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SCANNFD JUN 1 5 2012

Form **990**

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)

2010	
91(E. 15) CO (CO)	

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

			dar year, or tax year begin			, 2010, a				, 20			
Ch	eck if a	applicable	C Name of organization Cen	ter for	Innovative	Tech	nolog	Ι Υ	D Employer Id	entification	on Numbe	er	
	Addr	ress change	Doing Business As			_			54-128				
	Nam	ne change	Number and street (or PO bo	ox if mail is not d	lelivered to street addr)		Roon	n/suite	E Telephone n	umber			_
	Initia	al return	2214 Rock Hill F	Road			600		(703) 689-3000				
Γ	Term	nınated	City, town or country			State	ZIP code +	4					
F	Ame	ended return	Herndon			VA	20170)	G Gross receip	ts \$8,	286,7	769.	
Ī	IqqA	lication pending	F Name and address of principa	al officer				_	a group return for			Yes	X No
_		3	Linda E. Gentry 2212 Roci	k Hıli Road Sı	ui Herndon	VA	20170		affiliates included			Yes	No
	Tax-ex	empt status	X 501(c)(3) 501(c) ((a)(1) or	527	It 'No,'	attach a list (see	instructio	ons) —		
		_ ·	w.cit.org	,	<u> </u>			H(c) Group	exemption numbe	, ▶			
		of organization	X Corporation Trust	Association	Other ►	LYe	ear of Form	nation 198	· i		omicile	VA	
		Summa	rv	1 Association 1	Other	1= 10	0110111	ELION IJO	1 W Oldic	or icgai a	orniche	***	
<u> </u>			be the organization's missi	on or most s	ignificant activities	CI	r's m	ıssıon	is to pr	omote	e ecc	onor	11.0
			ent in Virginia									<u></u>	
ຊັ	_	and busi											
2	-			-			. – – –						
Activities & Governance	2 C	Check this bo	x > If the organizatio	n discontinue	ed its operations o	r dispose	ed of mo	ore than 25		sets			
اۋ			iting members of the gover			-12-0			3				
2			dependent voting members			I, line 1t)		4	14			
[of individuals employed in	•	ar 2010 (Part V, Iı	ne 2a)			5				
<u> </u>			of volunteers (estimate if						6	+			
۲			ed business revenue from F		• • •				7				0.
4	bΝ	let unrelated	l business taxable income t	from Form 99	30-T, line 34					b			
									Prior Year		Curren		
,			and grants (Part VIII, line	-					1,170,783		4,5		
1		-	rice revenue (Part VIII, line					3	3 <u>,173,503</u>	_	3,6		
1	0 Ir	nvestment ir	icome (Part VIII, column (A	A), lines 3, 4,	and 7d)			<u> </u>	41,455				904.
1	1 C	Other revenu	e (Part VIII, column (A), Iın	nes 5, 6d, 8c,	, 9c, 10c, and 11e))			189,073				164.
1	2 T	otal revenue	e – add lines 8 through 11	(must equal	Part VIII, column ((A), line	12)	7	,574,814		8,2	86,	769.
1	3 G	Grants and s	ımılar amounts paid (Part I	X, column (A	(), lines 1-3)			ļ					
1	4 B	Benefits paid	to or for members (Part IX	(, column (A)	, line 4)								
	5 S	Salaries, othe	er compensation, employee	e benefits (Pa	art IX, column (A),	lines 5-	10)	3	3,794,657		4,2	50,8	<u>301.</u>
g 1	6a P	Professional	fundraising fees (Part IX, c	olumn (A), li	ne 11e)			- 1	30,000				
Expenses			sing expenses (Part IX, col			236	5,739						
នី ,		Whor over	es (Part IX, column (A), fir	-sc-11-11-1	=16.246	<u> </u>	37 133		3,304,545				
	0 T	otal avnanc	es Add lines 13-17 (myst e	REC		DE)			7,129,202		3,8		
			· II I	1	1	(23)		 			8,1		
	9 R	revenue less	expenses Subtract line 1	1		X ()			445,612				277.
00	· ~		(Dark X 100 16)	MAY 1	l 7 2012 じら	1			ng of Current Yea		End of		
91			(Part X, line 16)		& &	Ĭ			417 222		5,3		
iři			s (Part X, line 26)	000		Ř		-	417,223		2,32		
	2 N	let assets or	fund balances Subtract lin	ne 21/horbil	5el20, U I	4		2	2,882,320		3,0	51,5	<u> 597.</u>
Part	<u> </u>	Signatu	re Block										
Inder	penaltie	es of perjury, I d	eclare that I have examined this ref aver (other than officer) is based or	turn, including ac	companying schedules	and statem	nents, and	to the best of	my knowledge and	belief, it	is true, co	orrect, a	and
- July	Dec	LIGITION OF WHAT	O. Joine, than officery is beset of	7	A milion proparer rias at		.8~						
_			Plike 5 x	- Jell	<u>'</u>					12-			
ign		Signatu	ref of officer	()				Da	ate •				
lere	!		da E. Gentry					CFO					
		Type or	print name and title										
		Print/Type :	preparer's name	Preparer's sign	nature		Date		Check if	PTIN			
aid		self-r	repared						self-employed				
	arer			d				•	1	•			
	Only								Firm's EIN ▶				
	,	, i iiii addii	Herndon	<u> </u>	VA	20170	1						
			•			201/6	,		Phone no			~_	No
1 24	- 100	0 4.00 11	is return with the preparer:	- L	2 /	-1				X	Yes		

Form	990 (2010) Center for Innovative Technology	54-12	8282	0		Page 2
Par	t III Statement of Program Service Accomplishments					
	Check if Schedule O contains a response to any question in this Part III					X
1	Briefly describe the organization's mission					
	CIT's mission:					-
	a) Promote economic development of the Commonwealth by attracting	g <u>and 1</u>	<u>retai</u>	<u>ning</u>	<u></u>	
	See Form 990, Page 2, Part III, Line 1 (continued)	_ _ _				
2	Did the organization undertake any significant program services during the year which were not listed on	the prior				
	Form 990 or 990-EZ?		\sqcup	Yes	X	No
_	If 'Yes,' describe these new services on Schedule O	_		.,		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program serv	ices	Ш	Yes	X	No
_	If 'Yes,' describe these changes on Schedule O	.	Ca	. d	01(0)	(2)
4	Describe the exempt purpose achievements for each of the organization's three largest program services and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and expenses, and revenue, if any, for each program service reported	allocation	is to oth	ners, t	he tot	al
4 8	a (Code) (Expenses \$ 2,037,942. including grants of \$0.) (Fig. 1)	Revenue	\$	14	5,8	<u>44.</u>)
	Entrepreneur Program - CIT recognizes that the availablity of earl					
	critical need of many emerging technology companies by making connection					
	private and federal funding sources. CIT Growth Acceleration Program (GF					
	equity investments in Virginia-based technology and life science compan					
	for achieving rapid growth and generating significant economic retu					alth
	Energy Fund makes seed stage equity investments in Virginia-base					
	that have achieved a "commercially available", revenue-ready stage					
	of sustaining a high-growth business model while generating jobs in Virgin: Assistance Program identifies and accelerates opportunities for Virgin					
	businesses to obtain SBIR, STTR and ATP awards and other government				11103	<u> </u>
	businesses to obtain SBIR, Silk and Air awards and other government	eric_co	iciac			
41	(Code) (Expenses \$1,437,348. including grants of \$) (Fig) (Fig) (Fig) (Fig	Revenue	<u> </u>	1.08	4 . 8:	26.)
	Research and Development Program - CIT brings together public and private		_	•		
	and deploy solutions that not only address regional and national					
	but also produce innovative and marketable solutions. CIT is work	ing wit	h Vi	gin	ia's	ten
	regional technology councils to establish the Commonwealth Innov	ation :	Index	· 		
	a tool to assist the public and private sector decision makers is					
	and statewide planning and investment decisions. In a recent ini		e <u>, C</u> I	T_ha	as_b	<u>een</u>
	called upon to develop a comprehensive R&D strategic roadmap for		<u>-</u>			
	Commonwealth to identify areas worthy of institutional focus and					
	In addition, CIT also develops and executes federally-funded research					ing_
	the areas of defense and national security, renewable energy and	_marine	e_scı	ence	es	
	c (Code) (Expenses \$ 1,310,878. including grants of \$ 0.) (F	Revenue	ς	1 1 1	0 1	
40	Broadband program - The mission of CIT's Broadband program is to "accele					
	growth of Virginia's rural and underserved areas through the app					
	broadband telecommunications." CIT supports the Office of Telework F					
	Assistance, which resides within the office of the Secretary of Techn.					
	is Virginia's designated entity for The American Recovery and Reinvestme					
	and planning activities under a federal grant to expand broadban					
	in communities across the U.S.					
						- -
			_			
40	d Other program services (Describe in Schedule O)	_	0.40	c=^		
	(Expenses \$ 1,698,219. including grants of \$ 0.) (Revenue \$	1,	<u>248,</u>	0/2.)	
46	e Total program service expenses ► 6,484,387.					

			$\overline{}$	
	•	 	Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2	Х	<u> </u>
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		х
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	х	
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 I	6	х	
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		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
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		х
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		х
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			
•	a Did the organization report an amount for land, buildings and equipment in Part X, line 10° If 'Yes,' complete Schedule D, Part VI	11 a		х
ı	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? <i>If 'Yes,' complete Schedule D, Part VII</i>	11 b		_x
•	c 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	11 c		_x
	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	11 d		<u>x</u>
•	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
1	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	11 f		Х
12:	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a		_X
	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	Х	
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a	$\vdash \vdash \vdash$	X
	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Parts I and IV	14b		х
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15		X
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16		_x
	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? If 'Yes,' complete Schedule G, Part I (see instructions)	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		х
	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		Х
20	a Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		_X
ı	b If 'Yes' to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20 b		

Form 990 (2010) Center for Innovative Technology

Part IV Checklist of Required Schedules (continued)

	•		Yes	No
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		X
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 27 If 'Yes,' complete Schedule I, Parts I and III	22		<u>X</u>
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23	х	
24 a	a 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25	24a		_ X
t	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
•	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		
C	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	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		<u>x</u> _
ı	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		_X_
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		<u>x</u>
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		_x
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):			
â	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
ŧ	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		X
•	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		_X_
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		X
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	х	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		Х
a	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 Yes X No			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		X
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		<u>x</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	х	
AA		Form	990 (2010)

Form 990 (2010) Center for Innovative Technology Rarty Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V				. Ш
			Yes	No
1 a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	16		
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 (gambling) winnings to prize winners?	s and reportable gaming	1c		
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	2a	32	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	100 m
b If at least one is reported on line 2a, did the organization file all required federal employment	tax returns?	2b	Х	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see in:		100		11
3a Did the organization have unrelated business gross income of \$1,000 or more during the year	•	3a		Х
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O		3 b		
4a At any time during the calendar year, did the organization have an interest in, or a signature financial account in a foreign country (such as a bank account, securities account, or other financial account.)	or other authority over, a nancial account)?	4a	- T	X
b If 'Yes,' enter the name of the foreign country			- A	11
See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Fi	inancial Accounts	MA		- 35 £
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax	year ⁹	5a		Х
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter	er transaction?	5b		Х
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5c		<u> </u>
6a Does the organization have annual gross receipts that are normally greater than \$100,000, are solicit any contributions that were not tax deductible?	nd did the organization	6a		Х
b If 'Yes,' did the organization include with every solicitation an express statement that such co not tax deductible?	ntributions or gifts were	6 b		
7 Organizations that may receive deductible contributions under section 170(c).		- 	3.4	• 1
a Did the organization receive a payment in excess of \$75 made partly as a contribution and page 2.	artly for goods and	्राप्त से - अस्त्र से		
services provided to the payor?	artiy for goodo artid	7a		Х
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		7b		<u> </u>
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for wh Form 8282?	nich it was required to file	7 c		x
d If 'Yes,' indicate the number of Forms 8282 filed during the year	74	F35	1347	5.25
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal l	henefit contract?	7e	A 24" - GE	X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal bene		7f		X
g If the organization received a contribution of qualified intellectual property, did the organization				
as required?		<u>7g</u>		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the Form 1098-C?	organization file a	7 h	76-120-703-701	Ship South
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting supporting organization, or a donor advised fund maintained by a sponsoring organization, he holdings at any time during the year?	ng organizations. Did the ave excess business	8		X
9 Sponsoring organizations maintaining donor advised funds.				
a Did the organization make any taxable distributions under section 4966?		9a		Х
b Did the organization make a distribution to a donor, donor advisor, or related person?		9b		Х
10 Section 501(c)(7) organizations. Enter				100 mg
a Initiation fees and capital contributions included on Part VIII, line 12	10a			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10Ь			
11 Section 501(c)(12) organizations. Enter	1 1			7.1
a Gross income from members or shareholders	11a			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	116			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of	1 1	12a	- E	300
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b			**************************************
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		- 4	44	·
a is the organization licensed to issue qualified health plans in more than one state?	•	13a	A: 9974	THEFT .
Note. See the instructions for additional information the organization must report on Schedule	e O.			12.6
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	136			, i.
c Enter the amount of reserves on hand	13c	<u>k</u> **.	73	-
14a Did the organization receive any payments for indoor tanning services during the tax year?		14a		Х
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in S	chedule O	14b		

Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Х Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 1a 15 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 1 b 14 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Х officer, director, trustee or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3 Х Did the organization make any significant changes to its governing documents 4 Х since the prior Form 990 was filed? 5 5 Х Did the organization become aware during the year of a significant diversion of the organization's assets? Does the organization have members or stockholders? 6 Х 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7 a X Х 7 b b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8a Х a The governing body? **b** Each committee with authority to act on behalf of the governing body? 8ь Х Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O 9 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10 a 10a Does the organization have local chapters, branches, or affiliates? Х **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 Х 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Х 12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13 b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise 12b Х to conflicts? c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 12c Х 13 Х 13 Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 14 Х 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? Х a The organization's CEO, Executive Director, or top management official 15a 15_b Х b Other officers of key employees of the organization If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16a Х taxable entity during the year? 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 16b organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 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 Another's website X Upon request Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► Linda Gentry 2214 Rock Hill Road, Suite 600 Herndon VA 20170 (703) 689-3035

Form 990 (2010)	Center	for	Innovative	Technology

54-1282820

Page 7

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

Check if Schedule O contains a response to any question in this Part VII

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 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	n nor any r	elated	lorg	anız	zatio	n com	npen	sated any current offi	cer, director, or trustee	e
(A)	(B)	(C)						(D)	(E)	(F)
Name and title	Average		ition (k all t	hat app	ly)	Reportable	Reportable	Estimated
	hours per week (describe hours for related organiza- tions in Schedule O)	ardividi el trastee or director	anstitutional toustee	Offic et	Key employee	Higl est coinตุสกระกัยช่ employee	Fusnei	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(1) Dan Bannister										
Chairman	2.00	X		Х	,_			0.	0.	0.
(2) Charles W. Steger Vice Chairman	2.00	Х		Х				0.	0.	0.
(3) Ted Cahall										
Director	1.00	х						0.	0.	0.
(4) Jim Cheng										
Director	1.00	Х						0.	0.	0.
(5) Jim Duffey Director	1.00	х						0.	0.	0.
(6) Eric Hansen										
Director	1.00	х						0.	0.	0.
(7) Wayne Hunter										
Director	1.00	х						0.	0.	0.
(8) Ray O. Johnson										
Director	1.00	Х						0.	0.	0.
(9) Hooks Johnston										
Director	1.00	Х						0.	0.	0.
(10) Rick Kapani										
Director	1.00	Х						0.	0.	0.
(11) Suzanne H. King								·	,	
Director	1.00	Х						0.	0.	0.
(12) Alan G. Merten										
Director	1.00	Х						0.	0.	0.
(13) Gerard Robinson										
Director	1.00	Х						0.	0.	0.
(14) Linwood H. Rose										
Director	1.00	Х						0.	0.	0.
(15) Lydia W. Thomas										
Director	1.00	Х						0.	0.	0.
(16) Peter J. Jobse										
President & CEO	40.00		Ш	Х				285,951.	0.	53,546.
(17) Linda E. Gentry Chief Financial Officer	40.00			Х				225,034.	0.	39,970.
BAA	·		EEA		12	21/10				Form 990 (2010)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensate									oloyees		<u>nt)</u>	
· (A)	(B)	.		(0	•			(D)	(E)		(F)	
Name and title	Average hours per week (describe hours for related organizations in Sch O)	Individual trustee	institutional trustee			ন Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	amou com fr org an	stimated unt of other o	her on n d
(18) Paul McGowan												
VP, Consulting Services	40.00				Х			283,826.	0.		50,2	<u> 238.</u>
(19) Tom Weithman VP, Entrepreneurship	40.00				х			195,169.	0.		42,2	221.
VP_ Research Investment	40.00				х			157,668.	0.		32,8	348.
(21) Louis Mc Donald CTO/CIO	40.00					х		164,700.	0.			965.
(22) Henry Connors VP, Gov't & Public Affairs	40.00			-		х	_	155,200.	0.			559.
(23) Denise Baken	10,00							133,12001				
Dir, Biodefense Programs	40.00				İ	х		148,780.	0.	.	37,6	658.
(24) Prabhat Agarwal								·				
Dir, Consulting Services	40.00					X		141,307.	0.	.]	37,5	561.
(25) Karen Jackson												
VP, Broadband Programs	40.00					Х		133,641.	0.	<u> </u>	23,9	<u>934.</u>
_(26)												
(27)												
(28)				·								
(29)												
1 b Sub-total	·							1,891,276.	0.	. 3	90,	500.
c Total from continuation sheets to Part VII, Secti	on A						•					
d Total (add lines 1b and 1c)							>	1,891,276.	0.			<u>500.</u>
2 Total number of individuals (including but not lim from the organization ► 13	nited to thos	e list	ed a	abov	/e) v	vho	rece	eived more than \$	100,000 in reportat	le comp	ensatı	on
											Yes	No
3 Did the organization list any former officer, direct on line 1a? If 'Yes,' complete Schedule J for suc	tor or truste	e, ke	ey er	mple	oyee	e, or	hıg	hest compensated	employee	3		x
•				4			- 4 h o .					
	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	Х		
for services rendered to the organization? If '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 J for such person 5 X											
Section B. Independent Contractors												
Complete this table for your five highest compen compensation from the organization	sated indep	ende	ent c	ontr	acto	ors t	hat	received more tha	n \$100,000 of			
(A) Name and business add	dress							(B) Description (of services	Compe	C) ensatio	n

	(A) Name and business address	(B) Description of services	(C) Compensation		
SAIC	1710 SAIC Drive McLean	VA	22102	subcontractor services	945,793.
Hunton & William	ns LLP 1751 Pinnacle Dr Ste 1700 McLean	VA	22102	legal services	325,465.
VITA	11751 Meadowville Lane Chester	VA	23836	IT services	291,639.
Reed Smith	LLP 3110n Fairview Park Ste 1400 Falls Churc	ch VA	22042	legal services	153,404.
Holland & Kn	ight 11050 Lake Underhill Rd #864084 Orlando	FL	32825	consulting services	150,000.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶ 9

Pai	rt VIII Statement of Revenue	-			
	•	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
S.	1a Federated campaigns 1a		Toveride	<u>-</u>	012,010,01011
ANTS	b Membership dues 1b				
R S	c Fundraising events 1c				j
FIS	d Related organizations 1 d				
5.₹	e Government grants (contributions) 1e 4,580,956.				
S S	1 all 11 all 12				
돌	f All other contributions, gifts, grants, and similar amounts not included above 1f 17,000.				
E 0	g Noncash contributions included in lns 1a-1f: \$				
Ş₹	h Total. Add lines 1a-1f	4,597,956.			<u> </u>
핕	Business Code	1,337,73301		· · · · · · · · · · · · · · · · · · ·	
Ē	2a Seminars and workshops 900099	9,495.	9,495.	0.	0.
8	b Federal and state awards 900099	3,609,950.	3,609,950.	0.	0.
) E	c	· · · · · · · · · · · · · · · · · · ·	, , , , , , , , , , , , , , , , , , , ,		
ER	d	<u> </u>			
ξ	e				
PROGRAM SERVICE REVENUE CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	f All other program service revenue				
꾩	g Total. Add lines 2a-2f	3,619,445.			
	3 Investment income (including dividends, interest and	•			
	other similar amounts)	28,904.	0.	0.	28,904.
	4 Income from investment of tax-exempt bond proceeds				
	5 Royalties	40,464.	40,464.	0.	0.
	(i) Real (ii) Personal				
	6a Gross Rents				
l	b Less rental expenses				
	c Rental income or (loss)				
i	d Net rental income or (loss)				
	7 a Gross amount from sales of assets other than inventory (i) Securities (ii) Other				
	b Less cost or other basis				
	and sales expenses				
	c Gain or (loss)				
	d Net gain or (loss)				
NUE	8a Gross income from fundraising events (not including \$				
OTHER REVENU	of contributions reported on line 1c)				
8	See Part IV, line 18				
Ĕ	b Less direct expenses b				
Ĭ	c Net income or (loss) from fundraising events				
	9a Gross income from gaming activities. See Part IV, line 19				
	b Less direct expenses b	· ·			
İ	c Net income or (loss) from gaming activities				
	10a Gross sales of inventory, less returns and allowances a				
	b Less cost of goods sold b				
	c Net income or (loss) from sales of inventory				
	Miscellaneous Revenue Business Code				
	11a				
	b				
	С				
	d All other revenue				
	e Total. Add lines 11a-11d				
	12 Total revenue. See instructions	8,286,769.	3,659,909.	0.	28,904.

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

Do .	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21		expenses	general expenses	expenses
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,428,831.	227,039.	1,040,563.	161,229.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	2,027,078.	788,613.	1,174,793.	63,672.
8	Pension plan contributions (include	, , , , , , , , , , , , , , , , , , , ,			<u> </u>
Ü	section 401(k) and section 403(b) employer contributions)	260,841.	0.	260,841.	0.
9	Other employee benefits	331,431.	0.	331,431.	0.
10	Payroll taxes	202,620.	0.	202,620.	0.
11	Fees for services (non-employees)				
i	a Management				
ı	Legal	37,711.	0.	37,711.	0.
(Accounting	37,041.	0.	37,041.	0.
(i Lobbying	62,500.	0.	62,500.	0.
(Professional fundraising services. See Part IV, line 17				
1	Investment management fees				
ę	Other	33,434.	0.	33,434.	0.
12	Advertising and promotion				
13	Office expenses	54,261.	0.	54,261.	0.
14	Information technology	312,691.	0.	312,691.	0.
15	Royalties				
16	Occupancy				
17	Travel	9,551.	0.	9,551.	0.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
	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)	23,137.	0.	23,137.	0.
á	R&D program	757,660.	757,660.	0.	0.
	Entreprenuer program	896,025.	896,025.	0.	0.
	: Innovation Center_	172,977.	172,977.	0.	0.
	Communications & Marketing	200,882.	0.	200,882.	0.
	Allocation of Fringe, OH & GA	0.	2,448,933.	-2,448,933.	0.
	All other expenses	1,268,821.	1,193,140.	63,843.	11,838.
	Total functional expenses. Add lines 1 through 24f	8,117,492.	6,484,387.	1,396,366.	236,739.
26	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				
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	•			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		500.	1	500.
	2	Savings and temporary cash investments		2,632,824.	2	4,856,403.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		587,38 <u>2</u> .	4	381,442.
	5	Receivables from current and former officers, directors and highest compensated employees Complete Part II			5	
	6	Receivables from other disqualified persons (as define persons described in section 4958(c)(3)(B), and contril sponsoring organizations of section 501(c)(9) voluntary organizations (see instructions)	buting employers and		6	
Ą	7	Notes and loans receivable, net			7	_
SETS					8	
Ţ		Inventories for sale or use		70 027	9	20 502
•	9	Prepaid expenses and deferred charges	1 1	78,837.	9	38,503.
1	10a	Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D	10a			
	b	Less accumulated depreciation	10b		10 c	
1	11	Investments — publicly traded securities		11		
1	12	Investments – other securities See Part IV, line 11		12		
1	13	Investments - program-related See Part IV, line 11		0.	13	0.
1	14	Intangible assets			14	
1	15	Other assets See Part IV, line 11			15	97,300.
	16	Total assets Add lines 1 through 15 (must equal line 3	34)	3,299,543.	16	5,374,148.
1	17	Accounts payable and accrued expenses		298,451.	17	349,965.
1	18	Grants payable			18	
_ 1	19	Deferred revenue		0.	19	1,846,430.
• •	20	Tax-exempt bond liabilities			20	
A B	21	Escrow or custodial account liability Complete Part IV	/ of Schedule D		21	
	22	Payables to current and former officers, directors, trust highest compensated employees, and disqualified persof Schedule L	tees, key employees, sons Complete Part II		22	
E	23	Secured mortgages and notes payable to unrelated thin	rd parties		23	
- 1		Unsecured notes and loans payable to unrelated third	•		24	
		Other liabilities Complete Part X of Schedule D	parties	118,772.	25	126,156.
- 1		Total liabilities. Add lines 17 through 25		417,223.	26	2,322,551.
N E T		Organizations that follow SFAS 117, check here ▶	X and complete lines	117,223.		2,322,331.
₹		27 through 29 and lines 33 and 34.				
ASSET S	27	Unrestricted net assets		2,212,320.	27	2,446,597.
Ĕ 2	28	Temporarily restricted net assets		670,000.	28	605,000.
	29	Permanently restricted net assets	_		29	
R F		Organizations that do not follow SFAS 117, check her lines 30 through 34.	re ► and complete			
F DZD	30	Capital stock or trust principal, or current funds		-	30	
		Paid-in or capital surplus, or land, building, or equipme	ent fund		31	
֝֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓		Retained earnings, endowment, accumulated income,			32	
ฉิ		Total net assets or fund balances.		2,882,320.	33	3,051,597.
Ē :		Total liabilities and net assets/fund balances		3,299,543.	34	5,374,148.

Form **990** (2010)

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Part XII Reconciliation of Net Assets			
Check if Schedule O contains a response to any question in this Part XI			\Box
1 Total revenue (must equal Part VIII, column (A), line 12)	1	8,286,	<u>769.</u>
2 Total expenses (must equal Part IX, column (A), line 25)	2	8,117,	<u>492.</u>
3 Revenue less expenses. Subtract line 2 from line 1 .	3	169,	277.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).	4	2,882,	320.
5 Other changes in net assets or fund balances (explain in Schedule O)	5		
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	3,051,	<u>597.</u>
Part XIII Financial Statements and Reporting			
Check if Schedule O contains a response to any question in this Part XII			Х
1 Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O		Yes	No
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	х
b Were the organization's financial statements audited by an independent accountant?		2b X	T
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight 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	Х
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were separate basis, consolidated basis, or both Separate basis X Consolidated basis Both consolidated and separate basis	e issued on a		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in Audit Act and OMB Circular A-133?	n the Single	3a	х
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the or audits, explain why in Schedule O and describe any steps taken to undergo such audits	e required audit	3 b	
BAA		Form 990	(2010)

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SCHEDULE A (Form 990 or 990-EZ)

Total

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.

OMB No 1545-0047 2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. Name of the organization Employer identification number Center for Innovative Technology 54-1282820 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) 1 A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 2 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described X in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) q An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions – subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or 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 11 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 If the organization received a written determination from the IRS that 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? g Yes No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11 g (i) (ii) A family member of a person described in (i) above? 11 g (ii) A 35% controlled entity of a person described in (i) or (ii) above? 11 g (iii) Provide the following information about the supported organization(s) h (v) Did you notify the organization in (i) Name of supported (ii) EIN (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) (iv) Is the (vi) Is the organization in column (i) organized in the (vii) Amount of support organization in column (i) listed in e organization column (i) of your support? your governing document? Yes No Yes No Yes No (A) (B) (D) **(E)**

Schedule A (Form 990 or 990-EZ) 2010 Center for Innovative Technology 54-1282820 Part II Support Schedule for Organizations Described in Sections 170(bX1XAXiv) and 170(bX1XAXvi)

· (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)

Sec	tion A. Public Support						
begi	ndar year (or fiscal year nning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include 'unusual grants ')	6,580,857.	6,148,969.	5,890,955.	4,170,783.	4,597,95 <u>6</u> .	27,389,520.
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	6,580,857.	6,148,969.	5,890,955.	4,170,783.	4,597,956.	27,389,520.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						27,472.
6	Public support. Subtract line 5 from line 4						27,362,048.
Sec	tion B. Total Support						
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4	6,580,857.	6,148,969.	5,890,955.	4,170,783.	4,597,956.	27,389,520.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	359,798.	355,332.	170,824.	151,658.	69,368.	1,106,980.
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)	50,000.	1,033.		78,870.		129,903.
11	Total support. Add lines 7 through 10						28,626,403.
12	Gross receipts from related activ	ities, etc (see insti	ructions)			12	12,205,293.
	First five years. If the Form 990 organization, check this box and	stop here	·	d, third, fourth, or	fifth tax year as a	section 501(c)(3)	▶ 🗍
	tion C. Computation of Pu					1	05.504
	Public support percentage for 20 Public support percentage from 2	•		e 11, column (f))		14 15	95.58 % 93.86%
	,, ,	,	,	au an leas 10	1 Alban Ive - 1 A 22	•	
16 a	33-1/3% support test – 2010. If t and stop here. The organization				the line 14 is 33-	·1/3% or more, ch	eck this box
t	b 33-1/3% support test – 2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						
17 a	17a 10%-facts-and-circumstances test — 2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.						
t	• 10%-facts-and-circumstances te or more, and if the organization is organization meets the 'facts-and	meets the 'facts-ar d-circumstances' i	nd-circumstances' test The organiza	test, check this b ition qualifies as a	oox and stop here. a publicly supporte	. Explain in Part I\ ed organization	/ how the
18 BAA	Private foundation. If the organiz	zation did not ched	ck a box on line 1	3 <u>, 16a, 16b, 17a,</u>	_		ructions

Schedule A (Form 990 or 990-EZ) 2010 Center for Innovative Technology 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.)

Sec	tion A. Public Support						
	dar year (or fiscal yr beginning in) 🟲	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include any 'unusual grants')						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or						
3	facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7 a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
ł	a Amounts 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						
(Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						
Sec	tion B. Total Support						
Calen	dar year (or fiscal yr beginning in) 🟲	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
10 a	Amounts from line 6 Gross income from interest, 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 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add Ins 9, 10c, 11, and 12)						
14	First five years. If the Form 990 organization, check this box and			d, third, fourth, or	fifth tax year as a	section 501(c)(3)	▶ □
	tion C. Computation of Pul					, , , , , , , , , , , , , , , , , , , 	
	Public support percentage for 20		-	13, column (f))		15	
	Public support percentage from 2					16	
	tion D. Computation of Inv						
17	Investment income percentage for	or 2010 (line 10c,	column (f) dıvıded	by line 13, colum	nn (f))	17	
18	Investment income percentage fr	om 2009 Schedule	e A, Part III, line 1	7		18	8
	33-1/3% support tests — 2010. If is not more than 33-1/3%, check	this box and stop	here. The organiz	ration qualifies as	a publicly suppor	ted organization	▶ [_]
	33-1/3% support tests — 2009. If line 18 is not more than 33-1/3%	, check this box a	nd stop here. The	organization qua	lifies as a publicly	supported organiza	/3%, and ation
20	Private foundation. If the organiz	ation did not ched	ck a box on line 14	1, 19a, or 19b, ch	eck this box and s	ee instructions	<u> </u>

Schedule A (Form 990 or 990-EZ) 2010 Center for Innovative Tec	chnology 54-1282820 Page
Part IV Supplemental Information. Complete this part to provide Part II, line 17a or 17b; and Part III, line 12. Also comple (See instructions).	the explanations required by Part II, line 10; te this part for any additional information.
Other Income Part II, Line 10	
Description: Gain on GAP Fund repayment	
2006: 50000.	
Description: sublease rental income	
2007: 1033.	
Description: Gain on GAP Fund investment	
2009: 78870.	
	
	

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

2010

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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.

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

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

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

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

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

• 5	Section 501(c)(4), (5), or (6) or	ganizations Complete Part III			
Name	of organization			Employer identification	ation number
	<u>ter for Innovative</u>			54-128282	
Par	Complete if the or	rganization is exempt under section	on 501(c) or is a	section 527 organia	zation.
1	Provide a description of the o	organization's direct and indirect political ca	impaign activities in F	Part IV	
2	Political expenditures			► \$	
3	Volunteer hours				
Par	Complete if the o	rganization is exempt under section	on 501(c)(3).		
1	Enter the amount of any exci	se tax incurred by the organization under s	ection 4955	► \$	
2	Enter the amount of any exci	▶ \$	_		
3	If the organization incurred a	section 4955 tax, did it file Form 4720 for	this year?		Yes No
4 a	Was a correction made?				Yes No
b	If 'Yes,' describe in Part IV				
Par	Complete if the o	rganization is exempt under section	on 501(c), excep	t section 501(c)(3).	
1	Enter the amount directly exp	pended by the filing organization for section	527 exempt function	activities ►\$	
2	Enter the amount of the filing function activities	organization's funds contributed to other c	organizations for section	on 527 exempt ► \$	
3	Total exempt function expendine 17b	ditures Add lines 1 and 2 Enter here and o	on Form 1120-POL,	▶\$	<u></u>
4	Did the filing organization file	Form 1120-POL for this year?			Yes No
5	organization made payments	and employer identification number (EIN) o For each organization listed, enter the amons received that were promptly and directly action committee (PAC) If additional space	nount haid from the fil	ing organization's funds	Also enter the
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds if none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2010

Schedule C (Form 990 or 990-EZ) 20	10Center for	Innovative Techno	ology	54-128	2820 Page
	the organizatio	n is exempt under se			
	· · · · · · · · · · · · · · · · · · ·	ngs to an affiliated group	 		
—	5 5	cked box A and 'limited con	ntrol' provisions apply		
(The term		ring Expenditures	ed.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditi	ures to influence put	olic opinion (grass roots lob	phying)		
, , ,	•	egislative body (direct lobby	, ,,		
c Total lobbying expenditi		• • • • • •	,9,		
d Other exempt purpose of	•	,			
e Total exempt purpose e	•	es 1c and 1d)			
f Lobbying nontaxable an both columns	nount Enter the am	ount from the following tabl	le ın		
If the amount on line 1e, col	umn (a) or (b) is .	The lobbying nontaxable a	mount is		-,
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 \$500,000	-	
Over \$1,000,000 but not over \$	\$1,500,000	\$175,000 plus 10% of the excess	over \$1,000,000		
Over \$1,500,000 but not over \$	17,000,000	\$225,000 plus 5% of the excess of	over \$1,500,000		
Over \$17,000,000		\$1,000,000			
g Grassroots nontaxable a	amount (enter 25%	of line 1f)			
h Subtract line 1g from lir	ne 1a If zero or less	, enter -0-			
i Subtract line 1f from lin	e 1c If zero or less,	enter -0-			
j If there is an amount of section 4911 tax for this	her than zero on eit	ner line 1h or line 1i, did th	e organization file For	m 4720 reporting	☐Yes ☐No
(Son	ne organizations the	4-Year Averaging Period L at made a section 501(h) el ns below. See the instructi	lection do not have to	complete all of the five gh 2f.)	
- · · · · · · · · · · · · · · · · · · ·	Lobi	oying Expenditures During	4-Year Averaging Pe	riod	
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					

f Grassroots lobbying expenditures

BAA

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

Schedule **C** (Form 990 or 990-EZ) 2010

Schedule C (Form 990 or 990-EZ) 2010 Center for Innovative Technology 54-1282820

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

	(a)			(b)	
	Yes	No	An	nount	
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				1	
a Volunteers?		Х	ئا ئالىكىي		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Х			· Sey	20
c Media advertisements?		х			
d Mailings to members, legislators, or the public?		Х			
e Publications, or published or broadcast statements?		Х			
f Grants to other organizations for lobbying purposes?		Х		_	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	Х			130,4	138.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Х			
i Other activities? If 'Yes,' describe in Part IV		Х		-	
j Total Add lines 1c through 1i				130,4	138.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Х	1 1 1 1 2 2 3 3 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		Q 0. E
b If 'Yes,' enter the amount of any tax incurred under section 4912	1		g :	-10 42 - 4	
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?		46			
Partill A Complete if the organization is exempt under section 501(c)(4), section 50	1(cY5)	Or	64		
section 501(c)(6).	.(0)(0)	, 0.			
				Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?			1	1.03	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	1	
			3	+ - 1	
3 Did the organization agree to carryover lobbying and political expenditures from the prior year? Partill B: Complete if the organization is exempt under section 501(c)(4), section 50	1/cVE\				
section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered 'No' OR if P is answered 'Yes.'	art III-	A, lin	e 3		
1 Dues, assessments and similar amounts from members		1			
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		· ·			
a Current year		2a			
b Carryover from last year		2b			
c Total		2с			
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 exces does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polit expenditure next year?	s ical	4			
5 Taxable amount of lobbying and political expenditures (see instructions)		5			
Partily Supplemental Information					
Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, an Also, complete this part for any additional information.	id Part II	I-B, lin	e 1ı.		
Pt II-B Line 1i The Center for Innovative Technology engaged staff	_to_w	ork_	with_		
Holland & Knight to assist with the strategic and	<u>tacti</u>	cal_	educat	<u>ion</u> _	- – –
to present CIT's performance metrics and upcoming	<u>initi</u>	<u>ativ</u>	<u>'es</u>		· – –
to officials in the Virginia General Assembly and	<u>in Co</u>	ngre	ss		- – –
To fulfill its statutory obligations to the Common	<u>wealt</u>	h to	searc	<u>h</u>	- – –
for and secure federal funding opportunities. CIT	staff	end	aged		

Schedule C (Form 990 or 990 EZ) 2010 Center for Innovative Technology	54-1282820	Page 4
Schedule C (Form 990 or 990-EZ) 2010 Center for Innovative Technology Part W Supplemental Information (continued)		
Holland & Knight for advice and assistance		
		. -
		.
		.
		·
		.
		.
		. – – – – -
		-
		
		 -
		
		· – – –

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2010

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection Employer identification number

Ce	nter for Innovative Technology		54-1282820
		Advised Funds or Other Similar Fur	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	1.	
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year	605,000.	
5	Did the organization inform all donors and don funds are the organization's property, subject t		nor advised X Yes No
6	Did the organization inform all grantees, donor used only for charitable purposes and not for the purpose conferring impermissible private bene	ne benefit of the donor or donor advisor, or for fit?	any other X Yes No
Pa	rt II Conservation Easements. Compl	ete if the organization answered 'Yes	to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by	the organization (check all that apply)	
	Preservation of land for public use (e.g., re	ecreation or education) Preservation	of an historically important land area
	Protection of natural habitat	Preservation	of a certified historic structure
	Preservation of open space	_	
2	Complete lines 2a through 2d if the organization last day of the tax year	n held a qualified conservation contribution in t	the form of a conservation easement on the
			Held at the End of the Tax Year
	a Total number of conservation easements		2a
I	b Total acreage restricted by conservation easen	nents	2b
	c Number of conservation easements on a certifi	ed historic structure included in (a)	2c
	d Number of conservation easements included in structure listed in the National Register	(c) acquired after 8/17/06, and not on a historic	2d
3	Number of conservation easements modified, t tax year ►	ransferred, released, extinguished, or terminate	ed by the organization during the
4	Number of states where property subject to cor	nservation easement is located >	
5	Does the organization have a written policy regard enforcement of the conservation easement	arding the periodic monitoring, inspection, han is it holds?	dling of violations, Yes No
6	Staff and volunteer hours devoted to monitoring	g, inspecting, and enforcing conservation easer	ments during the year
7	Amount of expenses incurred in monitoring, in: \$	specting, and enforcing conservation easement	s during the year
8	Does each conservation easement reported on $170(h)(4)(B)(i)$ and section $170(h)(4)(B)(ii)$?	line 2(d) above satisfy the requirements of sec	tion Yes No
9	In Part XIV, describe how the organization repr include, if applicable, the text of the footnote to conservation easements	orts conservation easements in its revenue and the organization's financial statements that de	expense statement, and balance sheet, and escribes the organization's accounting for
Pa	Organizations Maintaining Colle Complete if the organization answ	ctions of Art, Historical Treasures, or wered 'Yes' to Form 990, Part IV, line	r Other Similar Assets. 8.
1:	If the organization elected, as permitted under art, historical treasures, or other similar assets in Part XIV, the text of the footnote to its finance.	held for public exhibition, education, or research	ue statement and balance sheet works of ch in furtherance of public service, provide,
ĺ	 If the organization elected, as permitted under historical treasures, or other similar assets held following amounts relating to these items 		
	(i) Revenues included in Form 990, Part VIII,	ine 1	> \$
	(ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of an amounts required to be reported under SFAS 1	, historical treasures, or other similar assets fo 16 (ASC 958) relating to these items	r financial gain, provide the following
á	Revenues included in Form 990, Part VIII, line	1	- \$
1	Assets included in Form 990, Part X		▶\$

Schedule D (Form 990) 2010 Cente				54-12			
Pant III Organizations Mainta	ining Collecti	ons of Art, Histo	orical Treasures, o	r Other Similar As	sets (continued)		
3 Using the organization's acquisiti items (check all that apply)	on, accession, an	_		that are a significant u	se of its collection		
a Public exhibition			or exchange programs				
b Scholarly research		e 📙 Other					
	- Commence of the commence of						
4 Provide a description of the organ Part XIV5 During the year, did the organizar		•	•	, , ,	e in		
5 During the year, did the organizar assets to be sold to raise funds re	ather than to be r	naintained as part o	, filstorical treasures, or f the organization's coll	ection?	☐ Yes ☐ No		
Part IV Escrow and Custodia 9, or reported an amo	l Arrangemen unt on Form 9	ts. Complete if 990, Part X, line	organization answe 21.	ered 'Yes' to Form	990, Part IV, line		
1 a Is the organization an agent, trus included on Form 990, Part X?				er assets not	Yes No		
b If 'Yes,' explain the arrangement	in Part XIV and o	omplete the following	ng table	<u> </u>			
- Danisana halasaa					Amount		
c Beginning balance				1c			
d Additions during the year				1d			
e Distributions during the yearf Ending balance				1e 1f			
2a Did the organization include an a	mount on Form 9	On Part Y line 212		111	Yes No		
b If 'Yes,' explain the arrangement		50, Fart X, line 21:					
Part V Endowment Funds. Co		organization an	swered 'Yes' to For	rm 990 Part IV Ju	ne 10		
	(a) Current year				1		
1 a Beginning of year balance	, , , , . , . , . , . , . , . ,	(.,,,	(-,,				
b Contributions							
c Net investment earnings, gains, and losses							
d Grants or scholarships							
 Other expenditures for facilities and programs 							
f Administrative expenses							
g End of year balance					_		
2 Provide the estimated percentage	-	balance held as.					
a Board designated or quasi-endow		₩					
b Permanent endowment ►							
c Term endowment ►	₩						
3a Are there endowment funds not in organization by	n the possession	of the organization t	hat are held and admın	istered for the	Yes No		
(i) unrelated organizations					3a(i)		
(ii) related organizations					3a(ii)		
b If 'Yes' to 3a(II), are the related o	-	•			3b		
4 Describe in Part XIV the intended				_			
Part VI Land, Buildings, and				r	T		
Description of investment	(a)	Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value		
1 a Land	ļ						
b Buildings	\vdash						
c Leasehold improvements							
d Equipment e Other							
Total. Add lines 1a through 1e (Column	(d) must equal F	form 990 Part Y oo	lumn (R) line 10(c))	<u> </u>	 		
BAA	. Jay musi equal I	550, 1 att N, CO	(D), mic 10(c))		edule D (Form 990) 2010		
				30	\		

TEEA3302 12/20/10

Total. (Column (b) must equal Form 990, Part X, column (B) line 25)

126,156.

^{2.} FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

Schedule D (Form 990) 2010 Center for Innovative Technol	logy	54-1282820	Page 4
Part XI Reconciliation of Change in Net Assets from Form 990 to Audite	ed Financial Statements		
1 Total revenue (Form 990, Part VIII, column (A), line 12)			
2 Total expenses (Form 990, Part IX, column (A), line 25)			
3 Excess or (deficit) for the year Subtract line 2 from line 1			
4 Net unrealized gains (losses) on investments			
5 Donated services and use of facilities			
6 Investment expenses			
7 Prior period adjustments			
8 Other (Describe in Part XIV)			
9 Total adjustments (net) Add lines 4 through 8			
10 Excess or (deficit) for the year per audited financial statements Combin			
Part XII Reconciliation of Revenue per Audited Financial St		ue per Return	
1 Total revenue, gains, and other support per audited financial statements		1 T	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12	اما		
a Net unrealized gains on investments	2a		
b Donated services and use of facilities	2b		
c Recoveries of prior year grants	2c		
d Other (Describe in Part XIV)	2d		
e Add lines 2a through 2d		2e	_
3 Subtract line 2e from line 1	1 1	3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1		334	
a Investments expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIV)	4b		
c Add lines 4a and 4b	10)	4c	
Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, Iii Part XIII Reconciliation of Expenses per Audited Financial S		<u>1 </u>	
Total expenses and losses per audited financial statements	Julianienies Willi Expe	1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		125.	
a Donated services and use of facilities	2 a	B O MA	
b Prior year adjustments	2 b		
c Other losses	2c		
d Other (Describe in Part XIV)	2 d		
e Add lines 2a through 2d		2 e	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		2000	
a Investments expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIV)	4b		
c Add lines 4a and 4b		4c	
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I,	line 18)	5	
Part XIV Supplemental Information			
Complete this part to provide the descriptions required for Part II, lines 3, 5, a Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Pai any additional information		4, Part IV, lines 1b and 2b, complete this part to provide	·
Sch D, Part 1 The taxpayer meets the literal	_definition_of_a	Donor Advised Fund	1
We meet_all_requirements_of_the	e_three-prong_test	t; therefore, we ar	e_not
subject to the excise tax pena	alties under secti	ion 4966 and 4967 c	of_the_
Internal Revenue Code of 1986,	as amended. The	e donor does not co	ntrol_
the distribution of investment	s of the fund.		 -
·	· 		

Schedule D (Form 990) 2010 Center for innovative rechnology	54-1282820	Page 5
Part XIV Supplemental Information (continued)		
· 		
	-	
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		-
		
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- 	- -	
·	-	
	-	
	-	
		
		

SCHEDULE J (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information

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

Complete if the organization answered 'Yes' to Form 990, Part IV, line 23.
 Attach to Form 990.
 See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization

Center for Innovative Technology

Part I Questions Regarding Compensation

Employer identification number

54-1282820

	The state of the s		V	
1	a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		Yes	No
	First-class or charter travel Housing allowance or residence for personal use			l
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees	ŀ		
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
	T Proceeding account Transfer to the process (e.g., maid, channed, cher)			
	helf amount the house out to the extended of the control of the co	ŀ		
	b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain	1 b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply			
	X Compensation committee X Written employment contract			
	X Independent compensation consultant X Compensation survey or study			ĺ
	X Form 990 of other organizations X Approval by the board or compensation committee			Ì
	pprovided by the board of compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
	a Receive a severance payment or change-of-control payment from the organization or a related organization?	4a		Х
	b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
	c Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
	a The organization?	5a		X
	b Any related organization?	5b		Х
	If 'Yes' to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
	a The organization?	6a		Х
	b Any related organization?	6b		Х
	If 'Yes' to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If 'Yes,' describe in Part III	7	х	
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If 'Yes,' describe in Part III	8		X
9	If 'Yes' to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	ا ۵		

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2010

Schedule J (Form 990) 2010 Center for Innovative Technology

Parella Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

Page 2

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

	Brookloom	OSIM 0001 20/pas 6 /W 30 amobileord (a)	204000000000000000000000000000000000000				Total Control Control Control
(A) Name	(f) Base compensation	(ii) Bonus and incentive		other deferred compensation	benefits	(E) 10tal of Columns (B)(I)-(D)	reported in prior Form 990 or
	(i) 234,000.		7,49	35,10			0
1 Peter J. Jobse	0	0	0	0.0	 	 	0.
	$0_{182,189}$	40,435.	2,410.	27,328.	12,642.	265,004.	0
2 Linda E. Gentry (ii)		0 0	00		l 1]]	0.
	$0^{-211,946}$	70,560.	$\frac{1}{2}$	31,792.	18,446.	334,064.	.0
3 Paul McGowan		00	0)]]]		0.
	(I) 158,500.	35,178.	1,491.	23,775.	18,446.	237,390.	0.
4 Tom Weithman		0	0		 		0.
	0 134,706.	21,471.	1,491.	20,206.	12,642.	190,516.	0.
5 Nancy Vorona		00					
	0142,152	21,05	1,491.	$-\frac{21}{323}$	12,642.	198,665.	.0
6 Louis Mc Donald		0	00				
	0134,085.	29,61			18,446.	193, 759.	.0.
7 Henry Connors		0					
	$0_{133,261}$	13,151.	2,368.	19,115.	18,446.	186,341.	 - - - - - - - -
8 Denise Baken	(ii) 0.						0.
	$(0)_{127.430.}$	12,663.	1,214.	17,171.		165,311.	
9 Prabhat Agarwal (ii)		0	0				0.
	0114,006	18,316.	1,319.	19,212.	18,446.	171,299.	0
10 Karen Jackson		0	0				0.
	0	1 1 1 1 1	 	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!	1 1 1 1	
11	(ii)						
	0	1 1 1 1 1 1	1 1 1 1 1			1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
12	(E)						
	0	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
13	(ii)						
	0] 	 	 	 	 	
14	(ii)						
	0	 	 	 	 	! ! ! !	
15							
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	(9)						
ВАА			TEEA4102 07/2	07/20/10		Sche	Schedule J (Form 990) 2010

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2010

Department of the Treasury Internal Revenue Service Name of the organization

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

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

Employer identification number

Center for Innova	tive Technology	54-1282820
Pt_VI-A, Line_4_	The By-Laws of the Center for Innovative Techno	logy state that the
	Board of Directors shall be those persons who are d	irectors of the Innovation
	and Entrepreneurship Investment Authority as provide	d in Section 2.2-2220 of the
	Code of Virginia (Code). In April 2011, Section 2.2-	2220 of the Code was amended
	to increase the number of board members from 13	to 15.
Pt_VI-B, Line_11a	The review process is comprised of four steps:	·
	1) The CFO reviewed Form 990 on 3/22/2012, by g	oing through each line
	of the return and investigating the meaning of	questions by
	reviewing the instructions and other outside do	cumentation.
	2) Form 990 was reviewed by outside legal couns	el who specializes
	in IRS reporting.	
	3) The President and CEO of CIT reveiwed Form 9	90
	4) Form 990 was sent the CIT Board of Directors	by the CFO,
	requesting comments and guestions.	
Pt_VI-B, Line 12c	All CIT employees provide a Financial Disclosure	e Statement annually.
	The statement includes the name of any organization	tion that CIT
	works with in which the employee holds a securi	ty_or_equity_interest,
	is a director or officer, or has received any g	ifts, payments or
	any type of compensation of more than a nominal	value
	In addition, the President is required to notify	the chairman of the Board
	of Directors in writing of all affiliations with	h any individual
	or organization that solicits CIT services.	
	The directors provide a Financial Disclosure Sta	atement annually to
	the Secretary of the Commonwealth of Virginia.	The statement includes
	information regarding personal and business fina	ancial interests.
Pt VI-B, Line 15	The compensation of the President and CEO is set	t by the Board of

Schedule O (Form 990 or 990-EZ)	2010	Page 2
Name of the organization Center for Innovative	e Technology	Employer identification number $54-1282820$
Dir	rectors, after a review and deliberation proce	ess_which_includes_a
com	parability study by an independent consultant	. The compensation
<u>is</u>	documented in the employment contract, and su	ubsequent written
not	ification to the CFO regarding annual increas	se, if any.
The	process was last undertaken in 2010.	
Pt_VI-C, Line_19_CIT	's governing documents and conflict of intere	est_policy
are	not available to the public. The audited fi	nancial statements
<u>of</u>	IEIA and its blended component unit CIT are a	available on the
Aud	itor of Public Accounts website, www.apa.virg	ginia.gov, and in
<u>CIT</u>	's annual report located on CIT's website, w	w.cit.org.
Pt_XII, Line 2c _ CIT	has a Finance and Audit committee that meets ann	ually with the Auditor of
Pub	lic Accounts to receive the results of the ann	ual audit. The committee
doe	s not oversee the selection of the an indeper	ndent auditor.
As_	the non-stock, not-for-profit corporation whi	ch acts as the
ope	rating arm of the Innovation and Entrepreneur	ship Investment
Aut	hority (IEIA), CIT's financial statements are	audited annually during
the	audit of IEIA's financial statements. Secti	on 2.2-2229 of the
<u>Cod</u>	e of Virginia states that the accounts and bo	ooks of IEIA will be
exa	mined by the Auditor of the Public Accounts.	
Part X, Line 13 _ CIT	has not recorded the value of equity securit	ies on Form 990
or	on its accounting records because these inves	tments do not have
a_r	eady market to indicate their market value.	None of these
<u>inv</u>	estments are traded on an open market nor do	they have a
clea	ar secondary market.	
CIT	has received a K-1 from Tau Therapeutics, LL	.C. Since CIT has
not	recorded the original investment in Tau, it	is not recording
the	ordinary business loss of \$24 170 and the in	torost income

Schedule O (Form 990 or 99	90-EZ) 2010	Page 2
Name of the organization		Employer identification number
Center for Innova	ative Technology	54-1282820
	of \$406 reported on the K-1.	
	CIT has received a K-1 from Engineered Products	of Virginia, LLC
	Since CIT has not recorded the original investme	ent_in_Engineered
	Products, it is not recording the business loss	of \$6,815
	reported on the K-1.	
	CIT has received a K-1 from Piedmont BioProducts	s, LLC. Since CIT has
	not recorded the original invesment in Piedmont	BioProducts, it is
	not recording the business income of \$358.	
		-
	-	
		
		
		-
		

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

for Innovative Technology

Center [Park]

Related Organizations and Unrelated Partnerships

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

Identification of Disregarded Entities (Complete of the organization answered 'Yes' to Form 990, Part IV, line 33.)

201

OMB No 1545-0047

Open to Public Inspection

Employer identification number

54-1282820

Schedule **R** (Form 990) 2010 Sec 512(b)(13) controlled entity? (f)
Direct controlling
entity Ŷ × × Identification of Related Tax-Exempt Organizations (Complete of the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) Yes (f)
Direct controlling
entity (e) End-of-year assets N/A N/A (e)
Public charity status (if section 501(c)(3)) 11c Type III (d) Total income State agency (d) Exempt Code section TEEA5001 12/22/10 501(c)(3)(c) Legal domicile (state or foreign country) (c)
Legal domicile (state or foreign country) (b) Primary activity S S Innovation and Entrepreneurship Investment Authority 54-1 accelerating technology (b) Primary activity BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990. (2) Innovative Technology Foundation 54-1400124 supporting 2214 Rock Hill Road, Ste 600, Herndon VT 20170 2214 Rock Hill Rd, Ste 600, Herndon VA 20170 (a)
Name, address, and EIN of disregarded entity (a) Name, address, and EIN of related organization ١ [Pertl 11] 8 2 € **©** € ତ୍ର 9 6 ଫ୍ର ପ୍ର ତ୍ର

| Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 | Decause it had one or more related organizations treated as a partnership during the tax year.) Schedule R (Form 990) 2010 Center for Innovative Technology

Part III

Page 2

54-1282820

(k) Percentage ownership General or managing partner? Yes No Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) (h)
Disproportionate
allocations? Ŷ Yes (g)
Share of
end-of-year
assets (f) Share of total income (e)
Predominant
income (related,
unrelated, excluded
from tax under
sections 512-514) (d)
Direct
controlling entity (c)
Legal
domicile
(state or
foreign (b) Primary activity (a)
Name, address, and EIN of related organization **E** 8 **€**

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answer.) line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)		poration or Trustreated as a cor	st (Complete rporation or t	if the organiz	a Corporation or Trust (Complete if the organization answered 'Yes' to Form 990, Part IV, stions treated as a corporation or trust during the tax year.)	ss' to Form 990, P.	art IV,
(a) Name, address, and EIN of related organization	(b) Primary activity	Legal domicile Direct Type of entity (State or foreign controlling entity (C corp, S corp, country)	(d) Direct ontrolling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
<u>10.</u>							
(2)							
(3)							
				-			
ВАА		TEEA5002 12/07/10	01//			Schedule R (Form 990) 2010	n 990) 2010

Page 3

54-1282820

Part V Transactions With Related Organizations (Complete of the organization answered 'Yes' to 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 of this schedule				Yes No	0
1 During the tax year did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	ins listed in Parts II-IV	,		1	ľģ.
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		-	_ a	×	u
b Gift, grant, or capital contribution to other organization(s)		-	1 b	×	٦
c Gift, grant, or capital contribution from other organization(s)			-	×	١.
d Loans or loan quarantees to or for other organization(s)			-	×	J.
				\	ا،
e Loans of loan guarantees by other organization(s)			1e	×	J .
f Sale of assets to other organization(s)			11	×	L
g Purchase of assets from other organization(s)			-	×	L
h Exchange of assets			11	×	۔ ا
i lease of facilities, equipment, or other assets to other organization(s)			-	*	J.
בכנסס כן נפנווייניסן פאמיינינין כן סנונים מססכים נס סנונים טוקמוויינים (אוני מיינים מססכים נס סנונים מיינים					
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)			ž	×	٦
I Performance of services or membership or fundraising solicitations by other organization(s)			=	×	٦
m Sharing of facilities, equipment, mailing lists, or other assets			1m	X	
n Sharing of paid employees			1 n	X	
 Reimbursement paid to other organization for expenses 			10	×	
n Raimhirsamant naid bu othar organization for avvances					J.
ב בנונים מינים בי לינים מינים		•		Ý II	, M
q Other transfer of cash or property to other organization(s)			10	×	
r Other transfer of cash or property from other organization(s)			-	×	۔ ا
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	covered relationships	and transaction threshol	1		.l
					1
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved	eterminir avolved	Ð
(1)					
(2)					
(3)					1
(4)					
(5)					1
(9)					
BAA TEEA5003 12/23/10		Sche	Schedule R (Form 990) 2010	990) 201	12

图面的 Unrelated Organizations Taxable as a Partnership (Complete of the organization answered 'Yes' to 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) (c) (d) Name, address, and EIN of entity Name, address, and EIN of entity Section (state or foreign 501(c) country) Organiza	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?	Share of end-of-year assets	Disproportionate	Code V-UBI amount in box 20 of Schedule K-1 Form (1055)	(h) General or managing partner?	ral or aging ner?
			Yes No		Yes No		Yes	2
(1)					-			
			<u> </u>	_				
(2)								
			_					
(3)								
			-					
(4)								
(5)					-			
 					-			
	-							
						-		
			_					
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Schedule R	(Form 990) 2010	Center for	Innovative T	echnology		54-1282820	Page 5
Part VII	Supplementa	I Information					
		s part to provid	e addıtıonal ınfor	mation for resp	onses to questions	on Schedule R	
	 -						
							
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Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 1 (continued)

Briefly describe the organization's mission:

high technology jobs and businesses in Virginia;

- b) Increase industry competitiveness by supporting the application of innovative technologies that improve productivity and efficiency;
- c) Mobilize support for high technology industries to commercialize new products and processes, including organizing assistance for small business and supporting select industry sectors and regional high technology efforts;
- d) Enhance and expand the scientific and technological research and development capabilities of the institutions of higher education in the Commonwealth and coordinate such capabilities with the scientific and technological research and development activities and requirements of the public and private sectors, including transferring technological advances to the private sector;
- e) Expand knowledge pertaining to scientific and technological research and development among public and private entities;
- f) Attract R&D facilities and contracts from the federal government and private sector, including coordinating efforts to identify and compete for large federal and private sector R&D facilities, tracking federal technology initiatives and recommending state actions, and developing a statewide strategy to compete for large R&D contracts; and
- g) Faciliate and coordinate the marketing, organization, utilization and development of scientific and technological research and development in the Commonwealth.

Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 4d (continued)

Describe the exempt purpose achievements for each of the organization's other program services. Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

Code:	Description.	Other program services - Connect Program, Innovation Center,
Expenses	1,698,219.	and Commonwealth Support.
Grants Of	0.	
Revenue	1,248,672.	

Schedule D, Supplemental Financial Statements

Part VIII Investments - Program Related

	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Piedmont BioProducts, LLC - 6% interest	0.	FMV
Rollstream, Inc - 738,322 preferred shares	0.	FMV
Senior-Living com, Inc - 100,000 common	0.	FMV
South49 Solutions, Inc - 250,000 preferr	0.	FMV
Soft Tissue Regeneration, Inc - 33,038 p	0.	FMV
SquareLoop, Inc - 1,161,827 preferred sh	0.	FMV
Tau Therapeutics, LLC - 482,986 preferred		FMV
Visure Corp, - 8,054 preferred shares	0.	FMV
Canvas Solutions, Inc - 3,491 preferred	0.	FMV
ClearEdge3D, Inc - 752,400 preferred sha	0.	FMV

Schedule D, Supplemental Financial Statements

Continued

•			
Part VIII	Investments	- Program	Related

	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Latista Technologies, Inc - 57,428 prefe	0.	FMV
Phthisis Diagnostic, Inc - 750 preferred Sitscape, Inc 37 common shares	0.	FMV FMV

Schedule O (Form 990 or 990-EZ), Supplemental Information to Form 990 or 990-EZ Form 990, Page 10, Line 24f All Other Expenses (continued)

Description	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
Broadband program	878,463.	878,463.	0.	0.
Connect program	312,450.	312,450.	0.	0.
Business Development	11,838.	0.	0.	11,838.
Advocacy	4,689.	0.	4,689.	0.
Dues, subscriptions & memberships	23,527.	0.	23,527.	0.
Equipment rental & maintenance	13,970.	0.	13,970.	0.
Networking	595.	0.	595.	0.
Training	14,289.	0.	14,289.	0.
Board meeting	1,836.	0.	1,836.	0.
Automobile	172.	0.	172.	0.
Recruitment	2,230.	0.	2,230.	0.
Bad debts	2,535.	0.	2,535.	0.
Commonwealth support	2,227.	2,227.	0.	0.