		
	13 Investments—program-related See Part IV, line 11 <i>Complete Part VIII of Schedule D</i>	0	13	936,392		
14 Intangible assets		14				
15 Other assets See Part IV, line 11 <i>Complete Part IX of Schedule D</i>	95,326,638	15	17,919,163			
16 Total assets. Add lines 1 through 15 (must equal line 34)	166,742,886	16	88,222,439			
Liabilities	17 Accounts payable and accrued expenses	43,061,765	17	11,222,219		
	18 Grants payable		18			
	19 Deferred revenue		19			
	20 Tax-exempt bond liabilities	20,162,893	20	20,041,472		
	21 Escrow account liability <i>Complete Part IV of Schedule D</i>		21			
	22 Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons <i>Complete Part II of Schedule L</i>		22			
	23 Secured mortgages and notes payable to unrelated third parties	4,372,822	23	3,935,891		
	24 Unsecured notes and loans payable		24			
	25 Other liabilities <i>Complete Part X of Schedule D</i>	47,672,758	25	15,481,354		
	26 Total liabilities. Add lines 17 through 25	115,270,238	26	50,680,936		
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
	27 Unrestricted net assets	46,443,691	27	35,764,396		
	28 Temporarily restricted net assets	5,028,957	28	1,777,107		
	29 Permanently restricted net assets		29			
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.					
	30 Capital stock or trust principal, or current funds		30			
	31 Paid-in or capital surplus, or land, building or equipment fund		31			
	32 Retained earnings, endowment, accumulated income, or other funds		32			
	33 Total net assets or fund balances	51,472,648	33	37,541,503		
	34 Total liabilities and net assets/fund balances	166,742,886	34	88,222,439		

Part XI **Financial Statements and Reporting**

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

SCHEDULE A

(Form 990 or 990EZ)

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

2008

Open to Public Inspection

Name of the organization Midwest Research Institute	Employer identification number 44-0545878
--	--

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

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

1	<input type="checkbox"/>	A church, convention of churches, or association of churches described in Section 170(b)(1)(A)(i).
2	<input type="checkbox"/>	A school described in Section 170(b)(1)(A)(ii). (Attach Schedule E)
3	<input type="checkbox"/>	A hospital or a cooperative hospital service organization described in Section 170(b)(1)(A)(iii). (Attach Schedule H)
4	<input type="checkbox"/>	A medical research organization operated in conjunction with a hospital described in Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state
5	<input type="checkbox"/>	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in Section 170(b)(1)(A)(iv). (Complete Part II)
6	<input type="checkbox"/>	A federal, state, or local government or governmental unit described in Section 170(b)(1)(A)(v).
7	<input type="checkbox"/>	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in Section 170(b)(1)(A)(vi) (Complete Part II)
8	<input type="checkbox"/>	A community trust described in Section 170(b)(1)(A)(vi) (Complete Part II)
9	<input checked="" type="checkbox"/>	An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See Section 509(a)(2). (Complete Part III)
10	<input type="checkbox"/>	An organization organized and operated exclusively to test for public safety See Section 509(a)(4). (See instructions)
11	<input type="checkbox"/>	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See Section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h <div><div>a</div><div><input type="checkbox"/> Type I</div><div>b</div><div><input type="checkbox"/> Type II</div><div>c</div><div><input type="checkbox"/> Type III - Functionally Integrated</div><div>d</div><div><input type="checkbox"/> Type III - Other</div></div>
e	<input type="checkbox"/>	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
f	<input type="checkbox"/>	If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
g	<input type="checkbox"/>	Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? <div><div>(i)</div><div>a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?</div><div>(ii)</div><div>a family member of a person described in (i) above?</div><div>(iii)</div><div>a 35% controlled entity of a person described in (i) or (ii) above?</div></div>
h	<input type="checkbox"/>	Provide the following information about the organizations the organization supports

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

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

Part II

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Public Support						
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add line 1-3						
5 The portion of total contribution by each person (other than a government unit or publicly supported organization) included on line 1 that exceed 2% of the amount shown on line 11, column (f)						
6 Public Support subtract line 5 from line 4						

Total Support						
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
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)						
12 Gross receipts from related activities, etc (See instructions)					12	
13 First Five Years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Computation of Public Support Percentage		
14 Public Support Percentage for 2008 (line 6 column (f) divided by line 11 column (f))	14	
15 Public Support Percentage for 2007 Schedule A, Part IV-A, line 26f	15	
16a 33 1/3% Test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 33 1/3% Test - 2007. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
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		<input type="checkbox"/>
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		<input type="checkbox"/>
18 Private Foundation. If the organization did not check the box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions		<input type="checkbox"/>

Part IIISupport Schedule for Organizations Described in IRC 509(a)(2)
(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	221,526,078	205,989,508	197,076,948	242,209,909	68,621,830	935,424,273
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	71,021,020	77,808,118	80,652,995	80,194,864	84,248,509	393,925,506
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total Add lines 1-5	292,547,098	283,797,626	277,729,943	322,404,773	152,870,339	1,329,349,779
7a Amounts included on lines 1, 2, and 3 received from disqualified persons			95,751	4,249		100,000
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000	28,846,155	33,399,721	34,360,406	28,437,710	47,653,528	172,697,520
c Total of lines 7a and 7b	28,846,155	33,399,721	34,456,157	28,441,959	47,653,528	172,797,520
8 Public Support (Subtract line 7c from line 6)						1,156,552,259

Total Support						
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6	292,547,098	283,797,626	277,729,943	322,404,773	152,870,339	1,329,349,779
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	372,023	786,432	998,015	1,727,258	506,128	4,389,856
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975						
c Add lines 10a and 10b	372,023	786,432	998,015	1,727,258	506,128	4,389,856
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)	2,180	8,210	11,200	16,242	75,116	112,948
13 Total Support (Add lines 9, 10c, 11 and 12)						1,333,852,583
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Computation of Public Support Percentage			
15	Public Support Percentage for 2008 (line 8 column (f) divided by line 13 column (f))	15	86 7 08 %
16	Public Support Percentage for 2007 Schedule A, Part IV -A, line 27g	16	90 2 08 %

Computation of Investment Income Percentage			
17	Investment Income Percentage for 2008 (line 10c column (f) divided by line 13 column (f))	17	0 3 29 %
18	Investment Income Percentage from 2007 Schedule A, Part IV -A, line 27h	18	0 2 18 %
19a	33 1/3% Tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
b	33 1/3% Tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
20	Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions		

Part IV

Supplemental Information. Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions)

Facts and Circumstances Test

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.**

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization Midwest Research Institute	Employer identification number 44-0545878
---	---

Part I

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

	(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 writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <div><input type="checkbox"/> Yes<input type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? <div><input type="checkbox"/> Yes<input type="checkbox"/> No</div>	

Part II

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

1	Purpose(s) of conservation easements held by the organization (check all that apply) <div><input type="checkbox"/> Preservation of land for public use (e g , recreation or pleasure)<input type="checkbox"/> Preservation of an historically importantly land area</div> <div><input type="checkbox"/> Protection of natural habitat<input type="checkbox"/> Preservation of certified historic structure</div> <div><input type="checkbox"/> Preservation of open space</div>											
2	Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year											
		<table><tr><th></th><th>Held at the End of the Year</th></tr><tr><td>a</td><td>Total number of conservation easements</td></tr><tr><td>b</td><td>Total acreage restricted by conservation easements</td></tr><tr><td>c</td><td>Number of conservation easements on a certified historic structure included in (a)</td></tr><tr><td>d</td><td>Number of conservation easements included in (c) acquired after 8/17/06</td></tr></table>		Held at the End of the Year	a	Total number of conservation easements	b	Total acreage restricted by conservation easements	c	Number of conservation easements on a certified historic structure included in (a)	d	Number of conservation easements included in (c) acquired after 8/17/06
	Held at the End of the Year											
a	Total number of conservation easements											
b	Total acreage restricted by conservation easements											
c	Number of conservation easements on a certified historic structure included in (a)											
d	Number of conservation easements included in (c) acquired after 8/17/06											
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ►											
4	Number of states where property subject to conservation easement is located ►											
5	Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? <div><input type="checkbox"/> Yes<input type="checkbox"/> No</div>											
6	Staff or volunteer hours devoted to monitoring, inspecting and enforcing easements during the year ►											
7	Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ► \$											
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? <div><input type="checkbox"/> Yes<input type="checkbox"/> No</div>											
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements											

Part III

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

1a	If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items	
b	If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items	
	(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 treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items	
a	Revenues included in Form 990, Part VIII, line 1	► \$
b	Assets included in Form 990, Part X	► \$

Part III

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

3

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

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

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

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Trust, Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain why in Part XIV and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

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

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a	Beginning of year balance				
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				

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶

c

Term endowment ▶

3a

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

(i)

unrelated organizations

(ii)

related organizations

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		
3a(ii)		
3b		

4

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

Part VI

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

Description of investment	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land	0	641,507		641,507
b Buildings	0	52,187,896	15,901,602	36,286,294
c Leasehold improvements	0	845,813	547,153	298,660
d Equipment	0	30,578,751	21,459,588	9,119,163
e Other	0	3,804,249	1,644,783	2,159,466
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				48,505,090

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests		
Other INVESTMENT IN EVOGEN INC	673,725	F
Total. (Column (b) should equal Form 990, Part X, col (B) line 12) ▶		

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
INVESTMENT IN ALLIANCE	936,392	F
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		

(a) Description	(b) Book value
DESIGNATED FUNDS	6,367,813
REIMBURSABLE SUB COSTS	0
INVESTMENT IN SUB (MRIV)	268,640
MISCELLANEOUS	588,854
CONTRACTS IN PROGRESS	10,693,856
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15.)	17,919,163

(a) Description of Liability	(b) Amount
Federal Income Taxes	
ACCRUED SUB CONTRACTS	0
EXCESS BILLINGS	154,224
LONG-TERM LIABILITIES	1,517,103
PENSION BENEFIT LIABILITY	13,810,027
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	15,481,354

Schedule D (Form 990) 2008

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1
2	Total expenses (Form 990, Part IX, column (A), line 25)	2
3	Excess or (deficit) for the year Subtract line 2 from line 1	3
4	Net unrealized gains (losses) on investments	4
5	Donated services and use of facilities	5
6	Investment expenses	6
7	Prior period adjustments	7
8	Other (Describe in Part XIV)	8
9	Total adjustments (net) Add lines 4 - 8	9
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return		
1	Total revenue, gains, and other support per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
a	Net unrealized gains on investments 2a	
b	Donated services and use of facilities 2b	
c	Recoveries of prior year grants 2c	
d	Other (Describe in Part XIV) 2d	
e	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b	Other (Describe in Part XIV) 4b	
c	Add lines 4a and 4b	
5	Total Revenue Add lines 3 and 4c . (This should equal Form 990, Part I, line 12)	5

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

Part XIV Supplemental Information

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

Identifier	Return Reference	Explanation
SCHEDULE D, PART X	FIN 48 FOOTNOTE	MIDWEST RESEARCH INSTITUTE adopted Financial Accounting Standards Board (FASB) Interpretation No 48, Accounting for Uncertainty in Income Taxes - an Interpretation of FASB Statement No 109 (FIN 48) FIN 48 provides specific guidance on how to address uncertainty in accounting for income tax assets and liabilities, prescribing recognition thresholds and measurement attributes The adoption of FIN 48 by MIDWEST RESEARCH INSTITUTE did not have a material impact on the company's financial position, results of operations, or cash flows

OMB No 1545-0047

**Open to Public
Inspection**

44-0545878

Schedule F (Form 990) 2008

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 ☐ ☐
Use Schedule F-1 if additional space is needed.

[illegible]

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

3 Enter total number of other organizations or entities ►

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

Schedule F (Form 990) 2008

Software ID:

Software Version:

EIN: 44-0545878

Name: Midwest Research Institute

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

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
--------------------------	--	------------	----------------------	--------------------------	---------------------------------	-----------------------------------	--	---

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
Midwest Research Institute

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

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

OMB No 1545-0047

2008

Open to Public
Inspection

Employer identification number
44-0545878

Part I

General Information on Grants and Assistance

- 1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☐ Yes ☒ No
- 2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

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

1(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Science Pioneers30 WPershing Ste 410 KC, MO 64108	44-0607132	501(c)(3)	45,000				Foster scientific education, innovation, and growth
KC Area Life Sciences Institute1055 Broadway Ste 130 KC, MO 64105	43-1889037	501(c)(3)	25,000				Foster scientific education, innovation, and growth
Smart Energy Living Alliance12600 W Colfax Ave Lakewood, CO 80215	84-1510797	501(c)(3)	25,000				Foster scientific education, innovation, and growth

2

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

3

3

Enter total number of other organizations

0

Part III

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

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e) Method of valuation (book, FMV , appraisal, other)	(f)Description of non-cash assistance

Part IV

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

Identifier	Return Reference	Explanation
Part 1, Line 2		MIDWEST RESEARCH INSTITUTE ONLY GRANTS FUNDS TO IRC SECTION 501(C)(3) ORGANIZATIONS

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
Midwest Research Institute

Employer identification number
44-0545878

Part I

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		
	<div><div><input type="checkbox"/> First class or charter travel</div><div><input checked="" type="checkbox"/> Travel for companions</div><div><input checked="" type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Discretionary spending account</div></div> <div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input checked="" type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div>		
b	If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain		No
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?	Yes	
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		
	<div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input checked="" type="checkbox"/> Independent compensation consultant</div><div><input type="checkbox"/> Form 990 of other organizations</div></div> <div><div><input type="checkbox"/> Written employment contract</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div>		
4	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?	Yes	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?		No
c	Participate in, or receive payment from, an equity-based compensation arrangement?		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		
	501(c)(3) and 501(c)(4) organizations only 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?		No
b	Any related organization?		No
	If "Yes," to line 5a or 5b, describe in Part III		
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of		
a	The organization?	Yes	
b	Any related organization?		No
	If "Yes," to line 6a or 6b, describe in Part III		
7	For persons listed in form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III		No
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III		No

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

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

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
Jeanie S Latz	(i)	118,430	5,000	92,323	3,433	15,522	234,708	0
	(ii)	0	0	0	0	0	0	0
Dan Arvizu	(i)	398,657	211,000	3,317	23,750	15,435	652,159	0
	(ii)	0	0	0	0	0	0	0
Fred V Cornwell	(i)	217,718	10,000	0	8,194	15,522	251,434	0
	(ii)	0	0	0	0	0	0	0
William P Glover	(i)	198,282	93,000	5,276	7,058	11,849	315,465	0
	(ii)	0	0	0	0	0	0	0
Michael F Helmstetter	(i)	322,088	35,000	1,916	14,816	15,522	389,342	0
	(ii)	0	0	0	0	0	0	0
Robert San Martin	(i)	243,282	27,000	4,542	5,750	3,240	283,814	0
	(ii)	0	0	0	0	0	0	0
James L Spigarelli	(i)	506,500	350,000	4,368	5,750	15,522	882,140	0
	(ii)	0	0	0	0	0	0	0
Dale A Gardner	(i)	215,771	102,255	0	5,750	11,849	335,625	0
	(ii)	0	0	0	0	0	0	0
Fraser P Ward	(i)	267,339	10,000	724	5,750	3,240	287,053	0
	(ii)	0	0	0	0	0	0	0
Joseph S Broz	(i)	217,585	45,000	0	5,750	15,522	283,857	0
	(ii)	0	0	0	0	0	0	0
Johnny D Callahan	(i)	188,989	0	73,560	0	20,733	283,282	0
	(ii)	0	0	0	0	0	0	0
Jerry L Bellows	(i)	186,478	39,135	309	3,850	0	229,772	0
	(ii)	0	0	0	0	0	0	0
Michael Ehret	(i)	197,951	12,000	0	5,320	11,849	227,120	0
	(ii)	0	0	0	0	0	0	0
Roger Harris	(i)	170,917	7,000	0	4,547	10,064	192,528	0
	(ii)	0	0	0	0	0	0	0
Giuliano Radolovich	(i)	170,792	8,751	0	4,618	15,522	199,683	0
	(ii)	0	0	0	0	0	0	0
Thomas M Sack	(i)	209,221	12,000	0	5,629	15,522	242,372	0
	(ii)	0	0	0	0	0	0	0

Software ID:
Software Version:
EIN: 44-0545878
Name: Midwest Research Institute

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
Jeanie S Latz	(i)	118,430	5,000	92,323	3,433	15,522	234,708	0
	(ii)	0	0	0	0	0	0	0
Dan Arvizu	(i)	398,657	211,000	3,317	23,750	15,435	652,159	0
	(ii)	0	0	0	0	0	0	0
Fred V Cornwell	(i)	217,718	10,000	0	8,194	15,522	251,434	0
	(ii)	0	0	0	0	0	0	0
William P Glover	(i)	198,282	93,000	5,276	7,058	11,849	315,465	0
	(ii)	0	0	0	0	0	0	0
Michael F Helmstetter	(i)	322,088	35,000	1,916	14,816	15,522	389,342	0
	(ii)	0	0	0	0	0	0	0
Robert San Martin	(i)	243,282	27,000	4,542	5,750	3,240	283,814	0
	(ii)	0	0	0	0	0	0	0
James L Spigarelli	(i)	506,500	350,000	4,368	5,750	15,522	882,140	0
	(ii)	0	0	0	0	0	0	0
Dale A Gardner	(i)	215,771	102,255	0	5,750	11,849	335,625	0
	(ii)	0	0	0	0	0	0	0
Fraser P Ward	(i)	267,339	10,000	724	5,750	3,240	287,053	0
	(ii)	0	0	0	0	0	0	0
Joseph S Broz	(i)	217,585	45,000	0	5,750	15,522	283,857	0
	(ii)	0	0	0	0	0	0	0
Johnny D Callahan	(i)	188,989	0	73,560	0	20,733	283,282	0
	(ii)	0	0	0	0	0	0	0
Jerry L Bellows	(i)	186,478	39,135	309	3,850	0	229,772	0
	(ii)	0	0	0	0	0	0	0
Michael Ehret	(i)	197,951	12,000	0	5,320	11,849	227,120	0
	(ii)	0	0	0	0	0	0	0
Roger Harris	(i)	170,917	7,000	0	4,547	10,064	192,528	0
	(ii)	0	0	0	0	0	0	0
Giuliano Radolovich	(i)	170,792	8,751	0	4,618	15,522	199,683	0
	(ii)	0	0	0	0	0	0	0
Thomas M Sack	(i)	209,221	12,000	0	5,629	15,522	242,372	0
	(ii)	0	0	0	0	0	0	0

Schedule K (Form 990)	Supplemental Information on Tax Exempt Bonds	OMB No 1545-0047
		2008
		Open to Public Inspection

Department of the Treasury
Internal Revenue Service

To be completed by organizations that answered "Yes" to Form 990, Part IV, line 24a.
Provide descriptions, explanations, and any additional information in Schedule O.

Name of the organization Midwest Research Institute	Employer identification number 44-0545878
--	--

Part I Bond Issues (Required for 2008)

(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased		(h) On Behalf of Issuer	
						Yes	No	Yes	No
A MISSOURI DEVELOPMENT FINANCE BOARD	43-1387649	60637MAF3	03-28-2007	20,190,867	RESEARCH FACILITY REVENUE BOND		X		X

Part II Proceeds (Optional for 2008)

		A		B		C		D		E	
1	Total Proceeds of Issue										
2	Gross Proceeds in Reserve Funds										
3	Proceeds in Refunding or Defeasance Escrows										
4	Other Unspent Proceeds										
5	Issuance Costs from Proceeds										
6	Working Capital Expenditures from Proceeds										
7	Capital Expenditures from Proceeds										
8	Year of Substantial Completion										
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
9	Were the bonds issued as part of a current refunding issue?		X								
10	Were the bonds issued as part of an advance refunding issue?		X								
11	Has the final allocation of proceeds been made?		X								
12	Does the organization maintain adequate books and records to support the final allocation of proceeds?		X								

Part III Private Business Use (Optional for 2008)

			A		B		C		D		E	
			Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?			X								
2	Are there any lease arrangements with respect to the financed property which may result in private business use?			X								

Part III

Private Business Use (Continued)

	A		B		C		D		E	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts with respect to the financed property which may result in private business use?			X						
3b	Are there any research agreements with respect to the financed property which may result in private business use?			X						
3c	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?			X						
4	Enter the percentage of financed property used in a private business use by entities other than a 501(c)(3) organization or a state or local government									
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another 501(c)(3) organization, or a state or local government									
6	Total of lines 4 and 5									
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?			X						

Part IV

Arbitrage (Optional for 2008)

	A		B		C		D		E	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T been filed wth respect to the bond issue?			X						
2	Is the bond issue a variable rate issue?			X						
3a	Has the organization or the government issuer identified a hedge with respect to the bond issue on its books and records?			X						
b	Name of provider									
c	Term of hedge									
4a	Were gross proceeds invested in a GIC?			X						
b	Name of provider									
c	Term of GIC									
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?									
5	Were any gross proceeds invested beyond an available temporary period?			X						
6	Did the bond issue qualify for an exception to rebate?			X						

Schedule L
(Form 990 or 990-EZ)

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

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

Name of the organization Midwest Research Institute	Employer identification number 44-0545878
--	--

Part I

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

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

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

2

Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958

▶ \$

3

Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

▶ \$

Part II

Loans to and/or From Interested Persons

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

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c)Original principal amount	(d)Balance due	(e) In default?		(f) Approved by board or committee?		(g)Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
Total				▶ \$						

Part III

Grants or Assistance Benefitting Interested Persons

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

(a) Name of interested person	(b)Relationship between interested person and the organization	(c)Amount of grant or type of assistance

Part IV

Business Transactions Involving Interested Persons

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
See Schedule O	Directors of JE Dunn	4,281,427	Construction Services		No
Greg Graves Director	Pres of Burns & McDonnell	117,601	General Contract Services		No
Jonathan Kemper Director	Dir/CEO of Commerce Bank	269,307	Banking Services		No

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.**

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization Midwest Research Institute	Employer identification number 44-0545878
---	---

Identifier	Return Reference	Explanation
Form 990, Part V, Line 7G and 7H	STATEMENTS REGARDING OTHER IRS FILINGS AND TAX COMPLIANCE	DURING THE YEAR, MIDWEST RESEARCH INSTITUTE DID NOT RECEIV E ANY OF THE PROPERTY LISTED ON LINE 7G AND 7H, THEREFORE, NO FORMS WERE FILED

Identifier	Return Reference	Explanation
FORM 990, PART IV, Line 12 and PART XI, LINES 2A-2C	FINANCIAL STATEMENTS AND REPORTING	MIDWEST RESEARCH INSTITUTE does not have a standalone audit, how ever, it's financial statements are compiled, review ed and audited on a consolidated basis along w ith its w holly ow ned for-profit subsidiary The audit committee oversees the audit process

Identifier	Return Reference	Explanation
FORM 990, PART VI, LINE 2	BUSINESS AND FAMILY RELATIONSHIPS	Jonathan Kemper and Thomas McDonnell have a business relationship Michael Morrissey, Robert Long and William Hall have a business relationship

Identifier	Return Reference	Explanation
FORM 990, PART VI, LINE 10	REVIEW OF 990 PRIOR TO FILING	The 990 is review ed by MRI staff, including the CFO, Controller, and Senior Counsel A final draft version is also review ed by MRI's Audit Committee A final version is provided to each member of the Board of Directors prior to filing the 990

Identifier	Return Reference	Explanation
FORM 990, PART VI, LINE 12C	MONITORING AND ENFORCEMENT OF BOARD INDEPENDENCE	The officers, directors, trustees and key employees of MRI are required to complete a disclosure statement on an annual basis The disclosures set forth on the statements are presented to the Audit Committee of the MRI Board of Directors by the MRI Compliance Officer The Audit Committee discusses the disclosure statements to determine if any potential conflict of interest situations exist with respect to the officers, directors, trustees and key employees of MRI At the follow ing MRI Board Meeting, an executive summary of the disclosure statements is presented to the Directors and the Audit Committee reports the outcome of its discussion to the Directors The Directors are presented the opportunity to discuss the Audit Committee's findings or any other potential conflict of interest issues presented in the executive summary Ultimately, the Board of Directors w ill determine w hether a conflict of interest exists with respect to any officer, director, trustee or key employee of MRI The Audit Committee's findings and the Directors' discussion of potential conflict of interest situations are recorded in the minutes of the Board meeting, including determination of w hether a conflict of interest exists, the names of the individuals involved, the nature of the potential conflict, the action taken and the basis on w hich the Board reached its decision MRI has certain procedures with respect to addressing a conflict of interest transaction Any action to be taken by MRI involving or pertaining to an individual, entity or circumstance with respect to w hich an officer, director, trustee or key employee (each, a "Covered Person") has a conflicting interest w ill be discussed and voted on by the Board of Directors The Covered Person w ill leave the meeting during the discussion of, and the vote on, the transaction or arrangement that may result in a conflict of interest In considering any such action to be taken, the Board w ill undertake appropriate due diligence and inform itself of all material information reasonably available to it and explore all reasonable alternatives to the proposed action that w ould not involved the conflict of interest The standard for the determnation of w hether to undertake the proposed action is w hether such action is, based on a reasonable good-faith belief, (i) in MRI's best interest, (ii) for its ow n benefit, and (iii) fair and reasonable to MRI The Board w ill document w hether or not the conflict of interest transaction w as approved, the names of the persons present for the discussions and vote, the content of the discussion, w hether alternatives w ere discussed that did not involve a conflict of interest, the basis for the determination that the transaction w as (i) in MRI's best interest, (ii) for its ow n benefit, and (iii) fair and reasonable to MRI, and the record of the vote taken with respect to w ho voted to approve the transaction If the Board has reasonable cause to believe that a Covered Person has failed to disclose a conflict of interest situation, it w ill afford the Covered Person an opportunity to explain the alleged failure to disclose If, after hearing the response of the Covered Person and making such further investigation as may be w arranted under the circumstances, the Board determines that the Covered Person has in fact failed to disclose a conflict of interest situation, it w ill take appropriate corrective action The MRI Conflict of Interest policy requires that the officers, directors, trustees and employees of MRI disclose any potential conflict of interest situation to the appropriate party, including an employee's supervisor, a representative of Human Resources, the Compliance Officer, the Board of Directors or the MRI Ethics Hotline, upon aw areness that a conflict of interest may exist Potential conflict of interest situations associated with employees (other than officers, directors, trustees and key employees) are handled by the MRI Compliance Officer, in collaboration with the employee's supervisor and MRI Senior Management, as appropriate All MRI employees are required on an annual basis to complete a compliance questionnaire, w hich affords them the opportunity to disclose any potential conflict of interest situations that have not already been reported or to certify that they are not aw are of any potential conflict of interest situations Failure to disclose a potential conflict of interest situation may result in corrective action to the employee

Identifier	Return Reference	Explanation
FORM 990, PART VI, LINE 15B	COMPENSATION OF OFFICERS, DIRECTORS, KEY EMPLOYEES	MRI's Compensation Committee (Committee) of the Board of Directors is responsible for review ing compensation for Institute employees and approving executive compensation in all areas On an annual basis the Committee review s and approves compensation for executive officers of the Institute and other managers as directed by the Board The Committee review s and approves the CEO's performance evaluations and compensation recommendations for the executives The Committee also monitors summary data on the Institute's employee population (e g total personnel costs, employee diversity, turnover, etc) The Committee utilizes compensation survey data, provided by an outside party, to benchmark compensation against similarly- situated companies The Committee's mnutes document the decisions and basis used for MRI's executive compensation

Identifier	Return Reference	Explanation
FORM 990, PART VI, LINE 19	GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, FINANCIAL STATEMENTS	MRI's governing documents and financial statements are made available to the public upon request MRI's conflict of interest policy is not made available to the public

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1a		THE GOVERNING BODY HAS DELEGATED AUTHORITY TO ACT ON ITS BEHALF TO AN EXECUTIVE COMMITTEE THE EXECUTIVE COMMITTEE MAY EXERCISE ANY AND ALL POWERS OF THE BOARD OF DIRECTORS SUBJECT TO THE PARAMOUNT POWER OF THE BOARD THE EXECUTIVE COMMITTEE MAY CONVENE BETWEEN BOARD MEETINGS TO MAKE DECISIONS THAT CANNOT BE DELAY ED UNTIL THE NEXT BOARD MEETING THE EXECUTIVE COMMITTEE MEMBERS ARE ALL VOTING DIRECTORS SPECIFICALLY, THE COMMITTEE IS COMPRISED OF THE CHAIR OF THE BOARD, VICE CHAIR OF THE BOARD, CHAIR OF THE INVESTMENT AND FINANCE COMMITTEE, CHAIR OF THE AUDIT COMMITTEE, CHAIR OF THE NOMINATING COMMITTEE AND CHAIR OF THE COMPENSATION COMMITTEE

Identifier	Return Reference	Explanation
FORM 990, PART III, LINE 3		MRI managed and operated the National Renew able Energy Laboratory (NREL) under contract by the Department of Energy (DOE) as a division of MRI prior to the expiration of the contract on September 30, 2008 The revenues and expenses related to the NREL contract prior to October 1, 2008 are included in the accompanying 990 Subsequently, MRI is a partner of the Alliance for Sustainable Energy, LLC (Alliance) a 501(c)(3)organization that w as formed to bid on the new NREL contract and for the sole purpose of managing and operating NREL The DOE aw arded Alliance the new NREL contract effective October 1, 2008 Revenue and expenses related to the NREL contract subsequent to September 30, 2008 are not included in the accompanying 990

Identifier	Return Reference	Explanation
Form 990, Schedule L, Part IV Line 1		Michael Morrissey, Director Director of JE DUNN William Hall, Director Director of JE DUNN Robert Long, Director Director of JE DUNN

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2008

Open to Public Inspection

▶ Attach to Form 990. To be completed by organizations that answerd "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37.
▶ See separate instructions.

Name of the organization
Midwest Research Institute

Employer identification number
44-0545878

Part I

Identification of Disregarded Entities

(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Direct controlling entity
MIDWEST RESEARCH INSTITUTE- KANSAS LLC 425 VOLKER BLVD KANSAS CITY, MO 64110 44-0545878	R&D	KS	0	0	NA

Part II

Identification of Related Tax-Exempt Organizations

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity status (if section 501(c)(3))	(F) Direct controlling entity

Part III

Identification of Related Organizations Taxable as a Partnership

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Predominant income(related, investment, unrelated)	(F) Share of total income	(G) Share of end-of- year assets	(H) Disproprtionate allocations?		(I) Code V—UBI amount on Box 20 of K-1	(J) General or managing partner?	
							Yes	No		Yes	No

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Type of entity (C corp, S corp, or trust)	(F) Share of total income	(G) Share of end-of-year assets	(H) Percentage ownership
MRI VENTURES 425 VOLKER BLVD KANSAS CITY, MO64110 43-1294503	Tech Development	MO	NA	C Corp	-205,511	330,811	100 %

Part V

Transactions with Related Organizations

Note. Complete line 1 if any entity is listed in Parts II, III or IV

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity

b Gift, grant, or capital contribution to other organization(s)

c Gift, grant, or capital contribution from other organization(s)

d Loans or loan guarantees to or for other organization(s)

e Loans or loan guarantees by other organization(s)

f Sale of assets to other organization(s)

g Purchase of assets from other organization(s)

h Exchange of assets

i Lease of facilities, equipment, or other assets to other organization(s)

j Lease of facilities, equipment, or other assets from other organization(s)

k Performance of services or membership or fundraising solicitations for other organization(s)

l Performance of services or membership or fundraising solicitations by other organization(s)

m Sharing of facilities, equipment, mailing lists, or other assets

n Sharing of paid employees

o Reimbursement paid to other organization for expenses

p Reimbursement paid by other organization for expenses

q Other transfer of cash or property to other organization(s)

r Other transfer of cash or property from other organization(s)

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

No

No

No

Yes

No

No

No

No

No

No

No

Yes

Yes

No

No

No

No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(A) Name of other organization(s)	(B) Transaction type(a-r)	(C) Amount Involved
(1) MRI VENTURES	D	208,489
(2) MRI VENTURES	M	12,621
(3) MRI VENTURES	N	148,345
(4)		
(5)		
(6)		

Schedule R (Form 990) 2008

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.

[illegible]

Form **4562**

Department of the Treasury
Internal Revenue Service

Depreciation and Amortization
(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

OMB No 1545-0172

2008

Attachment
Sequence No **67**

Name(s) shown on return Midwest Research Institute	Business or activity to which this form relates GENERAL DEPRECIATION	Identifying number 44-0545878
---	---	--------------------------------------

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount See the instructions for a higher limit for certain businesses	1	\$ 250,000
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation (see instructions)	3	\$ 800,000
4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4	
5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions	5	

(a) Description of property	(b) Cost (business use only)	(c) Elected cost
6		
7 Listed property Enter the amount from line 29	7	
8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8	
9 Tentative deduction Enter the smaller of line 5 or line 8	9	
10 Carryover of disallowed deduction from line 13 of your 2007 Form 4562	10	
11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	
13 Carryover of disallowed deduction to 2009 Add lines 9 and 10, less line 12 .▶	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions)

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A		
17 MACRS deductions for assets placed in service in tax years beginning before 2008	17	1,338,098
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ▶		

Section B—Assets Placed in Service During 2008 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27 5 yrs	MM	S/L	
			27 5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part IV Summary (See instructions)

21 Listed property Enter amount from line 28	21	
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instr	22	1,338,098
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V

Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)
Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						24b If "Yes," is the evidence written? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation/ deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)						25		
26 Property used more than 50% in a qualified business use								
		%						
		%						
		%						
27 Property used 50% or less in a qualified business use								
		%			S/L -			
		%			S/L -			
		%			S/L -			
28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1						28		
29 Add amounts in column (i), line 26 Enter here and on line 7, page 1							29	

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person
If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

30 Total business/investment miles driven during the year (do not include commuting miles)	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
31 Total commuting miles driven during the year												
32 Total other personal(noncommuting) miles driven												
33 Total miles driven during the year Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **are not** more than 5% owners or related persons (see instructions)

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions)		
Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles		

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) A mortization period or percentage	(f) A mortization for this year
42 A mortization of costs that begins during your 2008 tax year (see instructions)					
43 A mortization of costs that began before your 2008 tax year				43	
44 Total. Add amounts in column (f) See the instructions for where to report				44	

Additional Data

Software ID:

Software Version:

EIN: 44-0545878

Name: Midwest Research Institute

Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Charles W Battey , Director	1 0	X						0	0	0
Barbara F Atkinson , Director	1 0	X						0	0	0
Lawrence D Burns , Director	1 0	X						0	0	0
David M Clarke , Director	1 0	X						0	0	0
Richard C Green Jr , Chairman	1 0	X						0	0	0
William A Hall , Director	1 0	X						0	0	0
Thomas M Hoenig , Director	1 0	X						0	0	0
A Drue Jennings , Director	1 0	X						0	0	0
Jonathan Kemper , Director	1 0	X						0	0	0
Robert A Kipp , Director	1 0	X						0	0	0
Robert A Long , Director	1 0	X						0	0	0
Thomas A McDonnell , Director	1 0	X						0	0	0
Michael F Morrissey , Director	1 0	X						0	0	0
William B Neaves , Vice-Chairman	1 0	X						0	0	0
Louis W Smith , Director	1 0	X						0	0	0
Greg M Graves , Director	1 0	X						0	0	0
Jefferson W Tester , Director	1 0	X						0	0	0
Jeanie S Latz , General Counsel & Corp Sec	40 0			X				215,753	0	18,955
Dan Arvizu , SR VP & Director, NREL	40 0			X				612,974	0	39,185
Fred V Cornwell , VP & CFO	40 0			X				227,718	0	23,716
William P Glover , VP, Lab Director, COO , NREL	40 0			X				296,558	0	18,907
Michael F Helmstetter , Sr VP & Director of Ops	40 0			X				359,004	0	30,338
Robert San Martin , VP & Director	40 0			X				274,824	0	8,990
James L Spigarelli , President and CEO	40 0			X				860,868	0	21,272
Michael Ehret , Regional VP & Director	40 0				X			209,951	0	17,169
Roger Harris , Division Director	40 0				X			177,917	0	14,611
Giuliano Radolovich , Division Director	40 0				X			179,543	0	20,140
Thomas M Sack , Regional VP & Director	40 0				X			221,221	0	21,151
Dale A Gardner , VP & Assoc Director, NREL	40 0					X		318,026	0	17,599
Fraser P Ward , VP & Director	40 0					X		278,063	0	8,990

Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Joseph S Broz , VP	40 0					X		262,585	0	21,272
Johnny D Callahan , Principal Scientist	40 0					X		262,549	0	20,733
Jerry L Bellows , Strategic Initiatives Manager	40 0					X		225,922	0	3,850