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DLN: 93493133038611

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning 07-01-2009 and ending 06-30-2010 D Employer identification number B Check if applicable Please WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION use IRS label or Address change 55-0665758 Doina Business As E Telephone number print or type. See Name change (304) 293-4008 Specific ☐ Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite 886 CHESTNUT RIDGE ROAD No 408 Instruc-**G** Gross receipts \$ 135,481,310 Terminated tions. City or town, state or country, and ZIP + 4 Amended return MORGANTOWN, WV 26506 Application pending Name and address of principal officer Is this a group return for CURT M PETERSON PHD affiliates? 886 CHESTNUT RIDGE ROAD No 408 MORGANTOWN, WV 26506 H(b) Are all affiliates included? If "No," attach a list (see instructions) Tax-exempt status Group exemption number 🕨 Website: ► HTTP //RESEARCH WVU EDU K Form of organization
✓ Corporation
☐ Trust
☐ Association
☐ Other ► L Year of formation 1985 M State of legal domicile Summary Briefly describe the organization's mission or most significant activities TO FOSTER AND SUPPORT RESEARCH AT WEST VIRGINIA UNIVERSITY Activities & Governance Check this box 📂 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . 0 Number of independent voting members of the governing body (Part VI, line 1b) 237 Total number of employees (Part V, line 2a) . 0 Total number of volunteers (estimate if necessary) . . . Total gross unrelated business revenue from Part VIII, column (C), line 12 . 0 Net unrelated business taxable income from Form 990-T, line 34 0 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 103,974,000 108,856,216 Program service revenue (Part VIII, line 2g) . 23,505,901 24,205,292 Investment income (Part VIII, column (A), lines 3, 4, and 7d) -156,889 543,732 10 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 344,709 295,097 11 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 128,367,112 133,200,946 26,505,719 13 22,190,388 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . 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-Expenses 8,014,475 10,448,101 16a Professional fundraising fees (Part IX, column (A), line 11e) . . . 0 b Total fundraising expenses (Part IX, column (D), line 25) $\blacktriangleright \underline{0}$ Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . 102,949,782 17 102,793,625 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 132,998,488 139,903,602 Revenue less expenses Subtract line 18 from line 12 . -4,631,376 -6,702,656 t Assets or nd Balances Beginning of Current **End of Year** Year 109,471,311 20 110,982,000 Total assets (Part X, line 16) . 80,958,157 21 Total liabilities (Part X, line 26) . 77,174,000 22 Net assets or fund balances Subtract line 21 from line 20 33,808,000 28,513,154 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sian 2011-05-13 Signature of officer Here CURT M PETERSON PHD PRESIDENT Type or print name and title Date Check if Preparer's identifying number Preparer's Paid empolyed 🕨 🦵 Preparer's Firm's name (or yours EIN ▶ if self-employed), address, and ZIP + 4 **Use Only** Phone no

May the IRS discuss this return with the preparer shown above? (see instructions) .

Cat No 11282Y

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission

TO FOSTER AND SUPPORT RESEARCH AT WEST VIRGINIA UNIVERSITY (WVU) AND TO PROVIDE EVALUATION, DEVELOPMENT, PATENTING, MANAGEMENT AND MARKETING SERVICES FOR INVENTIONS BY THE FACULTY, STAFF AND STUDENTS OF WVU

			nons and section 4947(a)(1) truends and section 4947(a)	sts are required to report the am	ount of grants and
	(Code) (Expenses \$	134,577,567 including grants of	, 	23,505,901)
44	IN 1985, THE WEST N PURPOSE TO FOSTER EDUCATIONAL, AND S TO PROVIDE EVALUAT WEST VIRGINIA UNIX 2010, WEST VIRGINI INCREASED BY ALMO THAT FACULTY ARE H	VIRGINIA UNIVERSITY RESEAR R AND SUPPORT RESEARCH AT SCIENTIFIC PURPOSES, INCLU- TION, DEVELOPMENT, PATENT: VERSITY TOTAL SPONSORED FI A UNIVERSITY SUBMITTED 1,3 ST 20% FROM FISCAL YEAR 2 HAVING MORE SUCCESS IN GE	CH CORPORATION (WVURC) WAS CRE. WEST VIRGINIA UNIVERSITY (WVU) T DING FOR SUCH PURPOSES (1) TO FO ING, MANAGEMENT AND MARKETING SE JNDING INCREASED BY NEARLY 17% FI 46 PROPOSALS AND RECEIVED 1,048 A 009 TO FISCAL YEAR 2010, WHEREAS T TTING LARGER PROPOSALS FUNDED D	ATED IN ACCORDANCE WITH THE STATE THE CORPORATION IS ORGANIZED EXCLU- SOTER AND SUPPORT RESEARCH AT WES ENVICES FOR INVENTIONS BY THE FACU- ROM FISCAL YEAR 2009 TO FISCAL YEAR WARDS THE NUMBER OF NEW COMPET: THE AMOUNT OF THESE AWARDS INCREA URING FISCAL YEAR 2010, 25 US PATEN JRES INCREASED BY NEARLY 10% FROM	LAW AND WITH THE EXPRESSED ISIVELY FOR CHARITABLE, ST VIRGINIA UNIVERSITY, AND(2) LTY, STAFF AND STUDENTS OF 2010 DURING THE FISCAL YEAR ING FEDERAL GRANT AWARDS ASED BY 85 7% SUGGESTING T APPLICATIONS WERE FILED AND
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4c	(Code) (Expenses \$	ıncludıng grants of \$) (Revenue \$)
4d	Other program se	ervices (Describe in Sch	edule O)		
	(Expenses \$	ınc	uding grants of \$) (Revenue \$)
4e	Total program se	rvice expenses►\$	134,577,567		

Part TV	Checklist	of Required	d Schedules
	CIICCNIISC	oi ixcaaiici	a ociicadici

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes,"</i> complete Schedule A	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? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
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? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	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? If "Yes," complete Schedule D, Part III	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? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10		Νo
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	◆ Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	◆ Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		Νo
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Νο
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part 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 U S? If "Yes," complete Schedule F, Part II	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III	16	Yes	
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> " <i>Yes," complete Schedule G, Part I</i>	17		N o
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		Νο
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		N o
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νo

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	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? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part 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? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		Νο
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		Νo
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		N o
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? <i>If</i> " <i>Yes,"</i> complete Schedule L, Part <i>IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> " <i>Yes,"</i> complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Νο
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	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	35		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	Yes	

Part V	Statements	Regarding	Other II	RS Filings a	and Tax	Compliance
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			Yes	No
.a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see	2b	Yes	
а	Instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this			
	return?	3a		Νo
Ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
a	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	Yes	
Ь	If "Yes," enter the name of the foreign country \blacktriangleright^{CJ}			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
1	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		No
Ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		N c
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νo
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
а	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		
	Section 501(c)(7) organizations. Enter			
а	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			
	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
2a	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			

886 CHESTNUT RIDGE ROAD MORGANTOWN, WV 26506

(304) 293-7398

Part VI
Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Section A. Governing Body and Management

36	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body 1a 9			
Ь	Enter the number of voting members that are independent 1b 0			
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		Νο
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	Yes	
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νo
6	Does the organization have members or stockholders?	6		Νo
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νo
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, 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	9		Νo
	ection B. Policies (This Section B requests information about policies not required by the Internal			
KE	evenue Code.)		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
	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?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?			
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise	125	V	
c	to conflicts?	12b	Yes	
13	describe in Schedule O how this is done	12c	Yes	
13 14	Does the organization have a written document retention and destruction policy?	13	res	No
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?	14		NO
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
	Other officers or key employees of the organization	15b	Yes	
_	If "Yes" to line a or b, describe the process in Schedule O (See instructions)		100	
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	Yes	
b	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		Νo
	Let the States with which a copy of this Form 200 is required to be filed \textbox.			
17	List the States with which a copy of this Form 990 is required to be filed WV Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(s))			
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. Own website.			
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	ne orga	nızatıor	n 🕨
	ALAN MARTIN SECRETARY			

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed

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

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

Check this box if the organization did i	not compen	sate any	y curi	rent	or fo	rmer	ffice	r, dırector, trustee	or key employee	
(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data										

4,378	4,369,482
.,	1,000,102

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization 4

			1 65	140
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	Yes	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual.	_		

Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person

4	Yes	
5		Νο

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Section B. Independent Contractors

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

(A)	(B)	(C)
Name and business address	Description of services	Compensation
CROTHALL FACILITIES MANAGEMENT INC 955 CHESTERBROOK BLVD STE 300 WAYNE, PA 19087	PROFESSIONAL SERVICES	1,821,969
MASSCON INC PO BOX 1037 UNIONTOWN, PA 15401	PROFESSIONAL SERVICES	1,189,996
ADNET SYSTEMS INC 164 ROLLINS AVENUE STE 303 ROCKVILLE, MD 20852	PROFESSIONAL SERVICES	1,154,983
BLANCHETTE ROCKEFELLER NEUROSCIENCE INST PO BOX 9301 MORGANTOWN, WV 26506	PROFESSIONAL SERVICES	1,000,000
CHARLESTON AREA MEDICAL CENTER 3410 STAUNTON AVENUE CHARLESTON, WV 25304	PROFESSIONAL SERVICES	983,112
2 Total number of independent contractors (including but not limited to those listed above) \$100,000 in compensation from the organization ►43	who received more than	

Form 9	•	,						Page 9
Part	/1111	Statement of	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ats ats	1a	Federated cam	paigns 1a					
grai	ь	Membership du	es 1b					
ts,	С	_	ents 1c					
<u>_</u>	d	Related organiz Government grants	zations 1d	108,536,993				
ons sir	e f	_	ons, gifts, grants, and 1f	319,223				
ber f	<u>'</u>	sımılar amounts no	t included above					
Contributions, gifts, grants and other similar amounts	g							
ဝမ	h	Total. Add lines	s 1a-1f	▶	108,856,216			
e =				Business Code				
Wen	2a SPONSORED RESEARCH b		900,099	23,505,901	23,505,901			
Program Serwce Revenue	C							
	ď							
<i>3</i> 6 =	e							
Gran	f	All other progra	am service revenue					
£	g	Total. Add lines	s 2a-2f		23,505,901			
	3	Investment inc	ome (including dividend	ds, interest				
			ar amounts)	F	572,242			572,242
	4 5		stment of tax-exempt bond p	· · · · ·	146,145			146,145
		Royalties	(ı) Real	(II) Personal	·			·
	6a	Gross Rents	148,952					
	Ь	Less rental expenses						
	C	Rental income or (loss)	148,952					
	d	Net rental inco	me or (loss)		148,952			148,952
	7a	Gross amount	(ı) Securities 2,251,854	(II) O ther				
		from sales of assets other						
	ь	than inventory Less cost or	2,280,364					
		other basis and sales expenses						
	C	Gain or (loss)	-28,510		-28,510			-28,510
	d 8a	Gross income f	rom fundraising		20,310			20,510
Ē		events (not ınc						
Other Revenue			reported on line 1c)					
æ		See Part IV, III	ne 18 a					
i l ei	ь	Less direct ex	penses b					
ō	С		(loss) from fundraising (events 🕨				
	9a		rom gaming activities ne 19 a					
	b c		penses b (loss) from gaming activ	vities				
	10a	Gross sales of returns and allo	ınventory, less					
	Ь	Less costofa	a oods sold b					
	С	Net income or ((loss) from sales of inve					
		Miscellaneou	s Revenue	Business Code				
	11a							
	b c							
	d	All other reven	ue					
		Total. Add lines						
	12	Total revenue.	See Instructions	•	133,200,946	23,505,901	0	838,829
				L	133,200,340	23,303,301	U	030,023

	990 (2009)				Page 10
Par	Statement of Functional Expenses				
А	Section 501(c)(3) and 501(c)(4) organizations m Il other organizations must complete column (A) but are not required to			D).	
Do no	ot include amounts reported on lines 6b, b, 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	24,635,345	24,635,345		·
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	1,671,571	1,671,571		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	198,803	198,803		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	8,155,626	6,613,590	1,542,036	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	415,842	337,216	78,626	
9	Other employee benefits	1,282,966	1,040,388	242,578	
10	Payroll taxes	593,667	481,419	112,248	
11	Fees for services (non-employees)	333,007	101,113	112,210	
a	Management				
b	Legal	118,693	9,244	109,449	
c	Accounting	110,055	3,244	103,443	
d	Lobbying	48,071		48,071	
e	Professional fundraising See Part IV, line 17	40,071		40,071	
f	Investment management fees	5,109	4,905	204	
	Other	5,109	4,903	204	
g 12	Advertising and promotion	431,975	383,956	48,019	
13	Office expenses	3,694,876	3,319,304	375,572	
	Information technology			,	
14		1,178,993	1,083,778	95,215	
15	Royalties	41,420	1 007 006	41,420	
16	Occupancy	2,006,920	1,987,096	19,824	
17 18	Payments of travel or entertainment expenses for any federal, state, or local public officials	4,626,763	4,499,315	127,448	
19	Conferences, conventions, and meetings	639,397	616,999	22,398	
20	Interest	1,117,766	739,856	377,910	
21	Payments to affiliates	_,	123,230	=11,7220	
22	Depreciation, depletion, and amortization	557,239	557,239		
23	Insurance	75,334	25,656	49,678	
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)	13,031		is per s	
а	SHARED SERVICES	53,684,622	53,295,337	389,285	
b	OPERATING EXP TO WVU	15,246,339	15,246,339		
c	CONSULTING/SUBCONT FEE	9,526,843	8,117,195	1,409,648	
d	RESEARCH/EDUC SUPPLIES	7,717,168	7,657,564	59,604	
e	SOFTWARE	460,674	435,438	25,236	
f	All other expenses	1,771,580	1,620,014	151,566	
25	Total functional expenses. Add lines 1 through 24f	139,903,602	134,577,567	5,326,035	0
26	Joint costs. Check here ► ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational	253,303,002		5,520,633	<u> </u>
	campaign and fundraising solicitation				

Pa	rt X	Balance Sheet									
					(A)		(B)				
					Beginning of year		End of year				
	1	Cash—non-interest-bearing	22.077.000	1	40.404.544						
	2	Savings and temporary cash investments	22,977,000	_	13,184,514						
	3	Pledges and grants receivable, net		25,654,000	3	29,963,233					
	4	Accounts receivable, net		4							
Assets	5	Receivables from current and former officers, directors, trustee highest compensated employees Complete Part II of									
		Schedule L				5					
	6	Receivables from other disqualified persons (as defined under spersons described in section $4958(c)(3)(B)$ Complete Part II of		n 4958(f)(1)) and							
		Schedule L				6					
	7	Notes and loans receivable, net				7					
	8	Inventories for sale or use				8					
⋖	9	Prepaid expenses and deferred charges			10,000	9	197,444				
	10a	Land, buildings, and equipment cost or other basis <i>Complete</i> Part VI of Schedule D	10a	51,426,058							
	ь	Less accumulated depreciation	10b	8,133,975	37,740,000	10c	43,292,083				
	11	Investments—publicly traded securities		·	13,629,000	11	12,839,037				
	12	Investments—other securities See Part IV, line 11			10,972,000	12	9,995,000				
	13	Investments—program-related See Part IV, line 11				13					
	14	Intangible assets		14							
	15	Other assets See Part IV, line 11		15							
	16	Total assets. Add lines 1 through 15 (must equal line 34) .	110,982,000	16	109,471,311						
	17	Accounts payable and accrued expenses .			31,225,000	17	30,924,489				
	18	Grants payable		18							
	19	Deferred revenue	20,701,000	19	24,240,105						
	20	Tax-exempt bond liabilities			20						
e S	21	Escrow or custodial account liability Complete Part IV of Schedu	scrow or custodial account liability Complete Part IV of Schedule D								
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified									
<u> </u>		persons Complete Part II of Schedule L				22					
_	23	Secured mortgages and notes payable to unrelated third parties			25,203,000	23	25,623,271				
	24	Unsecured notes and loans payable to unrelated third parties				24					
	25	Other liabilities Complete Part X of Schedule D			45,000	25	170,292				
	26	Total liabilities. Add lines 17 through 25			77,174,000	26	80,958,157				
٠,		Organizations that follow SFAS 117, check here ▶ 🔽 and comp	olet e l	lines 27							
Ф		through 29, and lines 33 and 34.									
Balances	27	Unrestricted net assets			20,494,000	27	9,674,700				
8	28	Temporarily restricted net assets		13,314,000	28	18,838,454					
Fund	29	Permanently restricted net assets			29						
r Fu		Organizations that do not follow SFAS 117, check here ► arlines 30 through 34.	nd con	nplete							
s or	30	Capital stock or trust principal, or current funds				30					
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31					
d SS	32	Retained earnings, endowment, accumulated income, or other fu	- •		32						
Net /	33	Total net assets or fund balances			33,808,000	33	28,513,154				
ž	34	Total liabilities and net assets/fund balances			110,982,000	34	109,471,311				
	L				1 .10,002,000	J-4	.55,47 1,511				

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	Separate basis Consolidated basis 🔽 Both consolidated and separated basis			
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? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	Yes	

Form **990** (2009)

WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Public Charity Status and Public Support

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

Inspection Employer identification number

55-0665758 Reason for Public Charity Status (All organizations must complete this part.) See instructions organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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 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) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% 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 331/3% 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) An organization organized and operated exclusively to test for public safety Seesection 509(a)(4). 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 Type III - Other Type II 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) 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 Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is th organizat col (i) lis your gove docume	e ion in ted in erning	(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the US?		(vii) A mount of support?	
		ınstructions))	Yes	No	Yes	No	Yes	No		
WEST VIRGINIA UNIVERSITY	556000842	IRC SECTION 115	Yes		Yes		Yes		139,903,602	

Total

and (III) below, the governing body of the the supported organization?

(iii) a 35% controlled entity of a person described in (i) or (ii) above?

Provide the following information about the supported organization(s)

(ii) a family member of a person described in (i) above?

11q(i)

11g(ii)

11g(iii)

Νo

Νo

Nο

139,903,602

ınstructions

P	Support Schedule (Complete only if yo					and 170(b)	(1)(A)(vi)
S	ection A. Public Support	a checked tile	DOX OII IIIC 3,	,, or o or rare.	֥ <i>)</i>		
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(b) 2006	(6) 2007	(d) 2008	(e) 2009	(I) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual						
_	grants ") Tax revenues levied for the						
2	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 lines 1 through 3						
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column						
_	(f) Dublic Support Subtract line F from						
6	Public Support. Subtract line 5 from line 4						
S	ection B. Total Support	1		-			
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(b) 2000	(6) 2007	(d) 2008	(e) 2009	(1) Total
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
9	sources Net income from unrelated						
9	business activities, whether or						
	not the business is regularly						
	carried on						
10	Other income (Explain in Part						
	IV) Do not include gain or loss						
	from the sale of capital assets						
11	Total support (Add lines 7						
4.5	through 10)	/5					
12	Gross receipts from related activities	,	•			12	
13	First Five Years If the Form 990 is f	or the organizati	on's first, second	, third, fourth, or	fifth tax year as a	501(c)(3) orga	inization, ▶□
	check this box and stop here						-1
S	ection C. Computation of Pub	lic Support P	ercentage				
14	Public Support Percentage for 2009			11 column (f))		14	
15	Public Support Percentage for 2008	Schedule A . Pa	rt II. line 14			15	
	33 1/3% support test—2009. If the	•	,	v on line 13 and	line 14 is 33 1/30		k this hox
	and stop here. The organization qua	-		·	IIIIC 14 13 33 1/3/	o or more, ence	▶ □
ь	33 1/3% support test—2008. If the				5a, and line 15 is	33 1/3% or moi	
	box and stop here. The organization				,		▶
17a	10%-facts-and-circumstances test-	-2009. If the org	anızatıon dıd not	check a box on lı	ne 13, 16a, or 16	b and line 14	
	ıs 10% or more, and ıf the organizat						
	in Part IV how the organization mee	ts the "facts and	l cırcumstances"	test The organiz	ration qualifies as	a publicly supp	
L	organization	_2009 Ifthe c==	onization did net	chack a bay as li	no 12 165 164	or 17a and line	▶□
D	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ	_					
	Explain in Part IV how the organizat						clv
	supported organization						▶ ┌
10	Deiveta Farmdation Ifthe averages	on did not obselv	a hay an line 12	16- 16- 17-	17	hay and cas	•

▶□

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

	(Complete only if you	ı checked the l	box on line 9 o	f Part I.)			
	ction A. Public Support	T	T	T	T		
Cale	ndar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	ın) Gıfts, grants, contributions, and					1	
1	membership fees received (Do not						
	include any "unusual grants ")						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
_	are not an unrelated trade or						
	business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
•	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	A mounts included on lines 1, 2,						
	and 3 received from disqualified						
	persons A mounts included on lines 2 and 3						
D	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public Support (Subtract line 7c						
	tion B. Total Support						
	ndar year (or fiscal year beginning						
	in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar						
	sources						
ь	Unrelated business taxable						
_	income (less section 511 taxes)						
	from businesses acquired after						
	June 30, 1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business activities not included						
	in line 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of						
	capital assets (Explain in Part						
13	IV) Total support (Add lines 9, 10c,						
13	11 and 12)						
14	First Five Years If the Form 990 is f	or the organizati	on's first, second	, thırd, fourth, or	fifth tax year as a	501(c)(3) orga	
	check this box and stop here						▶□
	ation C Community (F. 1)	i - Communication					
	Ction C. Computation of Publ			12! (0)		<u> </u>	
15	Public Support Percentage for 2009			13 column (f))		15	
16	Public support percentage from 200	8 Schedule A, P	art III, line 15			16	
Se	ction D. Computation of Inve						
17	Investment income percentage for 2				n (f))	17	
18	Investment income percentage from	2008 Schedule	A , Part III , line 1	.7		18	
	33 1/3% support tests—2009. If the				l line 15 is more		d line 17 is not
	more than 33 1/3%, check this box organization					a.i 55 1/5/0 ali	c 17 13 HOC

33 1/3% support tests—2008. 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 **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. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Schedule A (Form 990 or 990-EZ) 2009

Software ID: **Software Version:**

EIN: 55-0665758

Name: WEST VIRGINIA UNIVERSITY RESEARCH

CORPORATION

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and		lent C			ors					
(A) Name and Title	(B) Average hours per		tion (that a	che	')			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
JAMES PCLEMENTS CHAIRMAN START 7/1/09	30	х		х				0	207,148	21,759
MICHELE WHEATLY VICE-CHAIRMAN START 1/1/10	1 00	Х		х				0	0	0
BARBARA DUCATMAN DIRECTOR START 10/13/09	40	Х						0	130,939	8,221
CHRISTOPHER COLENDA DIRECTOR START 12/17/09	2 00	Х						0	24,172	1,766
ELIZABETH JANE MARTIN VICE-CHAIRMAN EXIT 12/31/09	2 00	Х		х				0	232,242	21,687
JAMES BRICK DIRECTOR EXIT 1/26/10	10	Х						0	160,807	16,035
RUDOLPH ALMASY DIRECTOR EXIT 6/29/10	30	Х						0	179,973	25,398
EUGENE CILENTO DIRECTOR	1 00	Х						0	215,056	23,665
CAMERON HACKNEY DIRECTOR	50	Х						0	183,037	50,977
NARVEL WEESE DIRECTOR	2 00	Х						0	204,825	29,619
BOJAN CUKIC DIRECTOR	1 00	х						0	162,034	18,100
JIM ANDERSON DIRECTOR	80	Х						0	126,985	21,335
FRED BUTCHER DIRECTOR EXIT 12/16/09	1 00	Х						0	306,703	38,265
CURT PETERSON PRESIDENT	20 00			х				0	194,798	14,929
ALAN MARTIN SECRETARY	30 00			х				0	117,602	24,072
DANIEL DURBIN TREASURER	10 00			х				0	180,613	31,997
GERALD IWAN MANAGER, NESC	40 00					х		109,626	0	6,578
JO SEPH HRABIK GENERAL COUNSEL EXIT 9/30/10	40 00					Х		145,872	0	25,444
MELVIN CROUCHER MANAGER, RESEARCH & ECONOMIC DEV	40 00					х		114,118	0	19,293
PHILIP SPARKS DIRECTOR, OFFICE OF TECH TRANSFER	60 00					х		168,912	0	26,774
EARL SCIME FORMER DIRECTOR EXIT 10/7/08	0 00						х	0	165,047	27,946
MARY ELLEN MAZEY FORMER DIRECTOR EXIT 2/15/09	0 00						х	0	41,420	4,620
THOMAS SABA FORMER DIRECTOR EXIT 5/19/09	0 00						х	5,850	198,923	22,137
LARRY HORNAK FORMER DIRECTOR EXIT 4/6/04	0 00						х	0	205,101	28,880
GEORGE SPIROU FORMER DIRECTOR EXIT 11/15/06	0 00						х	0	191,358	32,714

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

compensated Employees, and Independent contractors										
(A) Name and Title	(B) Average hours	rage Position (check all				II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
DAVID HARDESTY JR FORMER CHAIRMAN & DIR EXIT 9/20/07	0 00						х	0	157,396	29,091
MRIDUL GAUTAM FORMER DIRECTOR EXIT 9/25/07	0 00						Х	0	204,994	29,918
GERALD LANG FORMER V-CHAIR & DIR EXIT 6/30/08	0 00						X	0	252,423	32,442
PATRICK CALLERY FORMER DIRECTOR EXIT 5/19/09	0 00						Х	0	160,549	26,623
PETER MCGRATH FORMER CHAIRMAN & DIR EXIT 6/30/09	0 00						x	0	165,337	9,950

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
SHARED SERVICES	53,684,622	53,295,337	389,285	
OPERATING EXP TO WVU	15,246,339	15,246,339		
CONSULTING/SUBCONT FEE	9,526,843	8,117,195	1,409,648	
RESEARCH/EDUC SUPPLIES	7,717,168	7,657,564	59,604	
SO FTWA RE	460,674	435,438	25,236	

DLN: 93493133038611

OMB No 1545-0047

Political Campaign and Lobbying Activities

(Form 990 or 990-EZ) Department of the Treasury

SCHEDULE C

Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

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

Open to Public Inspection

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

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

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

	, , , ,	t have filed Form 5768 (election und	, , , ,	•		•	
	· / · / •	t have NOT filed Form 5768 (electio		• • • •		•	
	•	s," to Form 990, Part IV, Line 5	(Proxy Tax) or For	rm 990-EZ, line 35a (re	egard	ding proxy tax),	then
	ection 501(c)(4), (5), or (6) organi	zations Complete Part III		l el		1.6 1	
	me of the organization ST VIRGINIA UNIVERSITY RESEARCH CO	ORPORATION		Employer	den	itification numbe	r
				55-0665	758		
Par	t I-A Complete if the or	ganization is exempt unde	er section 501(c) or is a section	527	' organizatioı	n.
1	Provide a description of the or	ganızatıon's dırect and ındırect po	litical campaign ac	tivities in Part IV			
2	Political expenditures			▶		\$	0
3	V olunteer hours					-	0
						•	
Par	t I-B Complete if the or	ganization is exempt unde	er section 501(c)(3).			
1	Enter the amount of any excise	e tax incurred by the organization	under section 495!	5	-	\$	0
2	Enter the amount of any excise	e tax incurred by organization man	agers under sectio	n 4955	►	\$	0
3	If the organization incurred a s	ection 4955 tax, did it file Form 4	720 for this year?			☐ Yes	┌ No
4a	Was a correction made?					☐ Yes	┌ No
b	If "Yes," describe in Part IV						
Pai	t I-C Complete if the or	ganization is exempt unde	r section 501(c) except section	501	l(c)(3).	
1	Enter the amount directly expe	ended by the filing organization for	section 527 exem	pt function activities	⊨	\$	
2	Enter the amount of the filing of exempt funtion activities	organization's funds contributed to	other organization	s for section 527	-	\$	
3	Total exempt function expendi	tures Add lines 1 and 2 Enter he	re and on Form 112	20-POL, line 17b	-	\$	
4	Did the filing organization file I	Form 1120-POL for this year?				Yes	┌ No
5	were made For each organizat contributions received that we	nd employer identification number ion listed, enter the amount paid fi re promptly and directly delivered nittee (PAC) If additional space is	rom the filing organ to a separate polit	ızatıon's funds Also er ıcal organızatıon, such	ntert	he amount of pol	ıtıcal
	(a) Name	(b) Address	(c) EIN	(d) A mount paid fr filing organization funds If none, enter	's	(e) A mount of contributions in and prompt directly delive separate poorganization enter -0	received ly and red to a litical If none,

Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

P	art II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c)(3) and file	d Form 5768	(election
A	Check I if the filing organization belongs to a					
<u>B</u>	Check If the filing organization checked box	x A and "limited contro	ol" provisions apply	,		
	Limits on Lobbying E (The term "expenditures" means an		l.)		(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lob	bying)			
Ь	Total lobbying expenditures to influence a legisla	ative body (direct lobb	yıng)	Γ		
c	Total lobbying expenditures (add lines 1a and 1b	o)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount foolumns	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
	Not over \$500,000	20% of the amount on li	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,000	0		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,0	000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,00	00		
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25% of lin	e 1f)				
h	Subtract line 1g from line 1a If zero or less, ente	er - O -				
i	Subtract line 1f from line 1c If zero or less, ente	r-0-				
j	If there is an amount other than zero on either lin section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file F	orm 4720 repo	rtıng	┌ Yes ┌ No
	(Some organizations that made a columns below. See th	ne instructions fo	ection do not l r lines 2a thro	nave to com ugh 2f on pa		he five
	Lobbying Expe	enditures During	4-Year Averag	ing Period		
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a	Lobbying non-taxable amount					
ь	Lobbying ceiling amount (150% of line 2a, column(e))					
	Total lobbying expenditures					
d	Grassroots non-taxable amount					

Part II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768
	(election under section 501(h)).

		(;	a)	(b)	
		Yes	No	A mount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?		Νo		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes			
c	Media advertisements?		Νo		
d	Mailings to members, legislators, or the public?	Yes			
е	Publications, or published or broadcast statements?		Νo		
f	Grants to other organizations for lobbying purposes?		Νo		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		116,454	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo		
i	Other activities? If "Yes," describe in Part IV		Νo		
j	Total lines 1c through 1i			116,454	
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Νo		
b	If "Yes," enter the amount of any tax incurred under section 4912				
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
Ь	Carryover from last year	2b	
c ·	Total	2c	

3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Dues, assessments and similar amounts from members

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Ident if ier	Return Reference	Explanation
Part IV , Supplemental Information		LOBBYING ACTIVITIES CONSIST OF IDENTIFYING FEDERAL AND STATE FUNDED RESEARCH AND DEVELOPMENT PROGRAMS WHICH CAN BE PERFORMED BY RESEARCHERS AND STAFF, UTILIZING THE
		LABORATORIES AND EQUIPMENT AVAILABLE TO THE ORGANIZATION LOBBYING ACTIVITIES FOCUS UPON ENGINEERING, MEDICAL AND ENERGY RELATED RESEARCH OPPORTUNITIES

1

DLN: 93493133038611

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public

ernal R	evenue Service	Form 990. ► See separate instructions.		Inspect	поп
	e of the organization VIRGINIA UNIVERSITY RESEARCH CORPORATION		Employer identifica	ation numbe	er
VVLSI	VINGINIA UNIVERSITY RESEARCH CONFORMATION		55-0665758		
Par			ınds or Accounts	s. Complet	te if the
	organization answered "Yes" to Form 9	90, Part IV, line 6. (a) Donor advised funds	(b) Funds and o	other accou	nte
-	otal number at end of year	(a) Bonor advised rands	(b) runus unu (Jiller accou	1103
	ggregate contributions to (during year)				
	ggregate grants from (during year)				
	ggregate value at end of year				
i	Old the organization inform all donors and donor adv		or advised	┌ Yes	┌ No
•	Old the organization inform all grantees, donors, and ised only for charitable purposes and not for the be conferring impermissible private benefit	d donor advisors in writing that grant funds nefit of the donor or donor advisor, or for an	y other purpose	☐ Yes	Г No
Part	III Conservation Easements. Complete	e if the organization answered "Yes" to	Form 990, Part I	V, line 7.	
 -	Purpose(s) of conservation easements held by the or Preservation of land for public use (e.g., recreated Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualeasement on the last day of the tax year	tion or pleasure)		ture	
_	otal number of conservation easements	-		End of the	Year
	otal number of conservation easements otal acreage restricted by conservation easements	e	2a 2b		
	Number of conservation easements on a certified hi	<u> </u>	2c 2c		
	Number of conservation easements included in (c) a		2d		
		L			
	Number of conservation easements modified, transf	erred, released, extinguished, or terminate	d by the organization	auring	
	he taxable year 🕨				
•	lumber of states where property subject to conserv	ation easement is located ►	<u> </u>		
	Does the organization have a written policy regarding inforcement of the conservation easements it holds		lling of violations, and	☐ Yes	┌ No
	Staff and volunteer hours devoted to monitoring, ins				
,	Amount of expenses incurred in monitoring, inspect	ing, and enforcing conservation easements	during the year 🟲 \$		
	Does each conservation easement reported on line .70(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	2(d) above satisfy the requirements of sec	tion	☐ Yes	┌ No
	n Part XIV, describe how the organization reports or valance sheet, and include, if applicable, the text of he organization's accounting for conservation ease	the footnote to the organization's financial			
art	Organizations Maintaining Collection Complete if the organization answered		or Other Similar	Assets.	
	f the organization elected, as permitted under SFAS irt, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fi	d for public exhibition, education or researc	h in furtherance of pu		≘,
_	f the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these item	public exhibition, education, or research ir		•	
	i) Revenues included in Form 990, Part VIII, line :	1	► \$		0
	ii) Assets included in Form 990, Part X				
	f the organization received or held works of art, his	torical treasures, or other similar assets fo			
	ollowing amounts required to be reported under SFA				
а	Revenues included in Form 990, Part VIII, line 1		► \$		0

Assets included in Form 990, Part X

	Using the organization's accession and othe	r records, check an	y of th	e foll		at are a signific			sets (co	
	items (check all that apply)		_	_						
а	Public exhibition		d	ı	Loan or	exchange prog	ırams			
b	Scholarly research		e	Γ	Other					
c	Preservation for future generations									
4	Provide a description of the organization's co	ollections and expla	aın hov	v they	further	the organizatio	n's ex	empt purpose 11	ו	
5	During the year, did the organization solicit								_	_
_	assets to be sold to raise funds rather than t		·					<u>'</u>	Yes	No
Par	Part IV, line 9, or reported an ar	•			_		ea "Y	es" to Form 9	90,	
	Is the organization an agent, trustee, custod included on Form 990, Part X?					ons or other as	setsi		Yes	┌ No
Ь	If "Yes," explain the arrangement in Part XI	√ and complete the	follow	ıng ta	able			Am	ount	
c	Beginning balance						1c			
d	Additions during the year						1d			
e	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fo	orm 990. Part X. lin	e 212					Г	Yes	
	If "Yes," explain the arrangement in Part XIV							,		, 110
	rt V Endowment Funds. Complete		n ans	were	ed "Yes"	to Form 990	, Par	t IV, line 10		
		(a)Current Year		Prior \		c) Two Years Back			(e) Four Y	ears 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 yea	r end balance held	as		•					
а	Board designated or quasi-endowment 🕨									
ь										
_	Permanent endowment 🕨									
c 3a	Term endowment Are there endowment funds not in the posse organization by	ssion of the organiz	ation 1	that a	re held a	ınd admınıster	ed for	the	Yes	No No
c	Term endowment ► Are there endowment funds not in the posse		ation f	that a	re held a	nd administer	ed for	the 3a(i		No
c	Term endowment ► Are there endowment funds not in the posse organization by					administer	ed for)	No
с За	Term endowment Are there endowment funds not in the posse organization by (i) unrelated organizations	ns listed as require	 d on S	ched	· · · ule R?		ed for	3a(i	i)	No
c 3a b	Term endowment Are there endowment funds not in the posse organization by (i) unrelated organizations	ns listed as require	 d on S dowme	ched ent fu	ule R?			3a(i	i)	No
c 3a b	Term endowment Are there endowment funds not in the posse organization by (i) unrelated organizations	ns listed as require	 d on S dowme	ched ent fu ee F	ule R? nds orm 990), Part X, line		3a(i	i)	No
c 3a b	Term endowment Are there endowment funds not in the posse organization by (i) unrelated organizations	ns listed as require	 d on S dowme	chedent fu	ule R?), Part X, line		3a(i	i)	No
c 3a b 4 Par	Term endowment Are there endowment funds not in the posse organization by (i) unrelated organizations	ns listed as require	 d on S dowme	chedent fu	ule R? nds orm 990	D, Part X, line ner (b)Cost or that basis (oth		3a(i 3b (c) Accumulated	i)	
c 3a b 4 Par	Term endowment Are there endowment funds not in the posse organization by (i) unrelated organizations	ns listed as require	 d on S dowme	chedent fu	ule R? nds orm 990	D, Part X, line ner (b)Cost or basis (oth	e 10.	3a(i 3b (c) Accumulated	(d) Bo	ok value
c 3a b 4 Par	Term endowment Are there endowment funds not in the posse organization by (i) unrelated organizations	ns listed as require	 d on S dowme	chedent fu	ule R? nds orm 990	D, Part X, line ner (b)Cost or basis (oth	2 10. other er)	3a(i 3a(i 3b c) 3b	(d) Bo	ok value 704,939
c 3a b 4 Par	Term endowment Are there endowment funds not in the posse organization by (i) unrelated organizations	ns listed as require	 d on S dowme	chedent fu	ule R? nds orm 990	D, Part X, line ner (b)Cost or basis (oth	2 10. other er)	3a(i 3a(i 3b c) 3b	(d) Bo	ok value
c 3a b 4 Par	Term endowment Are there endowment funds not in the posse organization by (i) unrelated organizations	ns listed as require	 d on S dowme	chedent fu	ule R? nds orm 990	D, Part X, line ner (b)Cost or basis (oth 70 28,24	2 10. other er)	3a(i 3a(i 3b c) 3b	(d) Bo	ok value

Part VII Investments—Other Securities. See			
(a) Description of security or category (including name of security)	(b)Book value	Cost or end-o	od of valuation f-year market value
Financial derivatives			
Closely-held equity interests Other			
CF ABSOLUTE RETURN INVESTORS B BLUE	47,000		F
CF MULTI-STRATEGY BOND INVESTORS FUND	4,516,000		F
CF MULTI-STRATEGY EQUITY FUND	4,317,000		F
ROBECO-SAGE CAPITAL INTERNATIONAL	1,115,000		F
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	9,995,000		
Part VIII Investments—Program Related. See			
(a) Description of investment type	(b) Book value	(c) Metho	od of valuation
	(-,	Cost or end-o	f-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Total. (Column (b) should equal Form 990, Part X, col (B) line 13) Part IX Other Assets. See Form 990, Part X, lin (a) Descrip	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.	e 15. tion		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X	e 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	e 15. tion		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X	E 15. tion 5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	e 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	E 15. tion 5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	E 15. tion 5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	E 15. tion 5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	E 15. tion 5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	E 15. tion 5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	E 15. tion 5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	E 15. tion 5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	E 15. tion 5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	E 15. tion 5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	E 15. tion 5.) , line 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	E 15. tion 5.) , line 25. (b) A mount		(b) Book value

Par	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Stateme	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	133,200,946
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	139,903,602
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-6,702,656
4	Net unrealized gains (losses) on investments	4	1,408,000
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-190
9	Total adjustments (net) Add lines 4 - 8	9	1,407,810
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-5,294,846
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue	per R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	134,608,000
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
е	Add lines 2a through 2d	2e	1,408,000
3	Subtract line 2e from line 1	3	133,200,000
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
С	Add lines 4a and 4b	4c	946
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	133,200,946
	Reconciliation of Expenses per Audited Financial Statements With Expense	s per	
1	Total expenses and losses per audited financial statements	1	139,903,000
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	139,903,000
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)]	
С	Add lines 4a and 4b	4c	602
•	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)		139,903,602

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, 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. Also complete this part to provide any additional information

Ident if ier	Return Reference	Explanation
		PART XI - RECONCILIATION OF CHANGE IN NET ASSETS FROM FORM 990 TO AUDITED FINANCIAL STATEMENTS LINE 8 - OTHER (\$190) FINANCIAL STATEMENT ROUNDING PART XII - RECONCILIATION OF REVENUE PER AUDITED FINANCIAL STATEMENTS WITH REVENUE PER RETURN LINE 4B - OTHER \$946 FINANCIAL STATEMENT ROUNDING PART XIII - RECONCILIATION OF EXPENSES PER AUDITED
		FINANCIAL STATEMENTS WITH EXPENSES PER RETURN LINE 4B - OTHER \$602 FINANCIAL STATEMENT ROUNDING

DLN: 93493133038611

OMB No 1545-0047

Inspection

Open to Public

SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

Statement of Activities Outside the United States ► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990. ▶ See separate instructions.

Employer identification number

Name of the organization WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION

55-0665758

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

	"Yes" to Form 990, Part IV, line 14b.
1	For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?
2	For grant makers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States
3	Activites per Region (Use Schedule F-1 (Form 990) if additional space is needed)

morth america of companies or sequence or sequen	Activites per Region (o	se schedule r-1	(FOITH 990) II aut	uitional space is needed)		
EUROPE 0 0 PROGRAM SERVICES EDUCATIONAL GRANTS TO STUDENTS TECHNOLOGY TRANSFER LICENSING AGREEMENT CENTRAL AMERICA AND O INVESTMENTS CENTRAL AMERICA AND THE O PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION THE CARIBBEAN TO PROGRAM SERVICES POREIGN TRAVEL RELATED TO RESEARCH/EDUCATION RESEARCH/EDUCATION TRAVEL RELATED TO RESEARCH/EDUCATION RESEARCH/EDUCATION TRAVEL RELATED TO RESEARCH/EDUCATION RESEARCH	(a) Region	offices in the	employees or	region (by type) (i e , fundraising, program services, grants to recipients located in	is a program service, describe specific type of	(f) Total expenditures for region
EUROPE 0 0 PROGRAM SERVICES TECHNOLOGY TRANSFER LICENSING AGREEMENT CENTRAL AMERICA AND 0 INVESTMENTS CENTRAL AMERICA AND 1 0 INVESTMENTS CENTRAL AMERICA AND 1 0 INVESTMENTS CENTRAL AMERICA AND 1 0 PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION EUROPE 0 0 PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION NORTH AMERICA 0 0 PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION SOUTH AMERICA 0 0 PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION SUB-SAHARAN AFRICA 0 0 PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION SUB-SAHARAN AFRICA 0 0 PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION CENTRAL AMERICA AND 0 PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION CENTRAL AMERICA AND 0 PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION MIDDLE EAST AND NORTH 0 PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION NORTH ASIA 0 PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION NORTH ASIA 0 PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION NORTH AMERICA 0 PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION NORTH AMERICA 0 PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION NORTH AMERICA 0 PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION NORTH AMERICA 0 PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION NORTH AMERICA 0 PROGRAM SERVICES OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION NORTH AMERICA 0 PROGRAM SERVICES OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION EUROPE 0 PROGRAM SERVICES OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION EUROPE 0 PROGRAM SERVICES OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION EUROPE 0 PROGRAM SERVICES OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION RESEARCH	NORTH AMERICA	0	0	PROGRAM SERVICES	RESEARCH	170,799
NORTH AMERICA O PROGRAM SERVICES TECHNOLOGY TRANSFER LICENSING AGREEMENT CENTRAL AMERICA AND THE CARIBBEAN CENTRAL AND THE O PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION NORTH AMERICA O PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION NORTH AMERICA O PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION NORTH AMERICA O PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION SOUTH AMERICA O PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION SUB-SAHARAN AFRICA O PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION SUB-SAHARAN AFRICA O PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION NORTH AMERICA O PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION O PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION O PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION NORTH AMERICA O PROGRAM SERVICES POREIGN TRAVEL PROFITED TO RESEARCH/EDUCATION O PROGRAM SERVICES OPERATING EXPENSES 9,4 EUROPE O O PROGRAM SERVICES OPERATING EXPENSES 9,4 ELATED TO RESEARCH/EDUCATION O PROGRAM SERVICES OPERATING EXPENSES 4,6 PROGRAM SERVICES OPERATING EXPENSES 4,6 RELATED TO RESEARCH/EDUCATION O PROGRAM SERVICES OPERATING EXPENSES 4,6 PROGRAM SERVICES OPERATING EXPENSES 4,6 PROGRAM SERVICES OPERATING EXPENSES A,6 PROGRAM SERVIC	EUROPE	0	0	PROGRAM SERVICES	RESEARCH	20,004
CENTRAL AMERICA AND THE CARIBBEAN O O INVESTMENTS THE CARIBBEAN O O PROGRAM SERVICES FOREIGN TRAVEL (118,5 FACH) FOREIGN FACH) FOREIGN TRAVEL (118,5 FACH) FOREIGN TRAVEL	EUROPE	0	0	PROGRAM SERVICES		8,000
THE CARIBBEAN EAST ASIA AND THE PACIFIC EUROPE O PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION EUROPE O PROGRAM SERVICES POREIGN TRAVEL 118,5 RELATED TO RESEARCH/EDUCATION NORTH AMERICA O PROGRAM SERVICES POREIGN TRAVEL 72,7 RELATED TO RESEARCH/EDUCATION SOUTH AMERICA O PROGRAM SERVICES POREIGN TRAVEL 71,7 RELATED TO RESEARCH/EDUCATION SUB-SAHARAN AFRICA O PROGRAM SERVICES FOREIGN TRAVEL 11,7 RESEARCH/EDUCATION CENTRAL AMERICA AND O PROGRAM SERVICES FOREIGN TRAVEL 1,8 RELATED TO RESEARCH/EDUCATION CENTRAL AMERICA AND O PROGRAM SERVICES FOREIGN TRAVEL 2,2 RELATED TO RESEARCH/EDUCATION MIDDLE EAST AND NORTH O PROGRAM SERVICES FOREIGN TRAVEL 6,4 AFRICA O PROGRAM SERVICES FOREIGN TRAVEL 7,0 RESEARCH/EDUCATION MIDDLE EAST AND NORTH O PROGRAM SERVICES FOREIGN TRAVEL 7,0 RESEARCH/EDUCATION 9,0 RESEARCH/EDUCATION O PROGRAM SERVICES POREIGN TRAVEL 7,0 RESEARCH/EDUCATION 9,0 RESEARCH/EDUCATION 9,0 RESEARCH/EDUCATION 9,0 RESEARCH/EDUCATION 1,0 EVEN PACIFIC PRESEARCH/EDUCATION 1,0 EVEN PACIFIC PRESEARCH/EDUCATION 1,0 EVEN PACIFIC PRESEARCH/EDUCATION 1,0 EAST ASIA AND THE 0 PROGRAM SERVICES OPERATING EXPENSES 1,0 RELATED TO RESEARCH/EDUCATION 1,0 EAST ASIA AND THE 0 PROGRAM SERVICES OPERATING EXPENSES 1,0 RELATED TO RESEARCH/EDUCATION 1,0 EAST ASIA AND THE 0 PROGRAM SERVICES OPERATING EXPENSES 1,0 RELATED TO RESEARCH/EDUCATION 1,0 EAST ASIA AND THE 0 PROGRAM SERVICES OPERATING EXPENSES 1,0 RELATED TO RESEARCH/EDUCATION 1,0 EAST ASIA AND THE 0 PROGRAM SERVICES OPERATING EXPENSES 2,0 RELATED TO RESEARCH/EDUCATION 1,0 EAST ASIA AND THE 0 PROGRAM SERVICES OPERATING EXPENSES 2,0 RELATED TO RESEARCH/EDUCATION 1,0 EAST ASIA AND THE 0 PROGRAM SERVICES OPERATING EXPENSES 2,0 RELATED TO RESEARCH/EDUCATION 1,0 EAST ASIA AND THE 0 PROGRAM SERVICES OPERATING EXPENSES 2,0 RELATED TO RESEARCH/EDUCATION 1,0 EAST ASIA AND THE 0 PROGRAM SERVICES OPERATING EXPENSES 2,0 RESEARCH/EDUCATION 1,0 RESEARCH/EDUCATION 1,0 RESEARCH/EDUCATION 1,0 RESEARCH/EDUCATION 1,0 RESEARCH/EDU	NORTH AMERICA	0	0	PROGRAM SERVICES	TRANSFER LICENSING	
PACIFIC EUROPE O O O PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION O O PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION O O PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION SOUTH AMERICA O O O PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION SUB-SAHARAN AFRICA O O PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION O O PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION O O PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION O RESEARCH/EDUCATION O PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION O PROGRAM SERVICES OPERATING EXPENSES PACH/EDUCATION EAST ASIA AND THE O O PROGRAM SERVICES OPERATING EXPENSES ALIO RESEARCH/EDUCATION O PROGRAM SERVICES OPERATION EXPENSES ALIO RESEARCH/EDUCATION O PROGRAM SERVICES OPERATION EXPENSES ALIO RESE		0	0	INVESTMENTS		
RELATED TO RESEARCH/EDUCATION NORTH AMERICA O PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION SOUTH AMERICA O PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION SUB-SAHARAN AFRICA O PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION CENTRAL AMERICA AND O PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION MIDDLE EAST AND NORTH O PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION MIDDLE EAST AND NORTH O PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION SOUTH ASIA O PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION NORTH AMERICA O PROGRAM SERVICES FOREIGN TRAVEL PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION NORTH AMERICA O PROGRAM SERVICES OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION NORTH AMERICA O PROGRAM SERVICES OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION EUROPE O O PROGRAM SERVICES OPERATING EXPENSES 41,0 RESEARCH/EDUCATION EAST A SIA AND THE O PROGRAM SERVICES OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION SUB-SAHARAN AFRICA O PROGRAM SERVICES OPERATING EXPENSES 4,6 RELATED TO RESEARCH/EDUCATION O PROGRAM SERVICES OPERATING EXPENSES ALTED TO RESEARCH/EDUCATION SUB-SAHARAN AFRICA O PROGRAM SERVICES OPERATING EXPENSES 4,6 RESEARCH/EDUCATION O PROGRAM SERVICES OPERATING EXPENSES ALTED TO RESEARCH/EDUCATION		0	0	PROGRAM SERVICES	RELATED TO	207,900
RELATED TO RESEARCH/EDUCATION OF PROGRAM SERVICES OF PRESENT AVEL SAHARAN AFRICA SUB-SAHARAN AFRICA O PROGRAM SERVICES FOREIGN TRAVEL 11,7 RELATED TO RESEARCH/EDUCATION SUB-SAHARAN AFRICA O PROGRAM SERVICES FOREIGN TRAVEL 1,8 RELATED TO RESEARCH/EDUCATION SERVICES FOREIGN TRAVEL 2,2 RELATED TO RESEARCH/EDUCATION SERVICES FOREIGN TRAVEL 2,2 RELATED TO RESEARCH/EDUCATION SERVICES FOREIGN TRAVEL 6,4 RELATED TO RESEARCH/EDUCATION SERVICES FOREIGN TRAVEL 9,3 RELATED TO RESEARCH/EDUCATION SERVICES FOREIGN TRAVEL 9,3 RELATED TO RESEARCH/EDUCATION SERVICES FOREIGN TRAVEL 9,3 RELATED TO RESEARCH/EDUCATION SERVICES OPERATING EXPENSES 9,4 RELATED TO RESEARCH/EDUCATION SERVICES OPERATING EXPENSES 9,4 RELATED TO RESEARCH/EDUCATION SERVICES OPERATING EXPENSES 41,0 RESEARCH/EDUCATION SERVICES OPERATING EXPENSES ALATED TO RESEARCH/EDUCATI	EUROPE	0	0	PROGRAM SERVICES	RELATED TO	118,573
SUB-SAHARAN AFRICA O PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION CENTRAL AMERICA AND CENTRAL AMERICA AND O PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION MIDDLE EAST AND NORTH AFRICA O PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION MIDDLE EAST AND NORTH AFRICA O PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION FOREIGN TRAVEL 9,3 RELATED TO RESEARCH/EDUCATION NORTH AMERICA O PROGRAM SERVICES PREIGN TRAVEL 9,3 RELATED TO RESEARCH/EDUCATION NORTH AMERICA O PROGRAM SERVICES OPERATING EXPENSES 9,4 EUROPE O PROGRAM SERVICES OPERATING EXPENSES 41,0 RESEARCH/EDUCATION EUROPE O PROGRAM SERVICES OPERATING EXPENSES 41,0 RESEARCH/EDUCATION EUROPE O PROGRAM SERVICES OPERATING EXPENSES 44,6 PACIFIC SUB-SAHARAN AFRICA O PROGRAM SERVICES OPERATING EXPENSES 44,6 RELATED TO RESEARCH/EDUCATION SUB-SAHARAN AFRICA O PROGRAM SERVICES OPERATING EXPENSES 22 RELATED TO RESEARCH/EDUCATION SUB-SAHARAN AFRICA O PROGRAM SERVICES OPERATING EXPENSES 22 RELATED TO RESEARCH/EDUCATION SUB-SAHARAN AFRICA O PROGRAM SERVICES OPERATING EXPENSES 22 RELATED TO RESEARCH/EDUCATION SUB-SAHARAN AFRICA O PROGRAM SERVICES OPERATING EXPENSES 2440 RESEARCH/EDUCATION RESEARCH/EDUCATION SUB-SAHARAN AFRICA O PROGRAM SERVICES OPERATING EXPENSES 2440 RESEARCH/EDUCATION RESEARCH/EDUCATION SUB-SAHARAN AFRICA O PROGRAM SERVICES OPERATING EXPENSES 2440 RESEARCH/EDUCATION RESEARCH/EDUCATION RESEARCH/EDUCATION SUB-SAHARAN AFRICA	NORTH AMERICA	0	0	PROGRAM SERVICES	RELATED TO	72,743
RELATED TO RESEARCH/EDUCATION CENTRAL AMERICA AND THE CARIBBEAN Description of the caribbean of the caribb	SOUTH AMERICA	0	0	PROGRAM SERVICES	RELATED TO	11,704
CENTRAL AMERICA AND THE CARIBBEAN O PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION MIDDLE EAST AND NORTH AFRICA O PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION O PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION O PROGRAM SERVICES OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION O PROGRAM SERVICES OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION EUROPE O O PROGRAM SERVICES OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION O PROGRAM SERVICES OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION EAST ASIA AND THE PACIFIC SUB-SAHARAN AFRICA O O PROGRAM SERVICES OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION O PROGRAM SERVICES OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION O PROGRAM SERVICES OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION O O O O O PROGRAM SERVICES OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION O O O O O O O O O O O O	SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	FOREIGN TRAVEL RELATED TO	1,851
MIDDLE EAST AND NORTH AFRICA O PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION O PROGRAM SERVICES FOREIGN TRAVEL 9,3 RELATED TO RESEARCH/EDUCATION NORTH AMERICA O PROGRAM SERVICES OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION O PROGRAM SERVICES OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION EUROPE O PROGRAM SERVICES OPERATING EXPENSES A1,0 RESEARCH/EDUCATION EAST ASIA AND THE O PROGRAM SERVICES OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION EAST ASIA AND THE O PROGRAM SERVICES OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION SUB-SAHARAN AFRICA O PROGRAM SERVICES OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION SUB-SAHARAN AFRICA O PROGRAM SERVICES OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION		0	0	PROGRAM SERVICES	FOREIGN TRAVEL RELATED TO	2,253
SOUTH ASIA O PROGRAM SERVICES FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION NORTH AMERICA O PROGRAM SERVICES OPERATING EXPENSES P,4 RELATED TO RESEARCH/EDUCATION EUROPE O PROGRAM SERVICES OPERATING EXPENSES A1,0 RESEARCH/EDUCATION EAST ASIA AND THE PACIFIC O PROGRAM SERVICES OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION SUB-SAHARAN AFRICA O PROGRAM SERVICES OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION SUB-SAHARAN AFRICA O PROGRAM SERVICES OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION O PROGRAM SERVICES OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION O PROGRAM SERVICES OPERATING EXPENSES A1,6 RESEARCH/EDUCATION O PROGRAM SERVICES OPERATING EXPENSES A2 RELATED TO RESEARCH/EDUCATION		0	0	PROGRAM SERVICES	FOREIGN TRAVEL RELATED TO	6,496
NORTH AMERICA 0	SOUTH ASIA	0	0	PROGRAM SERVICES	FOREIGN TRAVEL RELATED TO	9,311
RELATED TO RESEARCH/EDUCATION EAST ASIA AND THE O PROGRAM SERVICES OPERATING EXPENSES A,6 RELATED TO RESEARCH/EDUCATION SUB-SAHARAN AFRICA O PROGRAM SERVICES OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION O PROGRAM SERVICES OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION 694.0	NORTH AMERICA	0	0	PROGRAM SERVICES	OPERATING EXPENSES RELATED TO	9,409
EAST ASIA AND THE O PROGRAM SERVICES OPERATING EXPENSES 4,6 PACIFIC RESEARCH/EDUCATION SUB-SAHARAN AFRICA O PROGRAM SERVICES OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION O PROGRAM SERVICES OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION	EUROPE	0	0	PROGRAM SERVICES	OPERATING EXPENSES RELATED TO	41,021
SUB-SAHARAN AFRICA 0 0 PROGRAM SERVICES OPERATING EXPENSES 2 RELATED TO RESEARCH/EDUCATION		0	0	PROGRAM SERVICES	OPERATING EXPENSES RELATED TO	4,657
Totals b 0 0 684,9	SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	OPERATING EXPENSES RELATED TO	225
Totals	Totals ▶	0	0			684,946

(a) Name of organization section organization grant cash grant of non-cash disbursement of non-cash assistance	(i) Method of valuation (book, FMV, opraisal, other)
NORTH AMERICA RESEARCH 170,799 CHECK 0	
EUROPE RESEARCH 20,004 CHECK 0	
2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, 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	

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed. (c) Number of (b) Region (d) A mount of (e) Manner of cash (a) Type of grant or (f) A mount of (g) Description (h) Method of cash grant disbursement of non-cash valuation assistance recipients non-cash (book, FMV, assistance assistance appraisal, other) EDUCATIONAL GRANTS TO EUROPE 8,000 POSTED TO 0 STUDENTS INDIVIDUAL STUDENT ACCOUNTS AND REFUNDED BY CHECK

Schedule F (Form 990) 2009

Part IV Supplemental Info	mation	on Doub Tolona Oranda and July 1995
Complete this part to	Provide the information required ReturnReference	in Part I, line 2, and any additional information. Explanation
Procedure for Monitoring Grants Outside the US		Schedule F, Part I, Line 2 SUB-RECIPIENTS ARE PAID ON A COST REIMBURSABLE OR FIXED PRICE BASIS IN BOTH INSTANCES, THE PRINCIPAL INVESTIGATOR REVIEWS AND APPROVES INVOICES FOR PAYMENT THE PRINCIPAL INVESTIGATOR IS ALSO THE INDIVIDUAL WHO RECEIVES AND REVIEWS TECHNICAL PROGRESS REPORTS FROM SUB-RECIPIENTS EDUCATIONAL GRANTS TO STUDENTS ARE POSTED DIRECTLY TO THE STUDENTS' ACCOUNTS THE STUDENTS' ACCOUNTS ARE REVIEWED BY WVU STUDENT AFFAIRS TO DETERMINE IF ANY MONEY IS OWED BY THE STUDENT OR OWED TO THE STUDENT AS A REFUND STUDENTS ALSO REVIEW THEIR OWN ACCOUNTS TO ENSURE THAT THEY AGREE WITH THE ACTIVITY POSTED TO THEIR ACCOUNTS
Schedule F, Part IV	O ther Information	GRANT ELIGIBILITY AND SELECTION OF RECIPIENTS ARE DETERMINED BY THE PRINCIPAL INVESTIGATOR FOR EACH INDIVIDUAL GRANT EDUCATIONAL GRANTS ARE AWARDED BASED ON ACADEMIC MERIT IF THE RECIPIENT IS KNOWN AT THE TIME THE PRINCIPAL INVESTIGATOR WRITES THE GRANT PROPOSAL, THAT INFORMATION IS INCLUDED IN THE PROPOSAL FOR SPONSOR APPROVAL IF THE RECIPIENT IS DETERMINED AT A LATER DATE, THE PRINCIPAL INVESTIGATOR SUBMITS A REQUEST FOR A SUB-AWARD TO THE SPONSOR FOR APPROVAL AT THAT TIME

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

OMB No 1545-0047

DLN: 93493133038611

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule I

(Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

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

Inspect ion

WEST VIRGINIA UNIVERSITY RESE	EARCH CORPORAT.	ION				55-0665758	
Part I General Information	n on Grants and	d Assistance				•	
 Does the organization maintain the selection criteria used to av Describe in Part IV the organization 	vard the grants or as	sistance?					✓ Yes —
Part II Grants and Other A Form 990, Part IV, Im Part IV and Schedule	e 21 for any recip	nent that received r	nore than \$5,000. Ch	eck this box if no one	recipient receive	ed more than \$5,000	. Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
See Additional Data Table							
		1					
2 Enter total number of section 50	01(c)(3) and govern	ment organizations .					84
3 Enter total number of other orga	inizations					. ►	21

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to 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)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
SUB-AWARD		66,321			
EDUCATIONAL GRANTS TO STUDENTS		1,605,250			
See Additional Data Table					

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

Ident if ier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 SUB-RECIPIENTS ARE PAID ON A COST-REIMBURSABLE OR FIXED PRICE BASIS IN BOTH INSTANCES, THE PRINCIPAL INVESTIGATOR REVIEWS AND APPROVES INVOICES FOR PAYMENT THE PRINCIPAL INVESTIGATOR IS ALSO THE INDIVIDUAL WHO RECEIVES AND REVIEWS TECHNICAL PROGRESS REPORTS FROM SUB-RECIPIENTS EDUCATIONAL GRANTS TO STUDENTS ARE POSTED DIRECTLY TO THE STUDENTS' ACCOUNTS THE STUDENTS' ACCOUNTS ARE REVIEWED BY WVU STUDENT AFFAIRS TO DETERMINE IF ANY MONEY IS OWED BY THE STUDENT OR OWED TO THE STUDENT AS A REFUND STUDENTS ALSO REVIEW THEIR OWN ACCOUNTS TO ENSURE THAT THEY AGREE WITH THE ACTIVITY POSTED TO THEIR ACCOUNTS

Software ID: Software Version:

EIN: 55-0665758

Name: WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INNOVATION DRIVE285 SUNSET DRIVE HENAGER,AL 25978	20-3023167		677,733	0	воок		PUBLIC SERVICES
CONCEPTS INC18200 WICKHAM ROAD OLNEY,MD 20832	52-2029941		559,063	0	воок		RESEARCH
MARSHALL UNIV RESEARCH CORP401 11TH STREET STE 1400 HUNTINGTON, WV 257018200	55-0683361	501(C)(3)	521,842	0	воок		RESEARCH AND PUBLIC SERVICES
FRIENDS OF THE CHEAT 119 SOUTH PRICE STREET STE 206 KINGWOOD, WV 26537	55-0739158	501(C)(3)	434,613	0	воок		RESEARCH
MICHIGAN STATE UNIV 394 HANNAH ADMINISTRATION BLDG E LANSING,MI 488241046	38-6005984	SECTION 115	358,613	0	воок		RESEARCH
ALDERSON BROADDUS COLLEGE INCBOX 2004BUSINESS OFFICE PHILIPPI,WV 26416	55-0357072	501(C)(3)	213,193	0	воок		RESEARCH
WV WESLEYAN COLLEGE59 COLLEGE AVE BOX 89 BUCKHANNON, WV 262012600	55-0357056	501(C)(3)	203,542	0	воок		RESEARCH
WEST LIBERTY UNIVERSITY PO BOX 295 BUSINESS OFFICE WEST LIBERTY, WV 260740295	55-6000822	SECTION 115	202,123	0	воок		RESEARCH
WHEELING JESUIT UNIVERSITY316 WASHINGTON AVENUE WHEELING, WV 26003	55-0394213	501(C)(3)	180,867	0	воок		RESEARCH
KOPPERS INC1005 WILLIAM PITT WAY PITTSBURGH, PA 152381362	25-1588399		179,704		воок		RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of **(b)** EIN (c) IRC Code section (d) A mount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant ıf applıcable valuation organization grant cash non-cash assistance or assistance (book, FMV, appraisal, or government assistance other) 55-0747132 501(C)(3) 0 воок RESEARCH CANAAN VALLEY INSTITUTE INCPO BOX 175,137 673 DAVIS, WV 262600673 0 RURAL COMMUNITY 23-7367533 501(C)(3) воок INSTRUCTION ASSISTANCE 174,986 PARTNERSHIP1522 K STREET NW SUITE 400 WASHINGTON, DC 20005 CABIN CREEK HEALTH 55-0709223 501(C)(3) 0 воок INSTRUCTION CENTERPO BOX 70 155,171 DAWES, WV 250540070 0 WV DEPT OF HEALTH & 55-6000810 SECTION 115 воок RESEARCH AND **HUMAN RESOURCES** PUBLIC SERVICE 154,414 CAPITAL COMPLEX BUILDING 3 ROOM 451 CHARLESTON, WV 25305 0 61-6033693 501(C)(3) воок RESEARCH UNIV OF KY RESEARCH FOUNDATION337 148,539 PETERSON SVC BLDG UNIV ΟF **KENTUCKY** LEXINGTON, KY 405060005 ENGINOMIX LLCPO BOX 20-1234529 воок RESEARCH 850 141,373 MENLO PARK, CA 940260850 GEORGE MASON 54-0836354 SECTION 115 воок RESEARCH UNIVERSITY4400 131,474 UNIVERSITY DRIVE MS 4C6 FAIRFAX, VA 22030 94-2243283 воок RESEARCH PACIFIC INSTITUTE FOR 501(C)(3) RESEARCH AND 130,458 EVALUATION11710 BELTSVILLE DR SUITE 900 CALVERTON, MD 20705 UNIVERSITY OF MIAMIPO 59-0624458 501(C)(3) BOOK RESEARCH BOX 248106 130,194 CORAL GABLES, FL 331242912 GRAFTECH INCPO BOX 06-1249029 воок RESEARCH 6116 117,565 CLEVELAND, OH 44101

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (c) IRC Code section (d) A mount of cash (a) Name and address of **(b)** EIN (e) A mount of non-(g) Description of (f) Method of organization ıfapplıcable arant cash valuation non-cash assistance

IRVING HILL ROAD

LAWRENCE, KS 660457563

organization or government	(D) LIN	if applicable	grant	cash assistance	valuation (book, FMV , appraisal, other)	non-cash assistance	or assistance
UNIVERSITY OF MONTANA RESEARCH AND SPONSORED PROGRAMS MISSOULA,MT 598124102	81-6001713	SECTION 115	115,072		воок		RESEARCH
FLORIDA INTL UNIVERSITY 11200 SW 8TH STREET MIAMI,FL 331990001	65-0177616	SECTION 115	111,650		воок		RESEARCH
PENNSYLVANIA STATE UNIVERSITY120 SOUTH BURROWES STREET UNIVERSITY PARK, PA 168013857	24-6000376	SECTION 115	110,047		воок		RESEARCH
XORAN TECHNOLOGIES 5210 S STATE ROAD ANN ARBOR, MI 48108	32-0039864		105,611		воок		RESEARCH
AM ASSOCIATION OF PEOPLE WITH DISABILITIES1629 K STREET NW SUITE 503 WASHINGTON, DC 20006	52-1930174	501(C)(3)	104,768		воок		RESEARCH
NATL BUSINESS AND DISABILITY COUNCIL201 IU WILLETS ROAD ALBERTSON,NY 11507	13-1850854	501(C)(3)	104,344		воок		RESEARCH
TRI CO HEALTH CLINIC INCPO BOX 1980 ROCK CAVE, WV 26234	55-0599096	501(C)(3)	99,659		воок		INSTRUCTION
US BUSINESS LEADERSHIP NETWORK1501 M STREET NW 7TH FLOOR WASHINGTON, DC 20005	26-0482057	501(C)(3)	94,406		воок		RESEARCH
HOWARD UNIVERSITY2244 10TH STREET NW WASHINGTON,DC 20059	53-0204707	501(C)(3)	88,750		воок		PUBLIC SERVICES
KANSAS UNIVERSITY RESEARCH CENTER2385	48-0680117	501(C)(3)	88,000		воок		RESEARCH

(h) Purpose of grant

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (c) IRC Code section (a) Name and address of **(b)** EIN (d) A mount of cash (e) A mount of non-(f) Method of (a) Description of (h) Purpose of grant if applicable cash valuation non-cash assistance orassistance organization grant (book, FMV, appraisal, or government assistance other) NATL CENTER FOR 87-0744940 501(C)(3) воок RESEARCH **ELECTRONICS RECYCLING** 86,239 115 ROSEMAR ROAD SUITE PARKERSBURG, WV 261047658 PENNSYLVANIA STATE 24-6000376 SECTION 115 воок RESEARCH UNIVERSITY120 SOUTH 82,865 **BURROWES STREET** UNIVERSITY PARK, PA 168013857 UNIVERSITY OF 55-0357039 501(C)(3) воок RESEARCH CHARLESTON2300 79,002 MACCORKLE AVENUE SE CHARLESTON, WV 25304 UNIVERSITY OF 04-3167352 SECTION 115 воок RESEARCH MASSACHUSETTS405 77,794 GOODING BUILDING AMHURST, MA 010039272 воок PEOPLE DESIGNS INC1304 56-1912337 RESEARCH **BROAD STREET** 76,268 DURHAM, NC 27705 UNIVERSITY OF MARYLAND 52-6002033 SECTION 115 воок RESEARCH AND OFFICE OF COMPTROLLER PUBLIC SERVICES 75,901 COLLEGE PARK, MD 207423141 501(C)(3) SPECIAL OLYMPICS1133 52-0889518 BOOK RESEARCH 19TH STREET NW 68,272 WASHINGTON, DC 20036 BETHANY COLLEGEPO BOX 55-0356985 501(C)(3) воок RESEARCH 417 67,833 BETHANY.WV 260320417 22-3859383 воок RESEARCH FILTERSURE INC6612 **DENNY PLACE** 64,410 MCLEAN, VA 22101 CLARKSON UNIVERSITYPO 15-0543659 501(C)(3) воок RESEARCH BO X 5546 63,562 POTSDAM, NY 136995546

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of (b) EIN (c) IRC Code section (d) A mount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization ıf applıcable grant cash valuation non-cash assistance or assistance or government assistance (book, FMV, appraisal, other) TRI COUNTY HEALTH 55-0599096 501(C)(3) воок INSTRUCTION CLINIC INCPO BOX 217 63,511 ROCK CAVE, WV 26234 BATTELLE505 KING 31-4379427 501(C)(3) воок RESEARCH AVENUE 59,430 COLUMBUS, OH 432012693 25-1830627 воок RESEARCH MAVICKER ENVIRONMENTAL 57,880 CONSULTANTS5925 STEVENSON AVENUE SUITE A HARRISBURG, PA 171121794 86-0768795 501(C)(3) воок RESEARCH SUN HEALTH RESEARCH INSTITUTEPO BOX 1278 56,220 SUN CITY, AZ 85372 95-4607377 воок RESEARCH NON LINEAR ION DYNAMICS13704 SATICOY 55,000 STREET PANORAMA CITY, CA 91402 UNIVERSITY OF 84-6000555 SECTION 115 воок RESEARCH COLORADO HEALTH 53,305 SCIENCES CTMAIL STOP F428 PO BOX 6508 AURORA, CO 800450508 SRI INTERNATIONAL333 94-1160950 501(C)(3) воок RESEARCH RAVENSWOOD AVENUE 53,039 MENLO PARK, CA 940253493 ED VENTURE GROUP1290 55-0765182 501(C)(3) BOOK INSTRUCTION SUNCREST TO WNE CENTRE 52,723 MORGANTOWN, WV 26501 SHENANDOAH VALLEY 55-0563741 501(C)(3) воок PUBLIC SERVICES MEDICAL SYSTEMPO BOX 49,327 1146 MARTINSBURG, WV 25402 WV SCHOOL OF 55-0561541 SECTION 115 воок INSTRUCTION OSTEOPATHIC MEDICINE 49,279 400 N LEE STREET OBA 111 LEWISBURG, WV 249011128

Form 990,Schedule I, Part	II, Grants and	d Other Assistance	to Governments	and Organization	s in the United Sta	tes	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SCHLUMBERGER CARBON SERVICES1875 LAWRENCE STREET SUITE 500 DENVER,CO 80202	22-1692661		48,500		воок		RESEARCH
CACAPON INSTITUTEPO BOX 68 HIGH VIEW, WV 26808	31-1139553	501(C)(3)	46,764		воок		RESEARCH
VIRGINIA COMMONWEALTH UNIVERSITYBOX 843039 RICHMOND,VA 232843039	54-6001758	SECTION 115	45,172		воок		PUBLIC SERVICES
VISHWAMITRA RESEARCH INSTITUTE368 56TH STREET CLARENDON HILLS,IL 60514	37-1490397	501(C)(3)	44,710		воок		RESEARCH
UNIVERSITY OF PITTSBURGH3100 CATHEDRAL OF LEARNING PITTSBURGH, PA 152600000	25-0965591	501(C)(3)	43,009		воок		PUBLIC SERVICES
STEWARTS INC10304 53RD AVENUE WEST MUKILTEO, WA 98275	20-0185739		40,520		воок		RESEARCH
ADVANCED VEHICLE RESEARCH CENTER2905 PLEASANT UNION CHURCH ROAD RALEIGH, NC 27614	83-0448275		40,000		воок		PUBLIC SERVICES
BLUEFIELD STATE COLLEGE RESEARCH AND DEV219 ROCK STREET BLUEFIELD, WV 247012100	55-0785437	501(C)(3)	38,043		воок		RESEARCH
UNIVERSITY OF LOUISVILLE RESEARCH FOUNDATION223 SERVICE COMPLEX LOUISVILLE, KY 42092	61-1029626	501(C)(3)	37,637		воок		RESEARCH
WV STATE UNIVERSITYPO BOX 368 125 FARRELL HALL INSTITUTE, WV 25112	55-6000839	SECTION 115	36,230		воок		RESEARCH

Form 990,Schedule I, Par	t II, Grants and	d Other Assistance	to Governments	and Organization	s in the United Sta	tes	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF NEW MEXICO HEALTH SCIENCE CENTERMSC095220 1 UNIV OF NEW MEXICO ALBUQUERQUE, NM 871310001	85-6000642	SECTION 115	35,481		воок		RESEARCH
TEXAS STATE UNIVERSITY SAN MARCOS601 UNIVERSITY DRIVE SAN MARCOS,TX 78666	74-6002248	SECTION 115	34,239		воок		RESEARCH
JOHNS HOPKINS UNIV CENTRAL LOCKBOX12529 COLLECTIONS CENTER DRIVE CHICAGO,IL 60693	52-0595110	501(C)(3)	33,953		воок		RESEARCH
UNIVERSITY OF WASHINGTON3917 UNIVERSITY WAY NE SEATTLE,WA 981056692	91-6001537	SECTION 115	33,014		воок		RESEARCH
USDA FOREST SERVICE11 CAMPUS BLVD SUITE 200 NEWTOWN SQUARE,PA 19073	72-0564834		33,000		воок		RESEARCH
UNIVERSITY OF VIRGINIA CLAUDE MOORE HSL PO BOX 800724 CHARLOTTESVILLE, VA 229080004	54-6001796	SECTION 115	31,502		воок		RESEARCH
REI CONSULTANTS INCPO BOX 286 BEAVER, WV 258130286	55-0668654		30,524		воок		RESEARCH
VIRGINIA POLYTECHNIC INST AND STATE UNIV OFFICE OF SPONSORED PROGRAMS 201 SOUTHGATE CENTER BLACKSBURG, VA 24061	54-6001805	SECTION 115	29,617		воок		RESEARCH AND PUBLIC SERVICES
ST LAWRENCE UNIVERISTY BUSINESS OFFICE VILAS HALL CANTON,NY 136171475	15-0632239		29,316		воок		RESEARCH
UNIVERSITY OF TENNESSEE62 SOUTH DUNLAP STREET MEMPHIS,TN 38163	62-6001636	SECTION 115	27,666		воок		RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CONCORD COLLEGE RESEARCH AND DEVELOPMENT CORPPO BOX 1000 CAMPUS BOX D- 101 ATHENS, WV 247121000	55-0769622	501(C)(3)	27,500		воок		RESEARCH		
SHIPSHAPER LLPPO BOX 2 MORGANTOWN, WV 265070002	20-1499622		27,165		воок		RESEARCH AND PUBLIC SERVICES		
REGENTS OF UNIVERSITY OF MICHIGAN3003 SOUTH STATE STREET ANN ARBOR, MI 481091274	38-6006309	SECTION 115	27,046		воок		RESEARCH AND PUBLIC SERVICES		
UNIVERSITY OF NOTRE DAME300 MAIN BLDG OFFICE OF SPONSORED RESEARCH NOTRE DAME, IN 46556	35-0868188	501(C)(3)	26,359		воок		RESEARCH		
FRESHWATER INSTITUTE 1098 TURNER ROAD SHEPHERDSTOWN, WV 25443	52-1388917	501(C)(3)	26,000		воок		RESEARCH		
WHEELING JESUIT UNIVERSITY316 WASHINGTON AVENUE WHEELING,WV 260036243	55-0394213	501(C)(3)	23,106		воок		RESEARCH		
MASSACHUSETTS INSTITUTE OF TECHNOLOGY77 MASSACHUSETTS AVENUE BUILDING E19-750 CAMBRIDGE, MA 02139	04-2103594	501(C)(3)	21,510		воок		RESEARCH		
NATL CONSORTIUM FOR HEALTH SYSTEMS DEV 205 WEST MONROE 3RD FLOOR SSI COALITION CHICAGO,IL 60606	36-4042562	501(C)(3)	20,000		воок		PUBLIC SERVICES		
CASE WESTERN RESERVE UNIVERSITY10900 EUCLID AVENUE CLEVELAND, OH 441067006	34-1018992	501(C)(3)	18,609		воок		RESEARCH		
UNIV OF CA SAN DIEGO 9500 GILMAN DRIVE LA JOLLA,CA 920930043	95-6006144	SECTION 115	18,566		воок		RESEARCH		

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States **(b)** EIN (a) Name and address of (c) IRC Code section (d) A mount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization ıf applıcable grant cash valuation non-cash assistance or assistance or government assistance (book, FMV, appraisal, other) UNIV OF LOUISIANA AT 72-6000820 SECTION 115 воок RESEARCH LAFAYETTEPO BOX 43610 18,556 LAFAYETTE, LA 705043610 воок WOLFE ENGINEERING AND 54-1943279 RESEARCH CONSULTANTINGPO BOX 17,838 1274 BANNER ELK, NC 26804 TUFTS UNIVERSITY 136 04-2103634 501(C)(3) воок RESEARCH HARRISON AVENUE 16,620 BOSTON, MA 02111 SECTION 115 FAIRMONT STATE 55-6000778 воок RESEARCH UNIVERSITY1201 LOCUST 16,365 AVENUE FAIRMONT, WV 26554 NORTHERN WV RURAL 32-0099870 501(C)(3) воок INSTRUCTION HEALTH EDUCATION 15,744 CENTER INCLBH COMPLEX 200 HIGH STREET GLENVILLE, WV 26351 воок NEW RIVER HEALTH ASSOC 55-0581968 501(C)(3) INSTRUCTION **INCPO BOX 337** 13,000 SCARBRO, WV 259170337 EAST CAROLINA 56-6000403 SECTION 115 BOOK RESEARCH UNIVERSITY2200 SOUTH 12,191 CHARLES BOULEVARD SUITE 2900 GREENVILLE, NC 278584533 55-6000936 SECTION 115 воок WV GEOLOGICAL AND PUBLIC SERVICES ECONOMIC SURVEY1 12,000 MONT CHATEAU ROAD MORGANTOWN, WV 265088079 NATL GAY AND LESBIAN 13-4219714 501(C)(6) воок RESEARCH CHAMBER OF COMMERCE 11,908 1612 U STREET NW WASHINGTON, DC 20009 ICF INCORPORATED LLCPO 52-0893615 BOOK PUBLIC SERVICES BOX 7777 W510501 10,847 PHILADELPHIA, PA 191750501

Form 990,Schedule I, Part	t II, Grants an	d Other Assistance	e to Governments	and Organization	ıs in the United Sta	ites	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable		(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ICS LEARNING GROUP8221 RITCHIE HIGHWAY SUITE 303 PASADENA,CA 21122	52-2083479		10,401		воок		PUBLIC SERVICES
AUBURN UNIVERSITY208 M WHITE SMITH HALL 381 MELL STREET AUBURN,AL 368495110	63-6000724	SECTION 115	9,964		воок		RESEARCH
BUCKHANNON RIVER WATERSHED ASSOCIATION INCBOX 1 JIM MITCHELL TREASURER BUCKHANNON, WV 26201	55-0783924	501(C)(3)	9,400		воок		RESEARCH
EASTERN AREA HEALTH EDUCATION CENTER2500 FOUNDATION WAY MARTINSBURG, WV 25401	35-2174239	501(C)(3)	8,389		воок		INSTRUCTION
IOWA STATE UNIVERSITY 3609 ADMINISTRATION SERVICES BLDG AMES,IA 500113609	42-6004224	SECTION 115	7,911		воок		RESEARCH
NORTHERN WV CENTER FOR INDEPENDENT LIVING 601-3 EAST BROCKWAY SUITE A AND B MORGANTOWN, WV 26501	55-0724177	501(C)(3)	6,937		воок		PUBLIC SERVICES
EASTERN WV RURAL HEALTH EDUC CONSORTIUMPO BOX 1019 MALINDA GRANT TURNER MEMORIAL HOSPITAL PETERSBURG, WV 26847	55-0562976	501(C)(3)	6,500		воок		INSTRUCTION
KANAWHA VALLEY HEALTH CONSORTIUMPO BOX 70 DAWES, WV 26054	55-0709223	501(C)(3)	6,500		воок		INSTRUCTION
UNIVERSITY OF NEW MEXICO1 UNIVERSITY OF NEW MEXICO MSC 01-1245 ALBUQUERQUE, NM 871310001	85-6000642	SECTION 115	6,377		воок		RESEARCH
WINDING ROADS HEALTH CONSORTIUM146 WILLIAMS DRIVE SPENCER, WV 25276	55-0627933	501(C)(3)	6,001		воок		INSTRUCTION

Form 990,Schedule I, Par	t II, Grants an	d Other Assistanc∈	e to Governments	and Organization	s in the United Sta	ites	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ARC OF MID OHIO VALLEY INC912 MARKET STREET PARKERSBURG, WV 26101	55-0451401	501(C)(3)	6,000		воок		PUBLIC SERVICES
CONCORD UNIV RESEARCH AND DEVELOPMENT CORP PO BOX 1000 CAMPUS BOX D-101 ATHENS, WV 247121000	55-0769622	501(C)(3)	5,386		воок		RESEARCH
BLANCHETTE ROCKEFELLER NEUROSCIENCES INSTITUTEEIGHT MEDICAL CENTER DRIVE MORGANTOWN, WV 265053409	55-0771139	501(C)(3)	2,000,000		воок		SUPPORT TO FURTHER BRNI'S RESEARCH OF NEUROLOGICAL DISEASES
WEST VIRGINIA UNIVERSITYPO BOX 6201 MORGANTOWN,WV 26506	55-6000842	SECTION 115	14,101,141		воок		EXPENDITURES ON GRANTS AWARDED TO WVURC ON BEHALF OF WEST VIRGINIA UNIVERSITY FOR THE ACQUISITION OF CAPITAL ASSETS OR CONSTRUCTION WHERE THE ASSET WAS TRANSFERRED TO THE UNIVERSITY AS THE BENEFICIARY OF THE ASSET

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -**Compensation Information**

WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION

DLN: 93493133038611

OMB No 1545-0047

Inspection

Open to Public

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Employer identification number

55-0665758

Pa	rt I Questions Regarding Compensation	n					
					Yes	Νo	
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III						
	First-class or charter travel	Г	Housing allowance or residence for personal use				
	Travel for companions		Payments for business use of personal residence				
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees				
	Discretionary spending account	Г	Personal services (e g , maid, chauffeur, chef)				
b	If any of the boxes in line 1a are checked, did the or reimbursement orprovision of all the expenses described.	-		1b			
2	Did the organization require substantiation prior to r officers, directors, trustees, and the CEO/Executive		· · · · · · · · · · · · · · · · · · ·	2			
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all the	nat app	ly				
	Compensation committee	<u> </u>	· · · · · · · · · · · · · · · · · · ·				
	Independent compensation consultant		Compensation survey or study				
	Form 990 of other organizations	ı	Approval by the board or compensation committee				
4	4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization						
а	a Receive a severance payment or change-of-control payment?						
b	Participate in, or receive payment from, a supplemen	ntal no	nqualıfıed retırement plan?	4b		Νo	
c	Participate in, or receive payment from, an equity-ba	ased co	ompensation arrangement?	4c		Νo	
	If "Yes" to any of lines 4a-c, list the persons and pro	ovide t	he applicable amounts for each item in Part III				
	Only 501(c)(3) and 501(c)(4) organizations only mu	ıst com	pplete lines 5-9.				
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	line 1a	a, did the organization pay or accrue any				
а	The organization?			5a		Νo	
b	Any related organization?			5b		Νo	
	If "Yes," to line 5a or 5b, describe in Part III						
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	line 1 a	a, did the organization pay or accrue any				
а	The organization?			6a		Νo	
b	Any related organization?			6b		Νo	
	If "Yes," to line 6a or 6b, describe in Part III						
7	For persons listed in Form 990, Part VII, Section A, payments not described in lines 5 and 6? If "Yes," d			7		No	
8	Were any amounts reported in Form 990, Part VII, p subject to the initial contract exception described in						
	in Part III	. 1.cg3	222.2. 22 1220 1/4/(2) 11 123/ 42301100	8		No	
9	If "Yes" to line 8, did the organization also follow the	e rehut	table presumption procedure described in Regulations			<u> </u>	
-	section 53 4958-6(c)?		F aF F accombod in Nogalations	9			

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)(1)-(111) 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 (I) Base compensation (I) Davis Recompensation (II) Davis Recompensation (III) Other compensation (III) Other compensation (III) Compensation (III) Other compen									
(i) Base incentive reportable compensation reportable compensation Form 990 or Form 990-EZ	(A) Name	(B) Breakdown of	W-2 and/or 1099-MI		(C) Retirement and		(E) Total of columns		
See Additional Data Table	_	(i) Base compensation	ıncentive	(iii) Other reportable compensation		benefits	(B)(ı)-(D)	Form 990 or	
	See Additional Data Table								

Part III Supplemental Information

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

]	Ident if ier	Ret urn Ref erence	Explanation
]	Ident if ier	Reference	Explanation

Schedule J (Form 990) 2009

Software ID: Software Version:

EIN: 55-0665758

Name: WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION

Form 990, Schedule J, Pa	rt :	II - Officers, Direc	tors, Trustees, Ke	y Employees, and	Highest Compens	sated Employees	<u>, </u>	
(A) Name		(B) Breakdown o	f W-2 and/or 1099-MIS	C compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ
JAMES PCLEMENTS	(I) (II)		0	0 635	0 12,477	0 9,435	0 229,060	0
ELIZABETH JANE MARTIN	(I) (II)		0	0 22,000	0 14,123	0 7,596	0	0 0
JAMES BRICK	(I) (II)		0	0 22,000	0 9,771	0 6,382	0 176,960	0
RUDOLPH ALMASY	(I) (II)		0	0	0 11,189	0 14,249	0	0
EUGENE CILENTO	(I) (II)		0	0 1,986	0 13,244	0 10,713	0	0
CAMERON HACKNEY	(I) (II)		0	0 17,009	0 31,158	0 20,200	0	0
NARVEL WEESE	(I) (II)		0	0 56	0 12,768	0 17,036	0	0
BOJAN CUKIC	(I) (II)		0 11,712	0 11,125	0 9,943	0 8,391	0 180,368	0
FRED BUTCHER	(I) (II)		0	0	0 18,996	0 19,311	0 345,010	0
CURT PETERSON	(I) (II)		0	0 22,000	0 11,871	0 3,100	0 209,769	0
DANIEL DURBIN	(I) (II)		0	0 1,042	0 11,541	0 23,668	0 215,822	0
JOSEPH HRABIK	(I) (II)	1	0	114 0	9,056 0	16,388 0	171,316 0	0
PHILIP SPARKS	(I) (II)		0	131 0	10,386 0	16,388 0	195,686 0	0
EARL SCIME	(I) (II)		0	0 689	0 10,439	0 17,685	0 193,171	0
MARY ELLEN MAZEY	(I) (II)		0	0 4,521	0 2,519	0 2,117	0 46,056	0
THO MAS SABA	(I) (II)		0 5,898	0 22,729	0 12,262	0 10,458	5,850	0
LARRY HORNAK	(I) (II)		0 27,158	0 905	0 12,745	0 16,449	0 234,295	0
GEORGE SPIROU	(I) (II)		0 12,918	0 1,530	0 12,187	0 20,592	0 224,137	0
DAVID HARDESTY JR	(I) (II)		0	0 457	0 9,977	0 19,666	0 187,039	0
MRIDUL GAUTAM	(I) (II)	0 178,096	0 26,898	0	0 12,751	0 17,232	0 234,977	0
GERALD LANG	(I) (II)		0	0 22,000	0 15,650	0 17,027	0 285,100	0
PATRICK CALLERY	(I) (II)		0	0 79	0 10,119	0 16,883	0 187,551	0
PETER MCGRATH	(I) (II)	0 165,337	0	0 0	0 9,818	0 151	0 175,306	0 0

Software ID: **Software Version:**

EIN: 55-0665758

Name: WEST VIRGINIA UNIVERSITY RESEARCH

CORPORATION

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

DLN: 93493133038611 OMB No 1545-0047

(Form 990)

Department of the Treasury

Internal Revenue Service

SCHEDULE 0 Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. ► Attach to Form 990.

Open to Public Inspection

Name of the organization
WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION

Employer identification number

55-0665758

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 2		THERE IS A COMMON EMPLOYMENT RELATIONSHIP AMONGST ALL MEMBERS OF THE BOARD OF DIRECTORS ALL WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION DIRECTORS ARE EMPLOYED BY WEST VIRGINIA UNIVERSITY

ldentifier	Return Reference	Explanation
Form 990, Part VI,		TO ENSURE BEST CORPORATE BUSINESS PRACTICES, BY BOARD APPROVAL, SIGNIFICANT CHANGES WERE MADE TO THE WYURC BY LAWS WHICH INCLUDE * THE ADDITION OF THREE EXTERNAL VOTING DIRECTORS,
Section A,		ONE VOTING FACULTY DIRECTOR AND ONE VOTING DEAN DIRECTOR * THE FORMATION OF THREE
line 4		COMMITTEES AUDIT, COMPLIANCE AND INTEGRITY, AND HUMAN RESOURCES * THE CREATION OF AN INVESTMENT POLICY * THE CLARIFICATION OF THE ROLE OF THE RESEARCH CORPORATION EXECUTIVE COMMITTEE TO ACT ON BEHALF OF THE WYURC BOARD OF DIRECTORS BETWEEN REGULARLY SCHEDULED
		MEETINGS OF THE BOARD * THE ENHANCEMENT OF THE ARTICLE RELATING TO CONTRACTS, LOANS, CHECKS AND DEPOSITS

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 7a		THE VOTING MEMBERSHIP OF THE BOARD OF DIRECTORS INCLUDES THE PRESIDENT OF WEST VIRGINIA UNIVERSITY (WVU) AND UP TO TEN ADDITIONAL VOTING DIRECTORS APPOINTED BY THE UNIVERSITY PRESIDENT EACH OF THE APPOINTED DIRECTORS MUST BE EMPLOYEES OF WEST VIRGINIA UNIVERSITY DURING THE TERM OF APPOINTMENT IN ADDITION, THE UNIVERSITY'S FACULTY SENATE EXECUTIVE COMMITTEE SELECTS THREE WEST VIRGINIA UNIVERSITY FACULTY MEMBERS TO SERVE AS VOTING MEMBERS OF THE BOARD NON-VOTING DIRECTORS MAY BE ELECTED BY THE VOTING MEMBERS OF THE BOARD

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		THE WEST VIRGINIA UNIVERSITY TAX SERVICES UNIT, THE WVU ACCOUNTING DEPARTMENT, THE WVU FINANCIAL COMPLIANCE OFFICER, THE WVURC PRESIDENT, THE WVURC TREASURER, AN INDEPENDENT ACCOUNTING FIRM AND BOTH INTERNAL AND EXTERNAL LEGAL COUNSEL REVIEW A DRAFT OF THE FORM 990 ON BEHALF OF THE WVURC A COMPLETE COPY OF THE FORM 990 IS PROVIDED TO THE BOARD PRIOR TO FILING WITH THE SERVICE

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, Ine 12c		DURING FISCAL YEAR 2010, ALL WYURC BOARD DIRECTORS ARE EMPLOYEES OF WYU CONSEQUENTLY, THEY ARE SUBJECT TO WYU'S POLICIES AND PROCEDURES WHICH INCLUDE THE STATE OF WEST VIRGINIA ETHICS ACT, AND THE COMPENSATION, FRINGE BENEFIT AND ACCOUNTABLE PLAN POLICIES AND PROCEDURES EFFECTIVE IN FISCAL YEAR 2010, WYURC WILL REQUIRE EACH OFFICER, DIRECTOR, AND THE DIRECTOR OF THE CORPORATION'S OFFICE OF TECHNOLOGY TRANSFER TO FILE ON NO LESS THAN AN ANNUAL BASIS REGULAR CONFLICT OF INTEREST DISCLOSURES TO THE BOARD IN ADDITION, EACH OFFICER AND/OR DIRECTOR IS REQUIRED TO DISCLOSE TO THE CHAIRPERSON AND TO THE PRESIDENT THE EXISTENCE OF ANY CONFLICT OF INTEREST THAT MAY ARISE WITH REGARD TO SUCH DIRECTOR AFTER THE FILING OF ANY ANNUAL REPORT AND PRIOR TO THE FILING OF THE NEXT SUCH ANNUAL REPORT THE WYU OFFICE OF RESEARCH COMPLIANCE MONITORS AND REVIEWS THE ANNUAL DISCLOSURES SUBMITTED BY BOARD DIRECTORS WHO ARE CONDUCTING RESEARCH THE STATE OF WEST VIRGINIA ETHICS COMMISSION COMPILES ON AN ANNUAL BASIS FINANCIAL DISCLOSURES SUBMITTED BY WYU EMPLOYEES AT THE DIRECTOR LEVEL AND ABOVE THE ANNUAL DISCLOSURE SUBMITTED BY KEY EMPLOYEES OF WYURC ARE REVIEWED BY THE WYURC BOARD

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		THE ORGANIZATIONS OFFICERS ARE COMPENSATED BY A RELATED ORGANIZATION, WEST VIRGINIA UNIVERSITY THE WVURC ESTABLISHED A HUMAN RESOURCES COMMITTEE IN APRIL 2010 WHOSE DUTIES INCLUDE ENSURING THAT PROCEDURES FOR APPROVING COMPENSATION ARE FOLLOWED FOR THE ORGANIZATIONS CEO, TOP MANAGEMENT OFFICIALS, OFFICERS AND KEY EMPLOYEES THIS PROCESS INCLUDES INSURING THAT EACH MEMBER OF THE HR COMMITTEE DOES NOT HAVE A CONFLICT OF INTEREST WITH RESPECT TO THE COMPENSATION ARRANGEMENT SECONDLY, THIS COMMITTEE RELIES ON COMPARABILITY DATA TO DEMONSTRATE FAIR MARKET VALUE OF THE COMPENSATION IN QUESTION COMPENSATION FOR EVERY POSITION IS DETERMINED BY SEVERAL FACTORS INCLUDING JOB ANALYSIS AND EVALUATION, THE ESSENTIAL DUTIES AND RESPONSIBILITIES OF THE POSITION, AND SALARY SURVEY DATA ON PAY PRACTICES WE PERIODICALLY REVIEW OUR SALARY ADMINISTRATION PROGRAM AND RESTRUCTURE IT AS NECESSARY MARKET AND/OR COMPETENCY BASED ADJUSTMENTS MAY BE WARRANTED BASED ON ONE'S EMPLOYMENT FUNCTIONS, AS DETERMINED BY A CLASSIFICATION REVIEW IN ADDITION, EMPLOYEES MAY BE AWARDED MERIT-BASED PAY ADJUSTMENTS IN CONJUNCTION WITH SUPERIOR PERFORMANCE AS DOCUMENTED BY OUR PERFORMANCE EVALUATION PROCESS

ldentifier	Return Reference	Explanation
Form 990,		PURSUANT TO CHAPTER 31, ARTICLE I, SECTION 28 OF THE OFFICIAL CODE OF WEST VIRGINIA, 1931, AS
Part VI,		AMENDED, A CERTIFICATE OF INCORPORATION WAS ISSUED BY THE WEST VIRGINIA SECRETARY OF STATE
Section C,		ON JUNE 26, 1985 TO THE WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION THIS CERTIFICATE IS
line 19		AFFIXED TO THE ARTICLES OF INCORPORATION OF THE WEST VIRGINIA UNIVERSITY RESEARCH
		CORPORATION THAT CERTIFICATE ALONG WITH THE WYURC'S IRS DETERMINATION LETTER AND FORM 990
		ARE AVAILABLE ON WEST VIRGINIA UNIVERSITY'S WEBSITE THE AFFIRMATIVE ACTION PLAN, FINANCIAL
		STATEMENTS AND FORM 990-T ARE OPEN AND AVAILABLE FOR INSPECTION AT THE WYURC UPON REQUEST

ldentifier	Return Reference	Explanation
FORM 990, PART XI, LINE 2C		NO CHANGES WERE MADE IN EITHER THE OVERSIGHT PROCESS OR SELECTION PROCESS DURING THE TAX YEAR

ldentifier	Return Reference	Explanation
FORM 990, PART VI, LINE 14		WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION ADHERES TO THE DOCUMENT RETENTION POLICY OF WEST VIRGINIA UNIVERSITY

ldentifier	Return Reference	Explanation
FORM 990, PART VI, LINE 16B		DURING FISCAL YEAR 2011, THE WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION WILL WORK ON DEVELOPING A JOINT VENTURE POLICY TO BE REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS

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DLN: 93493133038611

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

2009

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION	n of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.) (a) (b) (c) (a) (d) (e) End-of-year assets (f) Direct controlling entity (b) (c) (d) (e) End-of-year assets (f) Direct controlling entity (c) (d) (e) (e) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f						
Part I Identification of Disregarded Entities (Comp	olete if the organization	answered "Yes" o	n Form 990, Par				
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	Legal domicile (state	(d) Total income	(e) End-of-year assets		Dır	ect controlling
Part II Identification of Related Tax-Exempt Organ or more related tax-exempt organizations during	izations (Complete If the tax year.)	the organization a	nswered "Yes" o	n Forn	n 990, Part	IV, lın	ne 34 because it had one
(a) Name, address, and EIN of related organization	(b) Primary activity	Legal domicile (state	(d) Exempt Code sect		Public charity st		Direct controlling
WEST VIRGINIA UNIVERSITY							
PO BOX 6001 MORGANTOWN, WV 265066001 55-6000842		wv	SECTION 115			N/A	
For Privacy Act and Paperwork Reduction Act Notice, see the Instruct	ions for Form 990.		<u> </u>				Schedule R (Form 990) 2009

(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, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	Share of end	(g) hare of end-of-year assets				V—UBI n box 20 of ule K-1	Gener mana	al or ging
		Legal domicic (state or foreign country) Predominant income (related, unrelated, excluded from tax under sections 512-514) Predominant income (related, unrelated, excluded from tax under sections 512-514) Predominant income (related, unrelated, excluded from tax under sections 512-514) Predominant income (related, unrelated, excluded from tax under sections 512-514) Predominant income (related, unrelated, excluded from tax under sections 512-514) Predominant income (related, unrelated, excluded from tax under sections 512-514) Predominant income (related, unrelated, excluded from tax under sections 512-514) Predominant income (related, unrelated, excluded from tax under sections 512-514) Predominant income (related, excluded from tax under sections 512-514) Predominant income (related, excluded from tax under sections 512-514) Predominant income (related, excluded from tax under sections 512-514) Predominant income (related, excluded from tax under sections 512-514) Predominant income (related, excluded from tax under sections 512-514) Predominant income (related, excluded from tax under sections 512-514) Predominant income (related, excluded from tax under sections 512-514) Predominant income (related, excluded from tax under sections 512-514) Predominant income (related, excluded from tax under sections 512-514) Predominant income (related, excluded from tax under sections 512-514) Predominant income (related, excluded from tax under sections 512-514) Predominant income (related, excluded from tax under sections 512-514) Predominant income (related, excluded from tax under sections 512-514) Predominant income (related, excluded from tax under sections 512-514) Predominant income (related, excluded from tax under sections 512-514) Predominant income (related, excluded from tax under sections 512-514) Predominant income (related, excluded from tax under sections 512-514) Predominant income (related, excluded from tax under sections 512-514) Predominant inc	No										
	fication of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Pa because it had one or more related organizations treated as a corporation or trust during the tax year.)												
												yes O, Part IV, Intage	
												+	
								nswer	ed "Y	es" on F	orm 990, P	art IV,	
	cause it flad offe t		elated organizations)		(-)	(5)		
(a) Name, address, and EIN o	f related organization	(b) Primary a	ctivity	Legal domicile (state or foreign	Direct controlling	Type of entity (C corp, S corp,	Share of	f total	Sh end-	are of -of-year	Percentag		
									1				

Part V	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, Ii	ne 34, 35, or 36.)			
Not	e. Complete line 1 if any entity is listed in Parts II, III or IV			Yes	No
1 During	the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV	,			
a Re	ceipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		1a		No
b Gif	t, grant, or capital contribution to other organization(s)		1b	Yes	
c Gıf	;, grant, or capital contribution from other organization(s)		1 c		No
d Loa	ans or loan guarantees to or for other organization(s)		1d		No
e Loa	ans or loan guarantees by other organization(s)		1e		No
f Sal	e of assets to other organization(s)		1f		No
g Pu	rchase of assets from other organization(s)		1 g		No
h Ex	change of assets		1h		No
i Lea	se of facilities, equipment, or other assets to other organization(s)		1 i		No
j Lea	se of facilities, equipment, or other assets from other organization(s)		1 j		No
k Pe	rformance of services or membership or fundraising solicitations for other organization(s)		1k		No
I Per	formance of services or membership or fundraising solicitations by other organization(s)		11		No
m Sha	aring of facilities, equipment, mailing lists, or other assets		1m	Yes	
n Sh	aring of paid employees		1 n	Yes	
o Re	imbursement paid to other organization for expenses		10	Yes	
p Re	mbursement paid by other organization for expenses		1р	Yes	
q 0 t	her transfer of cash or property to other organization(s)		1 q		No
r Oth	ner transfer of cash or property from other organization(s)		1r		No
	ne answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships	and transaction thres	holds		
	(a) Name of other organization	(b) Transaction type(a-r)		(c) it involv	ed
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(c) egal domicile tate or foreign country) (d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproprtionate allocations?		(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	(h) General d managin partner	
			Yes	No		Yes	No		Yes	N	
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TY 2009 Recognize Income Under Temporary Regulations Statement

Name: WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION

EIN: 55-0665758

Statement: THERE WERE NO TRANSFERS MADE DURING THE FISCAL YEAR,

JULY 1, 2009 TO JUNE 30, 2010 OF PROPERTY TO A FOREIGN CORPORATION BY WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION.PART I, PART II, PART III AND PART IV ARE NOT

APPLICABLE FOR FISCAL YEAR 2010.