

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



DLN: 93493312002431

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

2010

Open to Public Inspection

A FO	r the 2	2010 ca	lendar year, or tax year begir	nning 01-01-2010 and ending 12-31-2010	)	<b>3</b> B.E	
		plicable	C Name of organization US CIVILIAN RESEARCH AND DEV	VELOPMENT FOUNDATION			ridentification number
	lress cha	-	Doing Business As			54-177	
_	me chan al returi	_	CRDF GLOBAL			E Telephon	ie number
_	minated		Number and street (or P O box 1530 WILSON BLVD 3RD FLOOR	ıf mail is not delivered to street address)	Room/suite	(703) 5	26-9720
_	ended re		City or town, state or country, a	nd 7IP + 4		<b>G</b> Gross rece	eipts \$ 21,024,508
_		pending	ARLINGTON, VA 22209	110 ZII + 4			
, , , , ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	penamg	<b>F</b> Name and address of p	principal officer	H/a)		ffiliates 7 Yes V No
			CATHLEEN A CAMPBELL	<u>'</u>	ii(a) is this	a group return for a	miliaces/  fes   No
			1530 WILSON BLVD 3RD ARLINGTON, VA 22209			affiliates include	
						o," attach a lı ıp exemptıon	ist (see instructions)
		pt status		◀ (insert no )	H(C)	ip exemption	Trainber P
			W CRDF ORG				
	n of orga rt I		Corporation Trust Associa	ation Other 🕨	<b>L</b> Year of fo	rmation 1995	<b>M</b> State of legal domicile VA
Га				sion or most significant activities			
Activities & Governance	S G E I U	O CIET GLOBAL CONOI NNOVA JNIVER	AL NEEDS, -ADVANCE PEA NONPROLIFERATION OBJI 1IC GROWTH THROUGH IN TION, ENTREPRENEURSHI SITY RESEARCH AND EDUC	ERS TO ADDRESS CRITICAL SECURITY CE AND PROSPERITY BY FUNDING CIV ECTIVES,-PROMOTE THE APPLICATIO TERNATIONAL PARTNERSHIPS AND TF P AND THE COMMERCIALIZATION OF CATION IN SCIENCE AND ENGINEERIN	ILIAN R&D I N OF SCIEN RAINING TH TECHNOLOG	PROJECTS T CE AND TEC AT FOSTER I GY, AND -ST	HAT CONTRIBUTE TO HNOLOGY TO INVENTION, RENGTHEN
lles			•	discontinued its operations or disposed o	f more than 2	5% of its net	1
Ĕ				erning body (Part VI, line 1a) rs of the governing body (Part VI, line 1b)		<u> </u>	
ă				in calendar year 2010 (Part V, line 2a)		5	
	<b>6</b> T	otal nur	nber of volunteers (estimate	ıfnecessary)		6	0
				n Part VIII, column (C), line 12		78	a 0
	ЬN	let unre	ated business taxable incom	e from Form 990-T, line 34	<del></del>	71	- 1 ., =
	8	Contri	outions and grants (Part VIII	, line 1h)	Pric	15,964,803	Current Year 13,621,179
≗	9		- `	i, line 2g)			<del>                                     </del>
_	3					1,012,977	1,264,857
ne.	10	Invest	•	mn (A), lines 3, 4, and 7d)		-184,903	<del>                                     </del>
Revenue		Other	ment income (Part VIII, colu revenue (Part VIII, column (A	imn (A), lines 3, 4, and 7d)			260,911
Reven	10	O ther Total r	ment income (Part VIII, colu revenue (Part VIII, column (A evenue—add lines 8 through	nmn (A), lines 3, 4, and 7d) . . . . A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 (must equal Part VIII, column (A), line		-184,903	260,911 -147,480
Reven	10 11	Other Total r 12) .	ment income (Part VIII, colu revenue (Part VIII, column (A evenue—add lines 8 through	imn (A), lines 3, 4, and 7d)		-184,903	260,911 -147,480 14,999,467
Reven	10 11 12	Other Total r 12) . Grants	ment income (Part VIII, colurevenue (Part VIII, column (Aevenue—add lines 8 through  and similar amounts paid (Pa	Imn (A), lines 3, 4, and 7d)		-184,903 0 16,792,877	260,911 -147,480 14,999,467 7,454,272
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	10 11 12 13 14 15	Other Total r 12) . Grants Benefit Salarie 10) Profes	ment income (Part VIII, colurevenue (Part VIII, column (Aevenue—add lines 8 through and similar amounts paid (Parts paid to or for members (Parts, other compensation, employed)	Imm (A), lines 3, 4, and 7d)		-184,903 0 16,792,877 9,240,416 0 9,155,571	260,911 -147,480 14,999,467 7,454,272 0 9,570,034
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	10 11 12 13 14 15 16a b 17 18	Other Total r 12) . Grants Benefit Salarie 10) Profes Total fut Other	ment income (Part VIII, columerevenue (Part VIII, column (Acevenue—add lines 8 through and similar amounts paid (Part Spaid to or for members (Part Spaid to or for members), other compensation, employed and fundraising fees (Part Indraising expenses (Part IX, column expenses (Part IX, column (Acexpenses Add lines 13–17 (responses 14–17 (responses 14–1	A), lines 3, 4, and 7d)		-184,903 0 16,792,877 9,240,416 0 9,155,571 0 4,760,989 23,156,976	260,911 -147,480 14,999,467 7,454,272 0 0 9,570,034 0 0 4,485,052 21,509,358
Expenses	10 11 12 13 14 15 16a b	Other Total r 12) . Grants Benefit Salarie 10) Profes Total fut Other	ment income (Part VIII, columerevenue (Part VIII, column (Acevenue—add lines 8 through and similar amounts paid (Part Spaid to or for members (Part Spaid to or for members), other compensation, employed and fundraising fees (Part Indraising expenses (Part IX, column expenses (Part IX, column (Acexpenses Add lines 13–17 (responses 14–17 (responses 14–1	Imm (A), lines 3, 4, and 7d)	-	-184,903 0 16,792,877 9,240,416 0 9,155,571	260,911 -147,480 14,999,467 7,454,272 0 0 9,570,034 0 4,485,052 21,509,358 0 -6,509,891
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1 0111	1990 (2010)						Page
Par	t IIII Statement of Check if Schedule	_	-	<b>lishments</b> Jestion in this Part :	III		৮
1	Briefly describe the orga	anızatıon's mıssı	on				
THE CON ENG PRO PRO PAR	F WAS FORMED IN AUGUNATIONAL SCIENCE FO TINUATION)CRDF'S MISINEERS TO ADDRESS CREATER BY FUNDING COMOTE THE APPLICATION TRESHIPS AND TRAINSECHNOLOGY, AND -STE	UNDATION, PUSSION IS TO RITICAL SECUP IVILIAN R&D P N OF SCIENCE ING THAT FOST	URSUANT TO TH PROVIDE COOF RITY, ECONOMI ROJECTS THAT AND TECHNOL TER INVENTION	HE FREEDOM SUPP PERATIVE R&D OP C, EDUCATION AN CONTRIBUTE TO OGY TO ECONOM! I, INNOVATION, E	ORT ACT OF 1992 (SPORTUNITIES THAT  ND OTHER SOCIETAL  GLOBAL NONPROLIF  IC GROWTH THROUG  NTREPRENEURSHIP A	SEE SCHEDULE ENABLE SCIEN NEEDS, -ADV, ERATION OBJE H INTERNATIO	: O FOR NTISTS AND ANCE PEACE AND ECTIVES,- NAL MERCIALIZATION
2	Did the organization und the prior Form 990 or 99		ficant program se	ervices during the y	ear which were not liste	ed on Yes	s 「 No
	If "Yes," describe these	new services on	Schedule O				
3	Did the organization ceases	se conducting, c	or make significar	nt changes in how it	conducts, any program		s 🔽 No
	If "Yes," describe these	changes on Sch	edule O				
4	Describe the exempt pur Section 501(c)(3) and 5 allocations to others, the	01(c)(4) organiz	zations and section	on 4947(a)(1) trust	s are required to repor		
4a	(Code	) (Expenses \$	4,965,155	ıncludıng grants of \$	2,228,137 ) (Re	venue \$	)
	CENTERS & INSTITUTIONAL CAPABILITIES NECESSARY FO					D PROGRAMS THAT	ENHANCE CRUCIAL
4b	(Code	) (Expenses \$	3,355,747	ıncludıng grants of \$	2,200,127 ) (Re	venue \$	)
70	COOPERATIVE GRANTS COM THROUGH A COMPETITIVE, N	PETITIONS SUPPOR	TS SCIENTIFIC AND	3 3 ,	, , , ,	·	,
4c	(Code	) (Expenses \$	6,167,145	including grants of \$	3,026,008 ) (Re	•	)
	NONPROLIFERATION & THRE PROVIDES SUPPORT TO GLO			ND TRAINING PROGRAM	IS TO ENGAGE SCIENTISTS (	OVERSEAS IN CIVIL	IAN PROJECTS AND
	Other program services	(Dacamba in C	shadula O \ Saa	also Additional Date	o for Doscription		
4u	(Expenses \$	•	including grants o		) (Revenue \$	1,264	,857)
4e	Total program service e	xpenses <b>-</b> \$	16,352,86	0			

			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 (see instruction)? 🕏	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		Νο
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? 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 1	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? If "Yes," complete Schedule D, Part II	7		Νο
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		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	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.	11b	Yes	
С	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.	11c		No
d	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.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	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 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If</i> " <i>Yes,"</i> complete Schedule F, Parts I and IV	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, Parts II and IV.	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, Parts III and IV.	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> "Yes," complete Schedule G, Part I (see instructions)	17		No
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	Yes	
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		Νο
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Νο
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

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 lines 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		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Νο
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Νο
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," 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		No
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)?	35	Yes	
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
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	

Form 990 (2010)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule Ocontains a response to any question in this Part V		.  ~	
	1 1		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 98			
b	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?	1c	Yes	
2a	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		163	
ь	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 (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the		v	
ь	year?	3a 3b	Yes Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority		1 00	
	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 RS , KZ , UP , JO , UK			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? $\cdot$ .	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?	5c		
6a	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		Νο
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	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	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
·	file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νo
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> 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		
9	Sponsoring organizations maintaining donor advised funds.			
_	Did the organization make any taxable distributions under section 4966?	9a		
ь 10	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	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			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders	1		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
	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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states			
	ın which the organization is licensed to issue qualified health plans	_		
С	Enter the amount of reserves on hand  13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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.

Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any			NI -
3	other officer, director, trustee, or key employee?	2		No
4	supervision of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was	3		No
	filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Does the organization have members or stockholders?	6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		Νο
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		N o
Se	ection B. Policies (This Section B requests information about policies not required by the Internal			
	venue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		Νo
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this 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 to conflicts?	12b	Yes	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
ь	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions )			
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
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		
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed ►AK , AL , AR , AZ , CA , CO , CT , DC , F MA , MD , ME , MI , MS , MN , MO , NC , NY , OH , OK , OR , PA , RI , SC , TN , V	ND,	IJ, NH	
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website. Another's website. Upon request	_		
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of			

State the name, physical address, and telephone number of the person who possesses the books and records of the organization

(703) 526-9720

20

interest policy, and financial statements available to the public See Additional Data Table

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- 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, if any 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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours	Posi t	(( tion ( hat a	che		il		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week (describe hours for related organizations in Schedule O)	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
(1) DR JOHN MOORE CHAIR	4 50	х		х				0	0	0
(2) DR BILL WULF VICE CHAIR	2 50	х		х				0	0	0
(3) FRED JOHNSON TREASURER	4 00	х		х				0	0	0
(4) DONA CRAWFORD SECRETARY	3 00	х		х				0	0	0
(5) DR JALEH DAIE DIRECTOR	2 00	х						0	0	0
(6) DR MALCOLM GILLIS DIRECTOR	2 00	х						0	0	0
(7) DR FAROUK EL-BAZ DIRECTOR	2 00	х						0	0	0
(8) DR DAVID KAY DIRECTOR	2 00	х						0	0	0
(9) DR HOWARD FRANK DIRECTOR	2 00	х						0	0	0
(10) MR PAUL LONGSWORTH DIRECTOR	2 00	х						0	0	0
(11) DR IRMA GIGLI DIRECTOR	2 50	х						0	0	0
(12) DR RODNEY NICHOLS DIRECTOR	2 50	х						0	0	0
(13) DR GIL OMENN DIRECTOR	2 00	х						0	0	0
(14) DR VICTOR RABINOWITCH DIRECTOR	2 00	х						0	0	0
(15) DR KEN RIND DIRECTOR	2 00	х						0	0	0
(16) CATHLEEN CAMPBELL PRESIDENT & CEO	40 00			Х				237,647	0	40,064

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) Average hours		tion that a			II		( <b>D</b> ) Reportable compensation	(E) Reportable compensation	Estir amount	F) mated of other
	per week (describe hours for related organizations in Schedule O)	Individual tiustee or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	fron organiz rela	nsation n the ation and ated zations
(17) STEPHEN WOLK CHIEF FINANCIAL OFFICER	40 00			х				170,878	0		33,627
(18) ERIC NOVOTNY SR VP PROGRAMS	40 00			х				187,939	0		22,487
(19) SHAWN WHEELER VP GLOBAL OPERATIONS	40 00			х				178,070	0		23,833
(20) JOHN ZIMMERMAN SR ADVISOR	40 00					х		159,065	0		7,700
(21) JOHN MODZELEWSKI PROGRAM DIRECTOR	40 00					х		135,313	0		26,986
(22) DAVID LINDEMAN PROGRAM DIRECTOR	40 00					х		140,989	0		20,106
(23) SUZANNE LAFLAIR DIRECTOR OF ADMINISTRATION	40 00					х		114,901	0		22,389
(24) CYNTHIA MENTZ DIRECTOR	40 00					х		119,688	0		18,807
1b Sub-Total						_	<b>P</b>				
c Total from continuation sheets d Total (add lines 1b and 1c) .	•					•	<b>▶</b>	1,444,490	0		215,999
2 Total number of individuals (incl \$100,000 in reportable compen	-	ıted to t	hose	lıst				· · ·			213,333
										Yes	No
3 Did the organization list any for on line 1a? If "Yes," complete Sch	•			•	•		e, o	r highest compensa		3	No

			Yes	No
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> "Yes," complete Schedule J for such individual	3		No
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	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule I for such person	5		Νο

### **Section B. Independent Contractors**

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

(A) Name and business address	( <b>B</b> ) Description of services	<b>(C)</b> Compensation
ERSM (INTERNATIONAL) LIMITED SABA TOWER 1 JUMEIRAH LAKE TOWER DUBAI AE	CONSULTING	305,217
ACUTECH GROUP INC 1600 TYSONS BLVD SUITE 800 MCLEAN, VA 22102	CONSULTING	270,244
SOZER NIEZGODA & ASSOCIATES LLC 1410 HAMPTON ROAD FAIRFAX STATION, VA 22039	CONSULTING	210,073
LIPMAN HEARNE INC PO BOX 88634 DEPT A CHICAGO, IL 606801634	CONSULTING	161,804
NAWAFIR TRAVEL & TOURS BAGHDAD-MANSOUR-14TH RAMADAN ST BAGHDAD IZ	CONSULTING	141,753
2 Total number of independent contractors (including but not limited to those listed above)	) who received more than	

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶6

Form 9		2010)					Pa	age <b>9</b>
Part	,,,,,	Statement of Reven	ue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
								512, 513, or 514
Contributions, gifts, grants and other similar amounts	b c d e f	Federated campaigns	. 1c . 1d . 1e , and 1f	12,334,789 1,202,336				
Contr and c		Noncash contributions included in li  Total. Add lines 1a-1f		110,429	13,621,179			
e Revenue	2a b	SOLUTIONS SERVICES		Business Code 900099	1,264,857	1,264,857		
Program Service Revenue	c d e f	All other program service re	venue					
Př	g	Total. Add lines 2a-2f			1,264,857			
	4	Investment income (including and other similar amounts)  Income from investment of tax-ex  Royalties	empt bond proceeds		257,938			257,938
	b c	Gross Rents Less rental expenses Rental income or (loss) Net rental income or (loss)	(ı) Real 	(II) Personal				
		Gross amount from sales of assets other than inventory Less cost or	(1) Securities 5,875,538 5,872,565	(II) O ther				
	c d	other basis and sales expenses Gain or (loss)  Net gain or (loss)	2,973		2,973			2,97
Other Revenue		Gross income from fundraising (not including \$ 84,054 of contributions reported on See Part IV, line 18	line 1c)					
Othe	С	Less direct expenses	. <b>.</b> b	4,996 152,476	-147,480			-147,48
	b c		ming activities					
	b	returns and allowances .  Less cost of goods sold .  Net income or (loss) from sa	a . b					
	11a b c			Business Code				
	d	All other revenue  Total. Add lines 11a-11d	· · · · · · •					
	12	Total revenue. See Instructi	ons		14,999,467	1,264,857	0	113,43

IX Statement of Functional Expenses				
Section $501(c)(3)$ and $501(c)(4)$ organizations must complete solumn (A) but are not required to a	•		(D)	
ot include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
Grants and other assistance to governments and organizations	2 500 765	·		expenses
Grants and other assistance to individuals in the	2,588,765	2,588,765		
,	721,704	721,704		
organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	4,143,803	4,143,803		
·				
Compensation of current officers, directors, trustees, and key employees	774,535	240,482	534,053	
Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$				
Other salaries and wages	6,430,883	4,052,760	2,227,743	150,380
Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	447,009	279,849	153,829	13,331
Other employee benefits	1,314,951	1,077,782	190,438	46,731
Payroll taxes	602,656			14,805
Fees for services (non-employees)	·			
Legal	129,334	78,783	49,003	1,548
Accounting	93,320	3,238	90,082	
Lobbying	·			
Investment management fees	30,606		30,606	
•	,	502,690	<del>                                     </del>	28,442
Advertising and promotion	· · · · · · · · · · · · · · · · · · ·		<del>                                     </del>	500
	· · · · · · · · · · · · · · · · · · ·		<del>                                     </del>	1,430
· · · · · · · · · · · · · · · · · · ·	,	,	, i	, , , , , , , , , , , , , , , , , , ,
<u>-</u> .				
	1,285,343	797,541	476,860	10,942
			<del>                                     </del>	26,656
Payments of travel or entertainment expenses for any federal,	_,,	,		
Conferences, conventions, and meetings	338,296	275,390	54,170	8,736
Interest				
Payments to affiliates				
Depreciation, depletion, and amortization	48,355	6,738	41,617	
Insurance	50,560	11,990	38,570	
Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
DUES AND SUBSCRIPTIONS	77,695	35,741	33,954	8,000
TRAINING	57,913	36,004	21,909	
BAD DEBTS	51,270		51,270	
PANEL REVIEW	49,055	49,055		
OTHER EXPENSES	11,790		11,790	
All other expenses	70		70	
Total functional expenses. Add lines 1 through 24f	21,509,358	16,352,860	4,844,997	311,501
Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				·
	Il other organizations must complete column (A) but are not required to continuous de montre peroted on lines 6b, 20, 9b, and 10b of Part VIII.  Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21  Grants and other assistance to individuals in the U.S. See Part IV, line 22  Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16  Benefits paid to or for members  Compensation of current officers, directors, trustees, and key employees	In the proganizations must complete column (A) but are not required to column (A)	In the roganizations must complete column (A) but are not required to complete column (B), (C), and (B) (S), (C), and (B) (D), (C), and (B) (D), (D), and (B) of Part VIII.    Grants and other assistance to governments and organizations in the U S See Part I V, line 2 (S), (C), and (B) (C)	Note the organizations must complete column (A) but are not required to complete columns (B), (C), and (D), and (D), and lob of Part VIII.    Grants and other assistance to governments and organizations in the U.S. See Part IV, line 2.1   Grants and other assistance to governments and organizations in the U.S. See Part IV, line 2.1   Grants and other assistance to governments, organizations, and individuals in the U.S. See Part IV, line 2.1   Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, line 2.1   Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 1.5 and 1.6   Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 1.5 and 1.6   Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 1.5 and 1.6   Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 1.5 and 1.6   Grants and other assistance 2.5 and 1.6   Grants a

Part X Balance Sheet (A) (B) Beginning of year End of year 1,163 1 657 28.056.890 2 17,117,431 2 3 3 3,482,808 4 3,643,597 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 Schedule L . . . 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) **A**ssets 6 8 8 Prepaid expenses and deferred charges . . . . 201,382 9 187,037 10a Land, buildings, and equipment cost or other basis Complete 1,203,251 10a Part VI of Schedule D 887.052 ь Less accumulated depreciation . . . . . 10b 204,050 **10c** 316, 199 1.585.793 2.583.452 11 11 6,071,544 6,437,368 12 Investments—other securities See Part IV, line 11 . . . . . . . . . 12 13 13 Investments—program-related See Part IV, line 11 . . 14 14 176.925 15 748,483 15 39,780,049 16 16 31,034,730 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 1,704,136 17 1,408,846 17 Accounts payable and accrued expenses . 18 13,687,463 18 10,733,250 776.606 429.103 19 19 20 20 Liabilities 21 21 Escrow or custodial account liability  $Complete\ Part\ IV\ of\ Schedule\ D$  . . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties . . . . 25 247.899 25 176.453 Other liabilities Complete Part X of Schedule D . . . . . 16,416,104 26 26 12,747,652 Total liabilities. Add lines 17 through 25 . . . . Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 8,602,039 27 8,548,307 Unrestricted net assets . . . . . Temporarily restricted net assets . . . . . 14,761,906 9,738,771 28 28 Fund 29 29 Permanently restricted net assets . . . . . Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. 5 30 30 Capital stock or trust principal, or current funds . . . . . Assets 31 Paid-in or capital surplus, or land, building or equipment fund . . . . . 31 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 23,363,945 33 18,287,078 33 Total net assets or fund balances . . . . . 39.780,049 34 Total liabilities and net assets/fund balances . . . . . 31,034,730

Pa	Check if Schedule O contains a response to any question in this Part XI			.┏	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		14,9	99,467
2	Total expenses (must equal Part IX, column (A), line 25)	2			 509,358
3	Revenue less expenses Subtract line 2 from line 1	3		-6,5	509,891
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		23,3	363,945
5	Other changes in net assets or fund balances (explain in Schedule O)	5		1,4	133,024
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		18,2	287,078
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII		•		
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
ь	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 is on a separate basis, consolidated basis, or both	sued			
	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 reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	quired	3b	Yes	

### DLN: 93493312002431

OMB No 1545-0047

Inspection

## SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

**Public Charity Status and Public Support** Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

**Employer identification number** 

US CIVILIAN RESEARCH AND DEVELOPMENT FOUNDATION 54-1773406 Reason for Public Charity Status (All organizations must complete this part.) See instructions The 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 described in section 170(b)(1)(A)(i). 1 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). 10 11 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 I **b** Type II c Type III - Functionally integrated Type III - Other 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 and (III) below, the governing body of the the supported organization? 11g(i) (ii) a family member of a person described in (i) above? 11g(ii) (iii) a 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	organization in col (i) of your col (i) of your support? in t		organization in CV Amo sup		(vii) A mount of support		
		instructions))	Yes	No	Yes	No	Yes	No	
-									
Total									

## Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1) (A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

	under Part III. II un	e organizacion i	alls to quality t	inder the tests	iistea below, pi	ease complete	e Part III.)
	ection A. Public Support endar year (or fiscal year beginning	T					T
-	in) 🟲	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual	11,099,998	7,699,162	12,379,221	15,964,803	13,626,17	60,769,359
2	grants ") Tax revenues levied for the organization's benefit and either paid to or expended on its						
3	behalf The value of services or facilities furnished by a governmental unit to the organization without charge						
4 5	<b>Total.</b> Add lines 1 through 3 The portion of total contributions by each person (other than a	11,099,998	7,699,162	12,379,221	15,964,803	13,626,17	60,769,359
	governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						457,997
6	Public Support. Subtract line 5 from line 4						60,311,362
S	ection B. Total Support						
	endar year (or fiscal year	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
_	beginning in)	• •	· ·	7 7	` '		
7 8	A mounts from line 4 Gross income from interest,	11,099,998	7,699,162	12,379,221	15,964,803	13,626,17	5 60,769,359
8	dividends, payments received on securities loans, rents, royalties and income from similar sources	2,289,640	2,192,660	1,244,741	507,213	257,93	8 6,492,192
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV )						
11	Total support (Add lines 7 through 10)						67,261,551
12	Gross receipts from related activit	ies, etc (See inst	ructions )			12	20,897,303
13	First Five Years If the Form 990 is check this box and stop here	for the organizati	on's first, second	l, thırd, fourth, or f	ifth tax year as a	501(c)(3) orga	nization, ▶
	ection C. Computation of Pul						
14	Public Support Percentage for 201	•		11 column (f))		14	89 670 %
15	Public Support Percentage for 200	9 Schedule A, Pa	rt II, line 14			15	77 140 %
	33 1/3% support test—2010. If the and stop here. The organization quality 33 1/3% support test—2009. If the	alıfıes as a publıc e organızatıon dıd	ly supported orga not check the bo	anization x on line 13 or 16			<b>▶</b>  ✓ e, check this_
	box and stop here. The organizatio  10%-facts-and-circumstances test is 10% or more, and if the organization Part IV how the organization me organization  10%-facts-and-circumstances test	— <b>2010.</b> If the orgution meets the "feets the "facts and	anization did not acts and circums I circumstances"	check a box on lir tances" test, che test The organiz	ck this box and <b>s</b> t ation qualifies as	t <b>op here.</b> Explai a publicly supp	
	15 is 10% or more, and if the orga Explain in Part IV how the organiza supported organization	nization meets the	e "facts and circu acts and circums	umstances" test, o tances" test The	check this box an organization qua	ld <b>stop here.</b> lifies as a public	cly
18	<b>Private Foundation</b> If the organizations	.ion ala not check	a DOX OII IINE 13	, 10a, 10b, 1/a 0	ι Ι/υ, CHECK THIS	DOX aliu See	<b>▶</b> □

Schedule A (Form 990 or 990-EZ) 2010 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total ın) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified **b** A mounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning **(e)** 2010 (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (f) Total ın) 9 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b c Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage

15	Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15	
16 Public support percentage from 2009 Schedule A, Part III, line 15		16	
S	ection D. Computation of Investment Income Percentage		
17	Investment income percentage for <b>2010</b> (line 10c column (f) divided by line 13 column (f))	17	
18	Investment income percentage from 2009 Schedule A , Part III, line 17	18	

19a 33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

33 1/3% support tests—2009. 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

Schedule A (Fo	orm 990 or 990-EZ) 2010	Pag
Part IV	<b>Supplemental Information.</b> Supplemental Information. Complete this required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. additional information. (See instructions).	•

Facts And	Circumstances	Test

Schedule A (Form 990 or 990-EZ) 2010

DLN: 93493312002431

OMB No 1545-0047

Open to Public

## **SCHEDULE C**

(Form 990 or 990-EZ)

Department of the Treasury 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.

**Political Campaign and Lobbying Activities** 

Inspection

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, 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

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

If the organization answered "Yes" to Form 990 Part IV Line 5 (Proxy Tax) or Form 990-F7 Part V line 35a (Proxy Tax) then

Na	me of the organization CIVILIAN RESEARCH AND DEVELOPMEN	T FOLINDATION		Employer	dentification number			
US	CIVILIAN RESEARCH AND DEVELOPMEN	FOUNDATION		54-17734	54-1773406			
a r	I-A Complete if the or	ganization is exempt und	er section 501(					
	Provide a description of the org	ganization's direct and indirect po	olitical campaign act	tivities in Part IV				
	Political expenditures			▶	\$			
3	V olunteer hours							
3 F	t I-B Complete if the or	ganization is exempt und	er section 501/	c)(3)				
a 1	•	e tax incurred by the organization			<b>-</b>			
2	·	e tax incurred by organization ma			-			
- 3	•	ection 4955 tax, did it file Form	_		т			
la	Was a correction made?		,, _, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		□ Yes □ No			
ь	If "Yes," describe in Part IV				, ,			
ar		ganization is exempt und	er section 501(	c) except section	501(c)(3).			
L	Enter the amount directly expe	ended by the filing organization fo	r section 527 exem	pt function activities 🕨	<b>-</b> \$			
2	Enter the amount of the filing o exempt funtion activities	rganization's funds contributed t	o other organization	s for section 527	·			
3	Total exempt function expendi	tures Add lines 1 and 2 Enter he	ere and on Form 112	20-POL, line 17b	<b>.</b> \$			
	Did the filing organization file <b>F</b> Enter the names, addresses ar	Form 1120-POL for this year?	r (EIN) of all sectior	ı 527 political organizat	Yes No			
	Enter the names, addresses ar organization made payments f amount of political contribution	·	r the amount paid frond	om the filing organizatio to a separate political o	ions to which the filing n's funds Also enter the organization, such as a			
	Enter the names, addresses ar organization made payments f amount of political contribution	nd employer identification numbe For each organization listed, ente ns received that were promptly ar	r the amount paid frond	om the filing organizatio to a separate political o	m  (e) A mount of politica contributions received			
	Enter the names, addresses ar organization made payments f amount of political contribution separate segregated fund or a	nd employer identification numbe For each organization listed, ente ns received that were promptly ar political action committee (PAC)	r the amount paid frond directly delivered If additional space	om the filing organization to a separate political of its needed, provide information (d) A mount paid frofiling organization:	m (e) A mount of politica contributions received and promptly and directly delivered to a separate political organization If none,			
	Enter the names, addresses ar organization made payments f amount of political contribution separate segregated fund or a	nd employer identification numbe For each organization listed, ente ns received that were promptly ar political action committee (PAC)	r the amount paid frond directly delivered If additional space	om the filing organization to a separate political of its needed, provide information (d) A mount paid frofiling organization:	m (e) A mount of politica contributions received and promptly and directly delivered to a separate political organization If none,			
	Enter the names, addresses ar organization made payments f amount of political contribution separate segregated fund or a	nd employer identification numbe For each organization listed, ente ns received that were promptly ar political action committee (PAC)	r the amount paid frond directly delivered If additional space	om the filing organization to a separate political of its needed, provide information (d) A mount paid frofiling organization:	m (e) A mount of politica contributions received and promptly and directly delivered to a separate political organization If none,			
	Enter the names, addresses ar organization made payments f amount of political contribution separate segregated fund or a	nd employer identification numbe For each organization listed, ente ns received that were promptly ar political action committee (PAC)	r the amount paid frond directly delivered If additional space	om the filing organization to a separate political of its needed, provide information (d) A mount paid frofiling organization:	m (e) A mount of politica contributions received and promptly and directly delivered to a separate political organization If none,			
	Enter the names, addresses ar organization made payments f amount of political contribution separate segregated fund or a	nd employer identification numbe For each organization listed, ente ns received that were promptly ar political action committee (PAC)	r the amount paid frond directly delivered If additional space	om the filing organization to a separate political of its needed, provide information (d) A mount paid frofiling organization:	m (e) A mount of politica contributions received and promptly and directly delivered to a separate political organization If none,			
	Enter the names, addresses ar organization made payments f amount of political contribution separate segregated fund or a	nd employer identification numbe For each organization listed, ente ns received that were promptly ar political action committee (PAC)	r the amount paid frond directly delivered If additional space	om the filing organization to a separate political of its needed, provide information (d) A mount paid frofiling organization:	m (e) A mount of politica contributions received and promptly and directly delivered to a separate political organization If none,			
	Enter the names, addresses ar organization made payments f amount of political contribution separate segregated fund or a	nd employer identification numbe For each organization listed, ente ns received that were promptly ar political action committee (PAC)	r the amount paid frond directly delivered If additional space	om the filing organization to a separate political of its needed, provide information (d) A mount paid frofiling organization:	m (e) A mount of politica contributions received and promptly and directly delivered to a separate political organization If none,			
	Enter the names, addresses ar organization made payments f amount of political contribution separate segregated fund or a	nd employer identification numbe For each organization listed, ente ns received that were promptly ar political action committee (PAC)	r the amount paid frond directly delivered If additional space	om the filing organization to a separate political of its needed, provide information (d) A mount paid frofiling organization:	m (e) A mount of politica contributions received and promptly and directly delivered to a separate political organization If none,			
5	Enter the names, addresses ar organization made payments f amount of political contribution separate segregated fund or a	nd employer identification numbe For each organization listed, ente ns received that were promptly ar political action committee (PAC)	r the amount paid frond directly delivered If additional space	om the filing organization to a separate political of its needed, provide information (d) A mount paid frofiling organization:	m (e) A mount of politica contributions received and promptly and directly delivered to a separate political organization If none,			
	Enter the names, addresses ar organization made payments f amount of political contribution separate segregated fund or a	nd employer identification numbe For each organization listed, ente ns received that were promptly ar political action committee (PAC)	r the amount paid frond directly delivered If additional space	om the filing organization to a separate political of its needed, provide information (d) A mount paid frofiling organization:	m (e) A mount of politica contributions received and promptly and directly delivered to a separate political organization If none,			
	Enter the names, addresses ar organization made payments f amount of political contribution separate segregated fund or a	nd employer identification numbe For each organization listed, ente ns received that were promptly ar political action committee (PAC)	r the amount paid frond directly delivered If additional space	om the filing organization to a separate political of its needed, provide information (d) A mount paid frofiling organization:	m (e) A mount of politica contributions received and promptly and directly delivered to a separate political organization If none,			

Sc	hedule C (Form 990 or 990-EZ) 2010						Page <b>2</b>
P	art II-A Complete if the organization under section 501(h)).	is ex	cempt under	section 501(c	)(3) and fi	led Form 5768	
A B	Check   If the filing organization belongs to a Check   If the filing organization checked bo			" provisions apply	/		
	Limits on Lobbying E (The term "expenditures" means a			)		<b>(a)</b> Filing Organization's Totals	<b>(b)</b> Affiliated Group Totals
<u>1</u> a	Total lobbying expenditures to influence public o	pinion	(grass roots lob	oyıng)			
b	Total lobbying expenditures to influence a legisl	atıve b	ody (direct lobby	ıng)			
c	Total lobbying expenditures (add lines 1a and 1	b)					
d	Other exempt purpose expenditures						
е	Total exempt purpose expenditures (add lines 1	c and :	Ld)				
f	Lobbying nontaxable amount Enter the amount columns	from th	e following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The	lobbying nontaxa	ble amount is:			
	Not over \$500,000	Not over \$500,000 20% of the amount on line 1e					
	Over \$500,000 but not over \$1,000,000	\$100	,000 plus 15% of the	excess over \$500,00	0		
	Over \$1,000,000 but not over \$1,500,000	\$175	,000 plus 10% of the	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	\$1,00	00,000				
	Grassroots nontaxable amount (enter 25% of lir	ne 1 f)					
_	Subtract line 1g from line 1a If zero or less, ent	-					
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -					
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h d	or line 11, did the	organization file F	orm 4720 rep	orting	┌ Yes ┌ No
	4-Year Av (Some organizations that made a columns below. See t	secti	on 501(h) ele		havè to co		ne five
	Lobbying Exp	endit	ures During 4	l-Year Averag	jing Period		
	Calendar year (or fiscal year						

	Lobbying Expenditures During 4-Year Averaging Period								
	Calendar year (or fiscal year beginning in)	<b>(a)</b> 2007	<b>(b)</b> 2008	<b>(c)</b> 2009	<b>(d)</b> 2010	<b>(e)</b> Total			
2a	Lobbying non-taxable amount								
b	Lobbying ceiling amount (150% of line 2a, column(e))								
С	Total lobbying expenditures								
d	Grassroots non-taxable amount								
e	Grassroots ceiling amount (150% of line 2d, column (e))								
f	Grassroots lobbying expenditures								

## 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	1)	(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?		No	
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?		Νo	
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		29,927
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			29,927
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
Ь	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".

2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
b	Carryover from last year	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	Ret urn Reference	Explanation
EXPLANATION OF OTHER LOBBYING ACTIVITIES	,	ADVISING MEMBERS OF CONGRESS ABOUT SPECIFIC LEGISLATION'S IMPACT ON RESEARCH AND DEVELOPMENT IN SCIENTIFIC COMMUNITY

1 1

DLN: 93493312002431

OMB No 1545-0047

Open to Public Inspection

## **SCHEDULE D** (Form 990)

Department of the Treasury

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

**Supplemental Financial Statements** 

► Attach to Form 990. ► See separate instructions.

Internal Revenue Service Name of the organization

Employer identification number

IS CIV	ILIAN RESEARCH AND DEVELOPMENT FOUNDATION		•	•		
				1773406		
art			Funds	or Account	<b>s.</b> Comple	te if the
	organization answered "Yes" to Form 99	(a) Donor advised funds		<b>b)</b> Funds and	other secon	nto
т.		(a) Donor advised funds	-	) Fullus allu	other accou	IILS
	otal number at end of year					
	ggregate contributions to (during year)					
	ggregate grants from (during year)					
Α	ggregate value at end of year					
	old the organization inform all donors and donor advinds are the organization's property, subject to the	5		sed	☐ Yes	☐ No
u	old the organization inform all grantees, donors, and sed only for charitable purposes and not for the ber onferring impermissible private benefit		•		☐ Yes	┌ No
rt	II Conservation Easements. Complete	if the organization answered "Yes	" to Forn	າ 990, Part I	V, line 7.	
Г Г с	urpose(s) of conservation easements held by the o Preservation of land for public use (e g , recreat Protection of natural habitat Preservation of open space complete lines 2a-2d if the organization held a qual	ion or pleasure)	f a certifie	d historic stru		a
e	asement on the last day of the tax year					
_				Held at the	e End of the	Year
	otal number of conservation easements		2a			
Т	otal acreage restricted by conservation easements	5	2b			
N	umber of conservation easements on a certified his	storic structure included in (a)	2c			
N	umber of conservation easements included in (c) a	cquired after 8/17/06	2d			
	umber of conservation easements modified, transfo	erred, released, extinguished, or termin	ated by th	e organization	ı durıng	
Ν	umber of states where property subject to conserv	ation easement is located 🗠				
	oes the organization have a written policy regardin nforcement of the conservation easements it holds		andling of	violations, an	d ┌ Yes	┌ No
S	taff and volunteer hours devoted to monitoring, ins	pecting and enforcing conservation eas	ements d	uring the year	<b>-</b>	
Α	mount of expenses incurred in monitoring, inspecti	ng, and enforcing conservation easeme	ents during	the year ► \$		
	oes each conservation easement reported on line 270(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	2(d) above satisfy the requirements of	section		☐ Yes	┌ No
b	n Part XIV, describe how the organization reports c alance sheet, and include, if applicable, the text of he organization's accounting for conservation easei	the footnote to the organization's financ	•			
rt I	Organizations Maintaining Collection Complete if the organization answered			ner Similar	Assets.	
а	f the organization elected, as permitted under SFAS rt, historical treasures, or other similar assets held rovide, in Part XIV, the text of the footnote to its fil	l for public exhibition, education or rese	earch in fu			е,
h	f the organization elected, as permitted under SFAS istorical treasures, or other similar assets held for rovide the following amounts relating to these item	public exhibition, education, or research			•	
(i	i) Revenues included in Form 990, Part VIII, line 1	L		<b>►</b> \$		
(i	ii) Assets included in Form 990, Part X			<b>F</b> \$		
Ιf	f the organization received or held works of art, hist ollowing amounts required to be reported under SFA		s for finan			
R	evenues included in Form 990, Part VIII, line 1			<b>▶</b> \$		
R				· +		

**b** Assets included in Form 990, Part X

Part	Organizations Maintaining Co	llections of Ar	t, His	tori	<u>cal Tı</u>	reasu	res, or O	the	<u>r Similar Ass</u>	ets (c	ontınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	ıy of th	ne foll	owing	that are	e a significa	ant us	se of its collection	n	
а	Public exhibition		d	Γ	Loan	orexch	nange progr	ams			
b	Scholarly research		e	Γ	O the	r					
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	ain hov	w the	/ furthe	er the o	rganızatıon	's ex	empt purpose ın		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t			,						Yes	┌ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an	ements. Compl	ete ıf	the	organ	ızatıon			es" to Form 99	0,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interm	edıary	for c	ontribu	itions o	or other ass	ets n	oot	Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ving ta	able		Г				
_							-	_	A mo	unt	
c c	Beginning balance						-	1c			
d	Additions during the year						-	1d			
e	Distributions during the year							1e			
f	Ending balance						L	1f			
2a	Did the organization include an amount on Fo		ie 21?							Yes	No
	If "Yes," explain the arrangement in Part XIV										
Pai	<b>t V Endowment Funds.</b> Complete						Form 990, o Years Back			- <b>\</b> Fa\	Yours Dack
1a	Beginning of year balance	(a)Current Year	(D	Prior `	rear	(c)IW	O TEATS DACK	(a)	illee fears back (	<b>e</b> jrour i	'ears Back
та b	Contributions										
_	Investment earnings or losses										
c d	Grants or scholarships										
u 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										
с	Term endowment ▶										
3a	Are there endowment funds not in the posses	ssion of the organiz	ation	that a	re hel	d and a	dministere	d for t	the		
	organization by	3								Yes	No
	(i) unrelated organizations								3a(i)		<u> </u>
	(ii) related organizations								3a(ii	)	<del>                                     </del>
	If "Yes" to 3a(II), are the related organizatio	·						•	3b		<u> </u>
4	Describe in Part XIV the intended uses of th						V   1	10			
Раг	t VI Investments—Land, Buildings	s, and Equipme	ent. S			•	·			1	
	Description of investment				) Cost o	r other stment)	(b)Cost or o basis (oth		(c) Accumulated depreciation	(d) E	look value
<b>1a</b> l	and										
b E	Buildings		•							1	
<b>c</b> l	easehold improvements							7,269	7,26	•	0
									1	1	
d E	Equipment		•				1,09	3,658	780,28	3	313,370
<b>e</b> (	Equipment	<u> </u>						3,658 2,324		_	2,829

Part VII Investments—Other Securities. See  (a) Description of security or category		(c) Method of valuation
(including name of security)	(b)Book value	Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests (3)O ther		
(A) ALTERNATIVE INVESTMENTS	6,437,368	F
	6,437,368	
Part VIII Investments—Program Related. Se		(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2	<u> </u>	
Part IX Other Assets. See Form 990, Part X, II  (a) Descri		( <b>b</b> ) Book value
(a) Descri	iption	(B) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line	15.)	
Part X Other Liabilities. See Form 990, Part	X, line 25.	
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes		
DEFERRED RENT	162,089	
DUE TO AFFILIATE	14,364	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25 ) ▶	176,453	

Pal	Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	ITS	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	14,999,467
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	21,509,358
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-6,509,891
4	Net unrealized gains (losses) on investments	4	1,449,476
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-16,452
9	Total adjustments (net) Add lines 4 - 8	9	1,433,024
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-5,076,867
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	16,652,067
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
ь	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	1,513,378
3	Subtract line <b>2e</b> from line <b>1</b>	3	15,138,689
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)         -139,222		
c	Add lines 4a and 4b	4c	-139,222
5	Total Revenue Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 12)	5	14,999,467
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial statements	1	22,119,177
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
Ь	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV)		
e	Add lines <b>2a</b> through <b>2d</b>	2e	609,819
3	Subtract line <b>2e</b> from line <b>1</b>	3	21,509,358
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		
Ь	Other (Describe in Part XIV)		
c	Add lines <b>4a</b> and <b>4b</b>	4c	0
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 18)	5	21,509,358

## Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part 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
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE FOUNDATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER THE PROVISIONS OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE IN ADDITION, THE FOUNDATION QUALIFIES FOR CHARITABLE CONTRIBUTION DEDUCTIONS AND HAS BEEN CLASSIFIED AS AN ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION BUSINESS INCOME WHICH IS NOT RELATED TO EXEMPT PURPOSES, LESS APPLICABLE DEDUCTIONS, IS SUBJECT TO FEDERAL AND STATE CORPORATE INCOME TAXES THE FOUNDATION DID NOT HAVE ANY NET UNRELATED BUSINESS INCOME FOR THE YEARS ENDED DECEMBER 31, 2010 AND 2009 THE FOUNDATION COMPLIES WITH THE ACCOUNTING STANDARD ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, WHICH ADDRESSES THE DETERMINATION OF WHETHER TAX BENEFITS CLAIMED OR EXPECTED TO BE CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN THE FINANCIAL STATEMENTS UNDER THIS GUIDANCE, THE FOUNDATION MAY RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION, ONLY IF IT IS, MORE-LIKELY-THAN-NOT, THAT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE POSITION THE TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM SUCH A POSITION ARE MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN 50 PERCENT LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT THE GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES ALSO ADDRESSES DE-RECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES ON INCOME TAXES, AND ACCOUNTING IN INTERIM PERIODS THE FOUNDATION HAD NO SUCH POSITIONS RECORDED IN THE CONSOLIDATED FINANCIAL STATEMENTS AT DECEMBER 31, 2010 AND 2009 GENERALLY, THE FOUNDATION HAD NO SUCH POSITIONS RECORDED IN THE CONSOLIDATED FINANCIAL STATEMENTS AT DECEMBER 31, 2010 AND 2009 GENERALLY, THE FOUNDATION IS NO LONGER SUBJECT TO U S FEDERAL INCOME TAX POSITIONS BY TAX AUTHORITIES FOR YEARS BEFORE 2007
PART XI, LINE 8 - OTHER ADJUSTMENTS		CURRENCY TRANSALATION LOSSES -16,452
PART XII, LINE 2D - OTHER ADJUSTMENTS		CRDF TECHINNOVATION, LLC 63,902
PART XII, LINE 4B - OTHER ADJUSTMENTS		INTEREST PAYMENT ON LOAN FROM CRDF TECHINNOVATION, LLC 13,254 SPECIAL EVENT EXPENSES REPORTED ON LINE 8B -152,476
PART XIII, LINE 2D - OTHER ADJUSTMENTS		CRDF TECHINNOVATION, LLC 440,891 CURRENCY TRANSALATION LOSSES 16,452 SPECIAL EVENT EXPENSES REPORTED ON LINE 8B 152,476

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DLN: 93493312002431

OMB No 1545-0047

## **SCHEDULE F** (Form 990)

**Statement of Activities Outside the United States** 

Part IV, line 14b, 15, or 16.

▶ Attach to Form 990. ▶ See separate instructions.

► Complete if the organization answered "Yes" to Form 990,

Department of the Treasury

nterna	al Revenue Service					Inspect ion
lam	ne of the organization				Employer ident	ification number
JS (	CIVILIAN RESEARCH AND DEV	ELOPMENT FO	UNDATION			
					54-1773406	
Pa	rt I General Informatio			the United States. C	Complete if the organiz	atıon answered
	"Yes" to Form 990, Pa	rt IV, line 14l	o			
1	For grantmakers. Does the	organization r	maintain recor	ds to substantiate the	amount of the grants of	or
	assistance, the grantees' eli	gibility for the	grants or ass	stance, and the select	ion criteria used to awa	ırd
	the grants or assistance? .	- 				✓ Yes
	-					
2	For grant makers. Describe in Pa	art V the organi	zation's procedu	ires for monitoring the us	e of grant funds outside th	ne
	United States					
3	Activites per Region (Use Part	V if additional s	space is needed	)		
	(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in	(e) If activity listed in (d) is a	(f) Total
	(4)	offices in the	employees or	region (by type) (e g ,	program service, describe	expenditures for
		region		fundraising, program services,		region/investments
			ındependent contractors	investments, grants to recipients located in the	service(s) in region	ın region
			Contractors	region)		
	CENTRAL AMERICA AND THE			RESEARCH &		3,870
	CARIBBEAN			DEVELOPMENT		,
				SCIENTIFIC GRANTS		
	EAST ASIA AND THE			RESEARCH &		67,830
	PACIFIC			DEVELOPMENT		
				SCIENTIFIC GRANTS		
	EUROPE (INCLUDING			RESEARCH &		454,587
	ICELAND & GREENLAND)			DEVELOPMENT		
	MIDDLE FACT AND NODELL			SCIENTIFIC GRANTS		025 02
	MIDDLE EAST AND NORTH AFRICA			RESEARCH & DEVELOPMENT		935,07
	AFRICA			SCIENTIFIC GRANTS		
	RUSSIA & THE NEWLY			RESEARCH &		2,653,06
	INDEPENDENT STATES			DEVELOPMENT		2,000,000
				SCIENTIFIC GRANTS		
	SOUTH AMERICA			RESEARCH &		3,28
				DEVELOPMENT		
				SCIENTIFIC GRANTS		
	SOUTH ASIA			RESEARCH &		14,650
				DEVELOPMENT		
	CUR CAUARAN AFRICA			SCIENTIFIC GRANTS		6.00
	SUB-SAHARAN AFRICA			RESEARCH &		6,030
				DEVELOPMENT SCIENTIFIC GRANTS		
	RUSSIA & THE NEWLY	4	11	OFFICE	PRO GRA M	2,046,088
	INDEPENDENT STATES		""	MAINTENANCE &	MANAGEMENT	2,040,000
	111321 2113211 3171123			PROGRAM SUPPORT		
				1		

0

44

44

4,138,399

2,046,088

o circulate i	(101111330) 2010
Part II	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990,
	Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000
	Use Part V if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	<b>(c)</b> Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	( <b>g)</b> A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
	See Add'l Data								

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

21

106

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 Part V ıf addıtıonal space ıs needed.										
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	( <b>d)</b> A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)			
RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS	MIDDLE EAST AND NORTH AFRICA	15		WIRE TRANSFER						
RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS	RUSSIA & THE NEWLY INDEPENDENT STATES	59	422,447	WIRE TRANSFER						
-										

## Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)	Γ	Υe	es	<b>~</b>	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Υ¢	es	<u> </u>	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	굣	Υ¢	es	Г	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Υ¢	es	<u> </u>	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	Г	Υ¢	es	<u> </u>	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Υ¢	es	굣	Νo

Schedule F (Form 990) 2010

Part V Supplemental Information

Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

information.	1	
Identifier	ReturnReference	Explanation
PROCEDURE FOR MONITORING		SCHEDULE F, PART I, LINE 2 GRANT AND CONTRACT
GRANTS OUTSIDE THE U S		MANAGEMENT IS PERFORMED BY THE GLOBAL
		OPERATIONS PROGRAM SUPPORT SERVICES (GOPSS)
		GOPSS REVIEWS ALL ACTIVITY RELATED TO EACH AWARD,
		GRANT, CONTRACT THAT CRDF IS CURRENTLY OBLIGATED
		UNDER THEY SERVE AS A DIRECT INTERFACE WITH FIELD
		OFFICES THEIR RISK MITIGATION INCLUDES MULTI-LEVEL
		INTERNAL REVIEWS OF ALL PAYMENT REQUESTS, REGULAR
		SITE VISITS AND PROJECT AUDITS, CLEARLY DEFINED
		POLICIES AND PROCEDURES, DETAILED GRANTEE
		REPORTING REQUIREMENTS, MANAGING DONOR AUDITS,
		INTERNAL REVIEWS, FREQUENT STAFF TRAINING AND
		KNOWLEDGE TESTING, ROTATION OF STAFF AND
		PROMOTION OF BEST PRACTICES IN LINE WITH THE COSO
		MODEL GOPSS ALSO IMPLEMENTED IN 2008 AN INTERNAL
		AUDIT OF ITS FUNCTIONS AND PROCEDURES BY EXTERNAL
		AUDITORS
j		Schedule F (Form 990) 2010

Software ID: Software Version:

**EIN:** 54-1773406

Name: US CIVILIAN RESEARCH AND DEVELOPMENT

FOUNDATION

1	(b) IRS code section and EIN(if	(c) Region	d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV,
	applicable)	EAST ASIA AND THE PACIFIC	RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS	5,950	WIRE TRANSFER	ussistance	assistance	appraisal, othe
		EAST ASIA AND THE PACIFIC	RESEARCH & DEVELOPMENT SCIENTIFIC	34,967	WIRE TRANSFER			
		EUROPE	GRANTS RESEARCH &	15,739	WIRE TRANSFER			
		(INCLUDING ICELAND & GREENLAND)	DEVELOPMENT SCIENTIFIC GRANTS					
		EUROPE (INCLUDING	RESEARCH & DEVELOPMENT	7,563	WIRE TRANSFER			
		ICELAND & GREENLAND) EUROPE	SCIENTIFIC GRANTS RESEARCH &	28.713	WIRE TRANSFER			
		(INCLUDING ICELAND &	DEVELOPMENT SCIENTIFIC	,.				
		GREENLAND) EUROPE (INCLUDING	RESEARCH & DEVELOPMENT	6,691	WIRE TRANSFER			
		ICELAND & GREENLAND)	SCIENTIFIC GRANTS					
		EUROPE (INCLUDING ICELAND & GREENLAND)	RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS	5,624	WIRE TRANSFER			
		EUROPE (INCLUDING	RESEARCH & DEVELOPMENT	44,500	WIRE TRANSFER			
		ICELAND & GREENLAND)	SCIENTIFIC GRANTS					
		EUROPE (INCLUDING ICELAND &	RESEARCH & DEVELOPMENT SCIENTIFIC	16,081	WIRE TRANSFER			
		GREENLAND) EUROPE	GRANTS RESEARCH &	33,650	WIRE TRANSFER			
		(INCLUDING ICELAND & GREENLAND)	DEVELOPMENT SCIENTIFIC GRANTS					
		EUROPE (INCLUDING	RESEARCH & DEVELOPMENT	5,842	WIRE TRANSFER			
		ICELAND & GREENLAND) EUROPE	SCIENTIFIC GRANTS RESEARCH &	12 011	WIRE TRANSFER			
		(INCLUDING ICELAND &	DEVELOPMENT SCIENTIFIC	12,911	WIRE TRANSFER			
		GREENLAND) EUROPE (INCLUDING	RESEARCH & DEVELOPMENT	14,070	WIRE TRANSFER			
		ICELAND & GREENLAND)	SCIENTIFIC GRANTS					
		EUROPE (INCLUDING ICELAND &	RESEARCH & DEVELOPMENT SCIENTIFIC	6,653	WIRE TRANSFER			
		GREENLAND) EUROPE	GRANTS RESEARCH &	6,163	WIRE TRANSFER			
		(INCLUDING ICELAND & GREENLAND)	DEVELOPMENT SCIENTIFIC GRANTS					
		EUROPE (INCLUDING	RESEARCH & DEVELOPMENT SCIENTIFIC	209,684	WIRE TRANSFER			
		ICELAND & GREENLAND) MIDDLE EAST AND	GRANTS RESEARCH &	197,233	WIRE TRANSFER			
		NORTH AFRICA	DEVELOPMENT SCIENTIFIC GRANTS	·				
		MIDDLE EAST AND NORTH AFRICA	RESEARCH & DEVELOPMENT	57,406	WIRE TRANSFER			
			SCIENTIFIC GRANTS					
		MIDDLE EAST AND NORTH AFRICA	RESEARCH & DEVELOPMENT SCIENTIFIC	59,397	WIRE TRANSFER			
		MIDDLE EAST AND	RESEARCH &	23,200	WIRE TRANSFER			
		NORTH AFRICA	DEVELOPMENT SCIENTIFIC GRANTS					
		MIDDLE EAST AND NORTH AFRICA	RESEARCH & DEVELOPMENT SCIENTIFIC	14,608	WIRE TRANSFER			
		MIDDLE EAST AND	GRANTS RESEARCH &	10,013	WIRE TRANSFER			
		NORTH AFRICA	DEVELOPMENT SCIENTIFIC GRANTS	20,020				
		MIDDLE EAST AND NORTH AFRICA	RESEARCH & DEVELOPMENT	36,472	WIRE TRANSFER			
		MIDDLE EAST AND	SCIENTIFIC GRANTS RESEARCH &	19.887	WIRE TRANSFER			
		NORTH AFRICA	DEVELOPMENT SCIENTIFIC GRANTS					
		MIDDLE EAST AND NORTH AFRICA	RESEARCH & DEVELOPMENT SCIENTIFIC	227,181	WIRE TRANSFER			
		MIDDLE EAST AND	GRANTS RESEARCH &	10,677	WIRE TRANSFER			
		NORTH AFRICA	DEVELOPMENT SCIENTIFIC GRANTS					
		RUSSIA & THE NEWLY	RESEARCH & DEVELOPMENT	8,000	WIRE TRANSFER			
		INDEPENDENT STATES RUSSIA & THE	SCIENTIFIC GRANTS RESEARCH &	16.600	WIDE TOWNSELD			
		NEWLY INDEPENDENT	DEVELOPMENT SCIENTIFIC	16,682	WIRE TRANSFER			
		STATES RUSSIA & THE NEWLY	GRANTS RESEARCH & DEVELOPMENT	158,409	WIRE TRANSFER			
		INDEPENDENT STATES	SCIENTIFIC GRANTS					
		RUSSIA & THE	RESEARCH &	30,411	WIRE TRANSFER			

RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS

NEWLY INDEPENDENT STATES

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuation (book, FMV, appraisal, other)
	,	RUSSIA & THE NEWLY INDEPENDENT STATES	RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS	168,932	WIRE TRANSFER			
		RUSSIA & THE NEWLY INDEPENDENT STATES	RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS		WIRE TRANSFER			
		RUSSIA & THE NEWLY INDEPENDENT STATES	RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS		WIRE TRANSFER			
		RUSSIA & THE NEWLY INDEPENDENT STATES	RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS		WIRE TRANSFER			
		RUSSIA & THE NEWLY INDEPENDENT STATES	RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS		WIRE TRANSFER			
		RUSSIA & THE NEWLY INDEPENDENT STATES	RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS	12,000	WIRE TRANSFER			
		RUSSIA & THE NEWLY INDEPENDENT STATES	RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS	183,809	WIRE TRANSFER			
		RUSSIA & THE NEWLY INDEPENDENT STATES	RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS	39,616	WIRE TRANSFER			
		RUSSIA & THE NEWLY INDEPENDENT STATES	RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS	7,532	WIRE TRANSFER			
		RUSSIA & THE NEWLY INDEPENDENT STATES	RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS	22,550	WIRE TRANSFER			
		RUSSIA & THE NEWLY INDEPENDENT STATES	RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS	6,000	WIRE TRANSFER			
		RUSSIA & THE NEWLY INDEPENDENT STATES	RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS	7,000	WIRE TRANSFER			
		RUSSIA & THE NEWLY INDEPENDENT STATES	RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS	6,225	WIRE TRANSFER			
		RUSSIA & THE NEWLY INDEPENDENT STATES	RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS	6,000	WIRE TRANSFER			
		RUSSIA & THE NEWLY INDEPENDENT STATES	RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS	10,800	WIRE TRANSFER			
		RUSSIA & THE NEWLY INDEPENDENT STATES	RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS	14,064	WIRE TRANSFER			
		RUSSIA & THE NEWLY INDEPENDENT STATES	RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS	5,294	WIRE TRANSFER			
		RUSSIA & THE NEWLY INDEPENDENT STATES	RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS	5,404	WIRE TRANSFER			

DLN: 93493312002431

**Employer identification number** 

OMB No 1545-0047

**SCHEDULE G** (Form 990 or 990-EZ)

Name of the organization

Department of the Treasury

Internal Revenue Service

## **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ. See separate instructions.

Inspection

US CIVILIAN RESEARCH AND DEVELOPMENT FOUNDATION 54-1773406 Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations e Solicitation of non-government grants Solicitation of government grants Internet and e-mail solicitations Special fundraising events Phone solicitations In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization Form 990-EZ filers are not required to complete this table (i) Name and address of (ii) Activity (iii) Did (iv) Gross receipts (v) A mount paid to (vi) A mount paid to ındıvıdual fundraiser have from activity (or retained by) (or retained by) or entity (fundraiser) custody or fundraiser listed in organization col (i) control of contributions? Yes

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

Pai	rt II	Fundraising Events. Commore than \$15,000 on Form							
			(a) Event #1  DINNER (GEORGE BROWN)	(b) Event #2  (event type)	(c) O ther Events (total number)	(d) Total Events (Add col (a) through col (c))			
ds			(event type)		,				
E E	1	Gross receipts	89,050			89,050			
Revenue	2	Less Charitable contributions	84,054			84,054			
	3	Gross income (line 1 minus line 2)	4,996	5		4,996			
	4	Cash prizes							
မှာ	5	Non-cash prizes							
Expenses	6	Rent/facility costs	15,789	,		15,789			
	7	Food and beverages							
Direct	8	Entertainment							
Δ	9	Other direct expenses .	136,687	7		136,687			
	10	Direct expense summary Add line	es 4 through 9 in column	(d)	🛌	152,476			
	11	Net income summary Combine lir	nes 3 and 10 ın column (	d)	•	-147,480			
Par	t II	<b>Gaming.</b> Complete if the or \$15,000 on Form 990-EZ, lin		"Yes" to Form 990, Pa	rt IV, line 19, or repo	orted more than			
Revenue			(a) Bingo	<b>(b)</b> Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Total gaming (Add col (a) through col (c))			
	1	Gross revenue							
မှ မွ	2	Cash prizes							
Expenses	3	Non-cash prizes							
Direct E	4	Rent/facility costs							
౼	5	Other direct expenses							
	6	Volunteer labor	Γ Yes % Γ No	∀es %     No	┌ Yes %				
	7	7 Direct expense summary Add lines 2 through 5 in column (d)							
	8	Net gaming income summary Coml	oine lines 1 and 7 in colu	ımn (d)					
9	Ent	er the state(s) in which the organiza	tion operates gaming ac	tivities					
a b	Is the organization licensed to operate gaming activities in each of these states?								
10a b		re any of the organization's gaming l Yes," Explain			the tax year?	· · 「Yes 「No			
b	If"	Yes," Explain							

11	Does the organization operate ga	aming activities with nonmembers?		$\Gamma_{\text{Yes}}$ $\Gamma_{\text{No}}$
12	Is the organization a grantor, be	neficiary or trustee of a trust or a mer	nber of a partnership or other entity	
	formed to administer charitable (	jaming?		Г <sub>Yes</sub> Г <sub>No</sub>
13	Indicate the percentage of gamin	ng activity operated in		
а	The organization's facility			1
b	An outside facility		13b	
14	Provide the name and address or records	f the person who prepares the organız	ation's gaming/special events books and	
	Name 🟲			
	Address 🟲			
15a		ntract with a third party from whom th		
ь		ning revenue received by the organizated by the third party 🟲 \$	ation <b>F</b> \$ and the	
c	If "Yes," enter name and address	5		
	Name 🟲			
	Address 🟲			
16	Gaming manager information			
	Name 🟲			
	Gaming manager compensation l	<b>\$</b>		
	Description of services provided	<b>&gt;</b>		
	Director/officer	Employee	Independent contractor	
17	Mandatory distributions			
а		er state law to make charitable distrib		
p.				· Fyes Fno
D		required under state law distributed activities during the tax year > \$	to other exempt organizations or spent	
Par			r responses to question on Schedule	e G (see
	Identifier	ReturnReference	Explanation	

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DLN: 93493312002431 OMB No 1545-0047

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

**Inspection** 

Employer identification number

US CIVILIAN RESEARCH AND DEVE	54-1773406						
Part I General Information  1 Does the organization maintain in the selection criteria used to aw	ecords to substanti	ate the amount of the					✓ Yes 🗀
2 Describe in Part IV the organiza	tion's procedures fo	r monitoring the use o	f grant funds in the Unite	d States			
Form 990, Part IV, line duplicated if additional	e 21 for any recip	ient that received n	nore than \$5,000. Ch	eck this box if no one	recipient receive	ed more than \$5,000.	
1 (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 Addıtıonal Data Table							
	1(.)(2)						
<ul><li>Enter total number of section 50</li><li>Enter total number of other organ</li></ul>							32 24

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>b)</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
(1) RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS	128	721,704			

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	,	SCHEDULE I, PART I, LINE 2 GRANT AND CONTRACT MANAGEMENT IS PERFORMED BY THE GLOBAL OPERATIONS
MONITORING GRANTS		PROGRAM SUPPORT SERVICES (GOPSS) GOPSS REVIEWS ALL ACTIVITY RELATED TO EACH AWARD, GRANT,
IN THE U S		CONTRACT THAT CRDF IS CURRENTLY OBLIGATED UNDER THEY SERVE AS A DIRECT INTERFACE WITH FIELD
		OFFICES THEIR RISK MITIGATION INCLUDES MULTI-LEVEL INTERNAL REVIEWS OF ALL PAYMENT REQUESTS,
		REGULAR SITE VISITS AND PROJECT AUDITS, CLEARLY DEFINED POLICIES AND PROCEDURES, DETAILED
		GRANTEE REPORTING REQUIREMENTS, MANAGING DONOR AUDITS, INTERNAL REVIEWS, FREQUENT STAFF
		TRAINING AND KNOWLEDGE TESTING, ROTATION OF STAFF AND PROMOTION OF BEST PRACTICES IN LINE WITH
		THE COSO MODEL GOPSS ALSO IMPLEMENTED IN 2008 AN INTERNAL AUDIT OF ITS FUNCTIONS AND
		PROCEDURES BY EXTERNAL AUDITORS

Software ID: **Software Version:** 

**EIN:** 54-1773406

Name: US CIVILIAN RESEARCH AND DEVELOPMENT FOUNDATION

Form 990,Schedule I, Part	t II, Grants and	d Other Assistance	e to Governments	and Organization	ns in the United St	ates	
(a) Name and address of organization or government	<b>(b)</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
ACUTECH CONSULTING GROUP1600 TYSONS BLVD SUITE 800 MCLEAN,VA 22102	94-3196361		327,907				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
AFAFTRANSLATIONS1024 MASONIC AVE ALBANY,CA 94706	26-4051806		48,264				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
AMERICAN ASSOCIATION FOR THE ADVANCEMENT OF SCIENCEPO BOX 80144 BALTIMORE, MD 212800144	53-0196568		482,640				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
ARIZONA STATE UNIVERSITY1551 S RURUAL ROAD TEMPE,AZ 85281	36-3380874	501(C)(3)	9,239				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
BETH ISRAEL MEDICAL CENTER215 PARK AVENUE SOUTH 15TH FLOOR NEW YORK, NY 10003	13-5564934		8,735				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
BRANDEIS UNIVERSITYMS 144 PO BOX 549110 WALTHAM,MA 024549110	04-2103552	501(C)(3)	14,987				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
BROOKLYN COLLEGE OF THE CITY UNIVERSITY OF NEW YORK2900 BEDFORD AVE BROOKLYN,NY 11210	11-2989843	501(C)(3)	11,526				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
CAMBRIDGE ADVISORS LLCPO BOX 391143 CAMBRIDGE, MA 02139	26-0618917		19,633				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
COLLEGE STATION MEDICAL CENTER1604 ROCK PRAIRIE ROAD COLLEGE STATION, TX 77845	14-1881632		10,138				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
CONFERENCE HOUSING- UNIVERSITY OF CALIFORNIA DAVIS2195 HEARST AVE RM 130 MC1103 BERKELEY,CA 947201103	94-6002123	501(C)(3)	5,725				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
CONTROL RISKS GROUP LLCPO BOX 406287 ATLANTA,GA 303846287	54-2007787		16,200				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
EAST TENNESSEE STATE UNIVERSITY21096 W MARKET ST JOHNSON CITY,TN 37604	55-0788917	501(C)(3)	7,730				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS

Form 990,Schedule 1, Par	t 11, Grants and	U Other Assistance	to governments	anu Organizatioi	is in the officed St	ates	
(a) Name and address of organization or government	<b>(b)</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
EMORY UNIVERSITY- CENTER FOR PUBLIC HEALTH PREPAREDNESS AND RESEARCH69 JESSE HILL JR DR SE ATLANTA, GA 30303	58-2137993	501(C)(3)	7,216				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
GEORGE WASHINGTON UNIVERSITY44983 KNOLL SQUARE BUILDING II SECOND FLOOR ASHBURN,VA 201472692	53-0196584	501(C)(3)	16,786				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
HOWARD UNIVERSITY2041 GEORGIA AVE NW WASHINGTON,DC 20060	52-1932255	501(C)(3)	8,741				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
INSTITUTE OF NUCLEAR MATERIALS MANAGEMENT 111 DEER LAKE ROAD SUITE 100 DEERFIELD,IL 60015	31-0740753		11,120				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
INTERNATIONAL BUSINESS & TECHNICAL CONSULTANTS8614 WESTWOOD CENTER DRIVE SUITE 400 VIENNA,VA 22182	62-1327398		80,639				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
KANSAS STATE UNIVERSITY1800 DENISON AVE 106 MANHATTAN,KS 66506	48-0771751	501(C)(3)	8,500				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
KENT STATE UNIVERSITY 307 LWRY HALL TERRANCE DR KENT, OH 44242	31-6402079	501(C)(3)	9,700				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
LOUISIANA STATE UNIVERSITY5825 AIRLINE HWY BATON ROUGE,LA 70805	72-0645546	501(C)(3)	6,545				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
MICHIGAN TECHNOLOGICAL UNIVERSITY1400 TOWNSEND DR HOUGHTON,MI 49931	38-6005955	501(C)(3)	6,043				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
NATIONAL COUNCIL FOR SCIENCE AND THE ENVIRONMENT1101 17TH ST NW STE 250 WASHINGTON, DC 20036	52-1700932		7,000				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
NEW YORK UNIVERSITY1 WASHINGTON SQ N NEW YORK, NY 10003	13-4141728	501(C)(3)	8,412				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
RCG HEALTHCARE CONSULTINGPO BOX 3662 BOSTON, MA 022413662	04-2807148		62,250				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS

(a) Name and address of organization or government	<b>(b)</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
RESEARCH FOUNDATION OF STATE UNIVERSITY OF NEW YORKPO BOX 9 ALBANY,NY 12201	14-1368361	501(C)(3)	6,358				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
RUSSIAN WORKS INC19 OLD ROAD WESTON, MA 02493	54-1761667		22,724				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
SCITECHEDIT INTERNATIONAL LLC7012 EAST MOUNTAIN BRUSH CIRCLE HIGHLANDS RANCH, CO 80130	84-1423562		5,127				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
SNA INTERNATIONAL407 CROWN VIEW DRIVE ALEXANDRIA, VA 22314	33-1071111		240,326				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
STEPTOE & JOHNSON LLP 1330 CONNECTICUT AVE NW STE 700 WASHINGTON, DC 200361795	52-1349790		9,368				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
TECHNOLOGY FUTURES INC13740 N HWY 183 STE C2 AUSTIN,TX 78750	74-1980547		26,463				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
THE CHIEF STORYTELLER LLC9907 POMONA DRIVE BETHESDA,MD 20817	20-1313005		5,183				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
THE REGENTS OF THE UNIVERSITY OF MICHIGAN 3089 WOLVERINE TO WER ANN ARBOR, MI 48109	38-6006309	501(C)(3)	10,999				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
UNISON AGENCY1010 WISCONSIN AVENUE NW STE 400 WASHINGTON, DC 20007	75-3119482		126,320				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
UNITED NATIONS1 DAG HAMMARSKJOLD PLZ NEW YORK, NY 10017	13-6017810		13,304				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
UNIVERSITY OF ARIZONA PO BOX 3520 TUCSON, AZ 857223520	14-8097108	501(C)(3)	11,092				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
UNIVERSITY OF CALIFORNIA BERKELEY 2195 HEARST AVE RM 130 MC1103 BERKELEY, CA 947201103	94-6002123	501(C)(3)	7,465				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS

roi ili 990,Scheddie 1, Pai	t II, Grants and	d Other Assistance	to dovernments	Tana Organization	is in the omited st	1103	1
(a) Name and address of organization or government	<b>(b)</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 CALIFORNIA DAVIS1441 RESEARCH PARK DR DAVIS,CA 95618	94-6036494	501(C)(3)	11,308				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
UNIVERSITY OF CALIFORNIA SAN DIEGO 9500 GILMAN DRIVE Q- 026 PURCHASING DEPT LA JOLLA, CA 92037	95-6006144	501(C)(3)	6,486				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
UNIVERSITY OF CENTRAL FLORIDA12424 RESEARCH PKWY ORLANDO,FL 32826	16-1733312	501(C)(3)	8,487				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
UNIVERSITY OF COLORADO BOULDER3100 MARINE STREET CAMPUS BOX 572 ROOM 479 BOULDER,CO 803090572	84-6049811	501(C)(3)	13,790				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
UNIVERSITY OF HAWAII 2777 KALAKAUA AVE HONOLULU,HI 96815	99-0322295	501(C)(3)	5,365				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
UNIVERSITY OF HOUSTON PO BOX 988 HOUSTON,TX 770010988	74-6041411	501(C)(3)	8,449				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
UNIVERSITY OF MARYLAND COLLEGE PARK ROSSBOROUGH INN COLLEGE PARK, MD 20742	52-1630673	501(C)(3)	37,614				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
UNIVERSITY OF MISSOURI 1870 MINER CIR FL 3 ROLLA,MO 65409	43-6003859	501(C)(3)	8,797				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
UNIVERSITY OF NEVADA RENO1664 NORTH VIRGINIA STREET SPONSORED PROJECTS / MAIL STOP 325 RENO,NV 895570025	94-2781749	501(C)(3)	5,818				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
UNIVERSITY OF NORTH CAROLINA CHAPEL HILL 134 E FRANKLIN ST CHAPEL HILL,NC 27514	56-1150509	501(C)(3)	13,100				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
UNIVERSITY OF SOUTHERN CALIFORNIA 3500 S FIQUEROA ST STE 102 LOS ANGELES, CA 900742095	84-0795410	501(C)(3)	6,785				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
UNIVERSITY OF UTAH201 SOUTH PRESIDENTS CIRCLE ROOM 406 SALT LAKE CITY, UT 841129020	23-7112869	501(C)(3)	9,791				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS

Torin 550,5cheddie 1, Far	c 11, Grants and	other Assistance	to dovernments	una organization	is in the officer st	103	
(a) Name and address of organization or government	<b>(b)</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 VIRGINIA 918 EMMET ST N CHARLOTTESVILLE, VA 22903	54-6037928	501(C)(3)	9,100				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
UNIVERSITY OF WASHINGTONBOX 351210 SEATTLE, WA 981951210	91-6001537	501(C)(3)	5,290				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
WASHINGTON STATE UNIVERSITY1710 BEASLY PRFRM ART CTR PULLMAN,WA 99164	34-4803871	501(C)(3)	10,330				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
WM SYMPOSIAPO BOX 13023 TUCSON,AZ 85732	86-0709487		9,225				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
GLOBAL PROTECTION USA 444 KELLY DR STE 3A WEST BERLIN,NJ 08091	06-1696773		5,701				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
ADW LABS232 EAST 82ND STREET SUITE GA NEW YORK, NY 10028	20-4501574		5,838				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
FISHER SCIENTIFIC2775 HORIZON RIDGE CT SUWANEE,GA 30024	23-2942737		7,879				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS
QUANTACHROME INSTRUMENTS1900 CORPORATE DR BOYNTON BEACH,FL 33426	11-1261663		36,330				RESEARCH & DEVELOPMENT SCIENTIFIC GRANTS

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DLN: 93493312002431

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

**Compensation Information** 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.

Open to Public Inspection

Employer identification number

US	CIVILIAN RESEARCH AND DEVELOPMENT FOUNDATION	E4 1772406			
Pa	rt I Questions Regarding Compensation	54-1773406			
	Questions Regulating compensation			Yes	Νο
1a	Check the appropriate box(es) if the organization provide				
	990, Part VII, Section A, line 1a Complete Part III to				
	First-class or charter travel	Housing allowance or residence for personal use			
	Travel for companions  Tax idemnification and gross-up payments	Payments for business use of personal residence Health or social club dues or initiation fees			
	Discretionary spending account	Personal services (e.g., maid, chauffeur, chef)			
	Justicionary spending account	r ersonar services (e g , maid, chauneur, cher)			
b	If any of the boxes in line 1a are checked, did the organ reimbursement orprovision of all the expenses describe		1b		No
2	Did the organization require substantiation prior to reim				
	officers, directors, trustees, and the CEO/Executive Di	rector, regarding the items checked in line 1a?	2		Νo
_					
3	Indicate which, if any, of the following the organization to organization's CEO/Executive Director Check all that a				
	✓ Compensation committee	Written employment contract			
	Independent compensation consultant	Compensation survey or study			
	Form 990 of other organizations	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part or a related organization	t VII, Section A, line 1a with respect to the filing organizati	ion		
а	Receive a severance payment or change-of-control pay	ment from the organization or a related organization?	4a		Νο
b	Participate in, or receive payment from, a supplemental	nonqualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-base	d compensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide	de the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must o	complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line				
	compensation contingent on the revenues of				
	The organization?		5a		Νo
b	Any related organization?		5b		Νo
_	If "Yes," to line 5a or 5b, describe in Part III	. 1			
6	For persons listed in form 990, Part VII, Section A, line compensation contingent on the net earnings of	e 1a, 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, line payments not described in lines 5 and 6? If "Yes," desc		7		No
8	Were any amounts reported in Form 990, Part VII, paid subject to the initial contract exception described in Re	•			
	ın Part III		8		Νo
9	If "Yes" to line 8, did the organization also follow the re	buttable presumption procedure described in Regulations		1	

section 53 4958-6(c)?

#### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

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

(A) Name		(B) Breakdown of	f W-2 and/or 1099-MI	.SC compensation	(C) Retirement and	( <b>D)</b> Nontaxable	(E) Total of columns		
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ	
(1) CATHLEEN CAMPBELL	(ı) (ıı)	216,929 0	/		23,829	l '	280,429	,	
(2) STEPHEN WOLK	(ı) (ıı)	160,679 0	- /		17,183		207,082	,	
(3) ERIC NOVOTNY	(ı) (ıı)	173,565 0	12,000	2,374	9,343		213,031	,	
(4) SHAWN WHEELER	(ı) (ıı)	154,463 0	,		18,016		204,457		
(5) JOHN ZIMMERMAN	(ı) (ıı)	156,975 0	_	2,090	6,866		167,640	,	
(6) JOHN MODZELEWSKI	(ı) (ıı)	133,631	_,		13,784		163,083	,	
(7) DAVID LINDEMAN	(ı) (ıı)	138,840	1,000		14,128			,	
(8)				'					
(9)				,		1			
( 10 )				<u> </u>					
(11)	+	†				<u> </u>			
( 12 )	+	†		<u> </u>		 			
( 13 )	+	+		<del>                                     </del>					
( 14 )	+	+		<u> </u>					
( 15 )	+	+		<del>                                     </del>					
( 16 )	'	+			+	1			

#### 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
	PART I, LINE	NON-COMPENSATED OFFICERS AND DIRECTORS ARE PERMITTED TO TRAVEL VIA FIRST-CLASS AIR TRAVEL WHILE ON ORGANIZATION BUSINESS
	1 A	THIS IS TREATED AS NON-TAXABLE UNDER AN ACCOUNTABLE EXPENSE PLAN MAINTAINED BY THE ORGANIZATION

Schedule J (Form 990) 2010

# OMB No 1545-0047

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#### SCHEDULE M (Form 990)

Department of the Treasury

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

**NonCash Contributions** 

Internal Revenue Service

Name of the organization US CIVILIAN RESEARCH AND DEVELOPMENT FOUNDATION Employer identification number 54-1773406

Pa	Types of Property							
		(a) Check if applicable	<b>(b)</b> Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	(d) Method of determining o amounts	ncash o	ontribut	юn
1	Art—Works of art			1g				
	Art—Historical treasures							
3	Art—Fractional Interests							
4	Books and publications							
5	Clothing and household							
good								
6	Cars and other vehicles .							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded							
10	Securities—Closely held stock							
11	Securities—Partnership, LLC, or trust interests .							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic							
14	structures							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts .							
	LICENSE (HARDWARE &							
25	Other ► (SOFTWARE)	x	109	110,429	FMV			
26	O ther ▶()							
27	O ther ▶()							
28								
29	Number of Forms 8283 received by	y the org	anızatıon durıng the tax yea	ar for contributions				
	for which the organization complete	ed Form 8	3283, Part IV, Donee Ackr	owledgement	29			
							Yes	No
30a	During the year, did the organization	on receiv	e by contribution any prope	rty reported in Part I, lines	1-28 that it			
	must hold for at least three years f	rom the o	date of the initial contributi	on, and which is not require	d to be used			
	for exempt purposes for the entire	holdıng p	eriod?			30a		No
b	If "Yes," describe the arrangement	t ın Part I	I					
31	Does the organization have a gift a	cceptano	ce policy that requires the i	eview of any non-standard	contributions?	31		Νο
32a	Does the organization hire or use t contributions?		es or related organizations	to solicit, process, or sell i	non-cash	32a		Νo
	If "Yes," describe in Part II If the organization did not report re describe in Part II	venues i	n column (c) for a type of p	roperty for which column (a	) is checked,			
Eor E	Privacy Act and Panerwork Peduction A	st Notice	soo the Instructions for Ear	n 000 Cat No. 512271	Schodule	M /Fam	000	2010

Page 2

#### Part II

**Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier Return Reference Explanation

Schedule M (Form 990) 2010

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As Filed Data -

DLN: 93493312002431

OMB No 1545-0047

2010

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

Name of the organization
US CIVILIAN RESEARCH AND DEVELOPMENT FOUNDATION

Employer identification number

54-1773406

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		THE FORM 990 WILL FIRST BE REVIEWED THE CFO THE FORM 990 WILL BE PRESENTED TO THE BOARD OF DIRECTORS PRIOR TO FILING WITH THE INTERNAL REVENUE SERVICE

Identifier	Return Reference	Explanation
	· '	ALL EMPLOYEES SIGN A CONFLICT OF INTEREST STATEMENT UPON INITIAL EMPLOYMENT BOARD MEMBERS AND SENIOR STAFF SIGN ANNUAL STATEMENTS IN ADDITION, ALL EMPLOYEES MUST TAKE AN ANNUAL ETHICS COURSE WHICH COVERS CONFLICT OF INTEREST THEY MUST PASS THE COURSE EXAM

ldentifier	Return Reference	Explanation
	VI, SECTION B, LINE 15	THE BOARD OF DIRECTORS INCLUDES A COMPENSATION COMMITTEE WHICH SETS THE ANNUAL SALARY OF THE PRESIDENT/CEO, CHIEF FINANCIAL OFFICER AND TWO VICE PRESIDENTS THE COMMITTEE REVIEWS VARIOUS SALARY SURVEYS FOR COMPARABLE ORGANIZATIONS THE COMMITTEE REPORTS ITS DELIBERATIONS IN WRITING

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	CRDF INCLUDES SUMMARY FINANCIAL INFORMATION IN ITS ANNUAL REPORT THE 990 IS AVAILABLE ON GUIDESTAR AND TO ANY ONE WHO MAKES A WRITTEN REQUEST TO CRDF

ldentifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	,	NET UNREALIZED GAINS ON INVESTMENTS 1,449,476 CURRENCY TRANSALATION LOSSES -16,452 TOTAL TO FORM 990, PART XI, LINE 5 1,433,024

ldentifier	Return Reference	Explanation
AUDIT OF FINANCIAL STATEMENTS	FORM 990, PART IX, LINE 2	ALTHOUGH THE ORGANIZATION DOES NOT RECEIVE STAND ALONE GAAP FINANCIAL STATEMENTS IT DOES RECEIVE ON AN ANNUAL BASIS FROM INDEPENDENT AUDITORS CONSOLIDATED ENTITY GAAP FINANCIAL STATEMENTS FOR IT AND ITS AFFILIATES THE ORGANIZATION HAS AN AUDIT COMMITTEE THAT ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND THE SELECTION OF AN INDEPENDENT ACCOUNTANT

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -**SCHEDULE R** 

DLN: 93493312002431

OMB No 1545-0047

Open to Public Inspection

**Employer identification number** 

**Related Organizations and Unrelated Partnerships** 

Department of the Treasury Internal Revenue Service

Name of the organization

(Form 990)

▶ 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.

US CIVILIAN RESEARCH AND DEVELOPMENT FOUNDATION				54-1773406			
Part I Identification of Disregarded Entities (Compl	ete if the organization	on answered "Yes'	' on Form 990, Pa	•			
(a) Name, address, and EIN of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) e Total income	(e) End-of-year assets	<b>(f)</b> Direct controlling entity		
Part II Identification of Related Tax-Exempt Organi or more related tax-exempt organizations during t	he tax year.)	If the organization (c) Legal domicile (state	(d)	on Form 990, Part  (e) Public charity status	(f)	(e Section 5	<b>g)</b> 512(b)(13
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public charity status (if section 501(c)(3))	Direct controlling entity	conti	rolled nization No
For Privacy Act and Paperwork Reduction Act Notice, see the Instruction	ons for Form 990.	Cat No 50	<u> </u>   135Y		Schedule R (	Form 990	   2010

art III					ole as a Partners			answered "	Yes" on Form 990,	Part IV, lır	ne 34
	because it had one or more related organizations treated as a partnership during the tax year.)										
			(c)					(h)	(i)	(i)	

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	<b>(d)</b> Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h Disprop allocat	rtionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gene mana parti	ral or aging	<b>(k)</b> Percentage ownership
							Yes	No		Yes	No	
Part TV Identif	ication of Pelat	ad Ora	anizatione Taya	hle as a Cornora	tion or Trust (C	omplete if the ora	ובקומבו	tion ar	newered "Vec" on	Form	aan	Dart IV

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

					1		
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	<b>(d)</b> Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	<b>(g)</b> Share of end-of-year assets	<b>(h)</b> Percentage ownership
(1) CRDF TECHINNOVATION LLC STR 9 BLD 1 MOSCOW 119435 RS	PROGRAM MANAGEMENT FOR TECHNOLOGY INNOVATION	RS	N/A	С	63,902	191,070	100 000 %

	·			
Pa	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)			
	Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	
<b>1</b> D	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			7
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a	Yes	$\int$
b	Gift, grant, or capital contribution to other organization(s)	1b		
c	Gift, grant, or capital contribution from other organization(s)	1c		T

f Sale of assets to other organization(s)

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

- **g** Purchase of assets from other organization(s)
- h Exchange of assets
- i Lease of facilities, equipment, or other assets to other organization(s)
- j Lease of facilities, equipment, or other assets from other organization(s)
- k Performance of services or membership or fundraising solicitations for other organization(s)
- I Performance of services or membership or fundraising solicitations by other organization(s)
- m Sharing of facilities, equipment, mailing lists, or other assets
- n Sharing of paid employees
- Reimbursement paid to other organization for expenses
- p Reimbursement paid by other organization for expenses
- **q** Other transfer of cash or property to other organization(s)
- r Other transfer of cash or property from other organization(s)

	1 63	1
1a	Yes	
1b		No
1c		No
1d	Yes	
1e		No
1f		No
1g		No
1h		No
<b>1</b> i		No
1j		No
1k	Yes	
11		No
1m		No
1n		No
10		No
1р		No
1q		No
1r		No

(a) Name of other organization	Transaction type(a-r)	(c) Amount involved	Method of determining amount involved
(1) CRDF TECHINNOVATION LLC	A	13,254	COST
(2) CRDF TECHINNOVATION LLC	D	467,020	COST

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

(3) CRDF TECHINNOVATION LLC	к	443,869	COST
(4)			
(5)			

(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

<b>(a)</b> Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d Are parti sect 501(d organiz	ners ion :)(3) :ations?	<b>(e)</b> Share of end-of-year assets		rtionate cions?	(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana part	agını tner?
			Yes	No		Yes	No		Yes	N
										+
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										T
										I

#### Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier I Return Reference I	er Return Reference Explanation
---------------------------------	---------------------------------

Schedule R (Form 990) 2010

# **TY 2010 Itemized Other Current Assets Schedule**

Name: US CIVILIAN RESEARCH AND DEVELOPMENT FOUNDATION

**EIN:** 54-1773406

Corporation Name	Corporation EIN	Other Current Assets Description	Beginning Amount	Ending Amount
CRDFTECHINNOVATION		PREPAID EXPENSES	1,404	328
		ADVANCES	46,980	63,902
		OTHER		14,364

#### **TY 2010 Other Deductions Schedule**

Name: US CIVILIAN RESEARCH AND DEVELOPMENT FOUNDATION

**EIN:** 54-1773406

Description	Foreign Amount (should only be used when attached to 5471 Schedule C Line 16)	Amount
TRAVEL	3,986,163	130,795
TELEPHONE	157,350	5,163
OTHER	1,139,087	37,376
COMMISSIONS	109,441	3,591
CURRENCY TRANSALATION	408,079	13,390

#### **Additional Data**

Software ID: Software Version:

**EIN:** 54-1773406

Name: US CIVILIAN RESEARCH AND DEVELOPMENT

**FOUNDATION** 

#### Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code SOLUTIONS SERV	) (Expenses \$ ICES	1,576,018	including grants of \$	) (Revenue \$	1,264,857)
(Code MIDDLE EAST & N	) (Expenses \$ ORTH AFRICA	123,196	including grants of \$	) (Revenue \$	)
(Code	) (Expenses \$	165,599	ıncludıng grants of \$	) (Revenue \$	)