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DLN: 93493255000412

Form **990** 

Department of the Treasury

## **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

Open to Public Inspection

OMB No 1545-0047

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

| i i i con i con                | 110101140    | 5 0011100                  |   |  |                  |                                       | Thispection                   |  |
|--------------------------------|--------------|----------------------------|---|--|------------------|---------------------------------------|-------------------------------|--|
| A Fo                           | r the :      |                            | endar year, or tax year begin                         | ning 10-01-2010 and ending 09-30-20            | 11               | D Emmlesses                           | idautification number         |  |
| <b>B</b> Ch                    | eck ıf a     | ipplicable C               | Name of organization Southeastern Universities Resear | ch   |                  | D Employer                            | identification number         |  |
| Add                            | dress ch     | hange                      | Association Inc Doing Business As                     |  |                  | 54-1156                               | 453                           |  |
| Na                             | me cha       | inge                       | boing business ro                                     |  |                  | E Telephone                           | number                        |  |
| Init                           | ial retu     | ım                         | Number and street (or P O box                         | of mail is not delivered to street address)    | Room/suite       | (202)40                               | 8-7872                        |  |
| Tei                            | mınate       | ed                         | 1201 New York Avenue NW                               |  |                  |                                       |                               |  |
| — Am                           | ended        | return                     | City or town, state or country, ar                    | nd ZIP + 4                                     |                  | <b>G</b> Gross recei                  | ots \$ 20,090,084             |  |
| — Apı                          | olication    | n pending                  | Washington, DC 20005                                  |  |                  |                                       |                               |  |
|                                |              |                            | F Name and address of p                               | orincipal officer                              | H(a) Is this     | a group return for affil              | liates? Yes No                |  |
|                                |              |                            | Jerry Draayer   |  | 13 (13           | a group recurrior and                 | naces y les y lio             |  |
|                                |              |                            | 1201 New York Avenue<br>Washington, DC 20005          |  |                  | l affiliates included                 |                               |  |
|                                |              |                            | <u> </u>  |  |                  |                                       | t (see instructions)          |  |
| <b>I</b> Ta                    | x-exem       | npt status                 | <b>▽</b> 501(c)(3) <b>┌</b> 501(c)( )                 | ◀ (Insert no )                                 | H(c) Grou        | ip exemption n                        | umber ► 5487                  |  |
| J W                            | ebsite       | e: ► WWW                   | SURA ORG  |  | 7                |                                       |                               |  |
| V Ear                          | m of or      | annation [                 | Corporation Trust Associa                             | ation C Other No.                              | l Voor of fo     | rmation 1980                          | M State of legal domicile DC  |  |
|                                | n or org     | Summ                       |   | auon j Other F                                 | L Year of it     | imation 1980                          | M State of legal domicile DC  |  |
| I G                            |              |                            | <b>.</b>  | sion or most significant activities            |                  |                                       |                               |  |
|                                |              | •                          |   | rsities, operates the Jefferson Lab (a na      | tıonal laborato  | ry) through a jo                      | oint venture with CSC,        |  |
| œ.                             | <u>t</u>     | the SURA                   |   |  |                  |                                       |                               |  |
| Ē                              | -            |                            |   |  |                  |                                       |                               |  |
| ē                              |              |                            |   |  |                  |                                       |                               |  |
| Governance                     | 2 (          | Check this                 | box দ if the organization                             | discontinued its operations or disposed        | l of more than 2 | 25% of its net                        | assets                        |  |
|                                | 3 1          | Number of                  | voting members of the gove                            | erning body (Part VI, line 1a)                 | •                | 3                                     | 62                            |  |
| Activities &                   | 4 1          | Number of                  | independent voting member                             | rs of the governing body (Part VI, line 1      | b)               | . 4                                   | 62                            |  |
| Ĕ                              | 5            | Total numl                 | ber of individuals employed                           | ın calendar year 2010 (Part V, line 2a)        |                  | 5                                     | 20                            |  |
| ដ្                             |              |                            | ber of volunteers (estimate i                         |  |                  | 6                                     | 0                             |  |
|                                | 1            |                            |   | Part VIII, column (C), line 12                 |                  | 7a                                    | 0                             |  |
|                                | Ь            | Net unrela                 | ted business taxable incom                            | e from Form 990-T, line 34                     |                  | 7b                                    | 0                             |  |
|                                |              |                            |   |  | Pric             | or Year                               | Current Year                  |  |
| <u>o</u>                       | 8            |                            | - · ·   | , line 1 h)                                    | •                | 659,122                               | 9,574,878                     |  |
| Revenue                        | 9<br>10      |                            |   | , line 2g)                                     |                  | 1,843,753                             | 1,785,232                     |  |
| æ                              | 11           |                            |   | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\         | 15,473           | 222,715                               |                               |  |
|                                | 12           |                            |   | 11 (must equal Part VIII, column (A), lı       | ne -             | 13,473                                | 222,713                       |  |
|                                |              |                            |   |  |                  | 2,968,428                             | 12,486,961                    |  |
|                                | 13           |                            |   | art IX, column (A), lines 1-3)                 |                  | 0                                     | 0                             |  |
|                                | 14           |                            |   | tIX, column (A), line 4)                       |                  | 0                                     | (                             |  |
| ss.                            | 15           | Salarıes<br>5–10)          | , other compensation, emplo                           | oyee benefits (Part IX, column (A), lines      |                  | 2,833,823                             | 2,762,563                     |  |
| Expenses                       | 16a          | ,                          | onal fundraising fees (Part I                         | X, column (A), line 11e)                       |                  | 0                                     | 2,702,303                     |  |
| <del>\$</del>                  | b            |                            | raising expenses (Part IX, column                     |  |                  |                                       |                               |  |
| ũ                              | 17           |                            |   | ), lines 11a-11d, 11f-24f)                     |                  | 1,912,264                             | 10,615,345                    |  |
|                                | 18           |                            |   | nust equal Part IX, column (A), line 25)       |                  | 4,746,087                             | 13,377,908                    |  |
| _                              | 19           |                            |   | ne 18 from line 12                             |                  | -1,777,659                            | -890,947                      |  |
| 8 <del>ያ</del>                 |              |                            |   |  | _                | g of Current                          | End of Year                   |  |
| Net Assets or<br>Fund Balances |              |                            |   |  | <b>`</b>         | ear                                   |                               |  |
| Ass<br>Ba                      | 20           |                            |   |  |                  | 21,872,869                            | 22,321,299                    |  |
| ∌<br>∯                         | 21           |                            |   |  |                  | 2,482,130                             | 5,153,836                     |  |
|                                | 22<br>14   1 |                            | ets or fund balances Subtra<br>ture Block             | ct line 21 from line 20                        |                  | 19,390,739                            | 17,167,463                    |  |
|                                |              | _                          |   | nined this return, including accompanying      | schedules and s  | tatements, and                        | to the best of mv             |  |
| know                           | ledge a      | and belief,                |   | te. Declaration of preparer (other than office |                  |                                       |                               |  |
| KIIUW                          | ledge.       |                            |   |  |                  |                                       |                               |  |
|                                |              | Tk                         |   |  | 2                | 012-09-06                             |                               |  |
| Sigr                           | 1            | Signatu                    | re of officer   |  |                  | ate                                   |                               |  |
| Her                            |              |                            | DRAAYER CEO & PRESIDENT                               |  |                  |                                       |                               |  |
|                                |              | Туре о                     | r print name and title                                |  |                  |                                       |                               |  |
|                                |              | Print/Type<br>preparer's n | ame   | Preparer's signature                           | Date             | Check if self-<br>employed •          | PTIN                          |  |
| Paid                           | F            |                            | k KPMG LLP  | <u> </u>                                       |                  | · · · · · · · · · · · · · · · · · · · | Firm's EIN                    |  |
| Prep                           |              | Fırm's addre               | ess 1676 International Drive                          |  |                  |                                       |                               |  |
| Use (                          | Only         |                            | McLean, VA 22102                                      |  |                  |                                       | Phone no • (703) 286-<br>8000 |  |
|                                |              |                            |   |  |                  |                                       |                               |  |

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

| Par                             | t III  |  | Program Servic<br>O contains a respo   |   |  | III .   |  | <br>   |
|---------------------------------|--|--|--|---|--|---|--|--|
| 1                               | Brief  | y describe the org   | anızatıon's mıssıon  |   |  |   |  |  |
| MAY<br>OTH<br>THE<br>CON<br>THE | COOP<br>ER RES<br>PHYSI<br>STRUC<br>DEPAR  | ERATE WITH ONE<br>SEARCH FACILITI<br>CAL, BIOLOGICA<br>CTION, MANAGEM<br>RTMENT OF ENER  | E ANOTHER AND WI<br>ES, AND OTHERWI<br>L, AND OTHER NAT<br>IENT, AND OPERAT  | TH GOVER<br>SE IN FURT<br>URAL SCIE<br>IONS OF TH<br>ENCE'S 10 N  | NMENT IN ACQUI<br>HERING KNOWLEI<br>NCES AND ENGIN<br>HE THOMAS JEFFE<br>IATIONAL LABOR  | RING, DEV<br>DGE AND TH<br>EERING SH<br>RSON NAT<br>ATORIES),   | ELOPING, AND USING<br>HE APPLICATION OF<br>PECIFICALLY, THIS I<br>IONAL ACCELERATO<br>AND THE COLLABOR   | ER ORGANIZATIONS G LABORATORIES, AND THAT KNOWLEDGE IN NCLUDES THE DESIGN, PR FACILITY (ONE OF RATIONS TO PROPOSE,   |
|                                 |  |  |  |   |  |   |  |  |
| 2                               | the pr   | or Form 990 or 99  | ertake any significar<br>90-EZ?<br>new services on Sch   |   |  | ear which w   |  | Yes 🗸 No   |
| 3                               |  |  | se conducting, or ma   |   | nt changes in how i  | t conducts  | any program  |  |
| •                               |  | es?  |  |   |  | • • •   |  | Yes ✓ No   |
|                                 | If "Ye   | s," describe these   | changes on Schedule  | e O   |  |   |  |  |
| 4                               | Section  | on 501(c)(3) and 5   |  | ns and secti  | on 4947(a)(1) trus   | ts are requi  | program services by extred to report the amoust reported   |  |
| 4a                              | object comp has o engin oppoid the series of | toutheastern Universities tive of proffering a plai etition by the Departm ver 60 universities, presering purposes, to fos tunities for scientists ail y Office of Science's 16 (EBAF was selected in 19 (EBAF was selected i | In for the construction of a ent of Energy to design, be dominantly in the southers the rexcellence in scientification and engineers CEBAF, rendonational laboratories SUBAS SURA partnered with the contract for the manable operations including overly and provide a new teand renovation of the exclusively to those heads of the provided in partnership with the entire research at the Lab International content in the partnership with the entire research at the Lab International content in the partnership with the entire research at the Lab International content in the partnership with the entire research at the Lab International content in the conte | national continuity, and operational cantinuity, and including a research, to stand the Thorn RA has been recomputer Sciegement and operational cantinuity, and cantinuity and cantinuity and cantinuity and cantinuity and cantinuity and cantinuity and cantinuity. The recomputer is the second cantinuity and cantinuity. | nuous electron beam active CEBAF as an expering international member rengthen the scientificates Jefferson National Assponsible for the management of the Jefferson States of the Jefferson of the States of the Jefferson States of the Jefferson of the of the Je | celerator facility mental nuclear pers, organized to accelerator Facingement and of the control | y (CEBAF) Ultimately, SUR physics facility in Newport to promote cooperative activapabilities of the nation, an ility, or Jefferson Lab, is one perations (M&O) contract for to form Jefferson Science A 2006 As the M&O contracto budget, and ~ \$400 million didition of approximately 100 liability company and is go and a primary mission to pid CSC/Applied Technologies of the scientific mission of the acility on its property adjactities scientists and researche ects intramural scientific resident and exploit the transformation. | d to provide training e of the US Department of the Jefferson lab since its plan issociates, LLC (JSA), which r, JSA has oversight in facility upgrades that will 0,000 SF of industrial assembly, overned by an operating erform the DOE Jefferson Lab is LLC (CSC) is the 40% is Lefferson Lab with assistance ent to the Jefferson Lab irs who need temporary |
| 4b                              | (Code  | 2  | ) (Expenses \$   |   | including grants of \$   |   | ) (Revenue \$  | )  |
|                                 |  |  |  |   |  |   |  |  |
|                                 |  |  |  |   |  |   |  |  |
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|                                 |  |  |  |   |  |   |  |  |
|                                 | (Code  | <u> </u>   | ) (Expenses \$   |   | including grants of \$   |   | ) (Revenue \$  | )  |
| 40                              | (Cour  | =  | ) (Expenses \$   |   | including grants or \$   |   | ) (Revenue \$  | ,  |
|                                 |  |  |  |   |  |   |  |  |
|                                 |  |  |  |   |  |   |  |  |
|                                 |  |  |  |   |  |   |  |  |
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|                                 |  |  |  |   |  |   |  |  |
|                                 |  |  |  |   |  |   |  |  |
| 4d                              |  | er program service:<br>enses \$  | s (Describe in Sched<br>includ   | lule O )<br>ling grants o   | f\$  | ) (Re   | venue \$   | )  |
| 4e                              | Tota   | l program service e  | expenses►\$  | 10,409,46   | 7  |   |  |  |

| Part IV | Checklist of | Required | <b>Schedules</b> |
|---------|--------------|----------|------------------|
|---------|--------------|----------|------------------|

|     |   |     | 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   | Yes |    |
| 2   | Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? $^{f z}$   | 2   | Yes |    |
| 3   | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part $I^{\bullet}$  | 3   |     | No |
| 4   | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II  | 4   | Yes |    |
| 5   | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III                         | 5   |     |    |
| 6   | Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I  | 6   |     | No |
| 7   | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II                                       | 7   |     | No |
| 8   | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2   | 8   |     | No |
| 9   | Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV | 9   |     | No |
| 10  | Did the organization, directly or through a related organization, hold assets in term, permanent, or quasiendowments? If "Yes," complete Schedule D, Part $\sqrt{2}$  | 10  |     | No |
| 11  | If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable  |     |     |    |
| а   | Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.   | 11a | Yes |    |
| b   | Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.  | 11b |     | No |
| 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.  | 11c |     | No |
| d   | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.   | 11d |     | No |
| e   | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.  | 11e | Yes |    |
| f   | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.     | 11f | Yes |    |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII   | 12a |     | No |
| b   | Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional              | 12b | Yes |    |
| 13  | Is the organization a school described in section 170 (b)(1)(A)(II)? If "Yes," complete Schedule E  | 13  |     | No |
|     | Did the organization maintain an office, employees, or agents outside of the United States?   | 14a |     | No |
| b   | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If</i> " <i>Yes,"</i> complete Schedule F, Parts I and IV      | 14b |     | No |
| 15  | Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Parts II and IV                                       | 15  |     | No |
| 16  | Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Parts III and IV .   | 16  |     | No |
| 17  | Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," complete Schedule G, Part I (see instructions)                               | 17  |     | No |
| 18  | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II   | 18  |     | No |
| 19  | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III  | 19  |     | No |
| 20a | Did the organization operate one or more hospitals? If "Yes," complete Schedule H   | 20a |     | No |
| b   | If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)                  | 20b |     |    |

| Par | t IV Checklist of Required Schedules (continued)  |     |                |        |
|-----|---|-----|----------------|--------|
| 21  | Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II  | 21  |                | No     |
| 22  | Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III   | 22  |                | N o    |
| 23  | Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J            | 23  | Yes            |        |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b-24d and complete Schedule K. If "No," go to line 25 | 24a |                | N o    |
| b   | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?   | 24b |                |        |
| c   | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  | 24c |                |        |
| d   | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?   | 24d |                |        |
| 25a | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part $I$   | 25a |                | No     |
| b   | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I   | 25b |                | No     |
| 26  | Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II                                | 26  |                | No     |
| 27  | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III        | 27  |                | No     |
| 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)   |     |                |        |
| a   | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV   | 28a |                | No     |
| b   | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  | 28b |                | N o    |
| c   | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part $IV$ .  | 28c |                | N o    |
| 29  | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  | 29  |                | No     |
| 30  | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  | 30  |                | N o    |
| 31  | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I  | 31  |                | No     |
| 32  | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  | 32  |                | N o    |
| 33  | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I  | 33  |                | No     |
| 34  | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1   | 34  | Yes            |        |
| 35  | Is any related organization a controlled entity within the meaning of section 512(b)(13)?   | 35  | Yes            |        |
| а   | Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 $\Box$ Yes $\Box$ No  |     |                |        |
| 36  | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2  | 36  |                | No     |
| 37  | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI   | 37  |                | No     |
| 38  | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O  | 38  | Yes            |        |
|     |   | F   | orm <b>990</b> | (2010) |

Part V Statements Regarding Other IRS Filings and Tax Compliance

|     | Check if Schedule O contains a response to any question in this Part V   |            |     |    |
|-----|--|------------|-----|----|
|     |  |            | Yes | No |
| la  | Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 12  |            |     |    |
| b   | Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b  0  |            |     |    |
| С   | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?   | <b>1</b> c | Yes |    |
| 2a  | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax  Statements filed for the calendar year ending with or within the year covered by this   |            |     |    |
| b   | return   | 2b         | Yes |    |
|     | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  | 20         | 165 |    |
| Ba  | Did the organization have unrelated business gross income of \$1,000 or more during the year?  | За         |     | No |
| ь   | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O   | 3b         |     |    |
| la  | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?                                   | 4a         |     | No |
| b   | If "Yes," enter the name of the foreign country ▶  |            |     |    |
|     | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  | 5a         |     | No |
| b   | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?   | 5b         |     | Νo |
| С   | If "Yes" to line 5a or 5b, did the organization file Form 8886-T?  | 5c         |     |    |
|     | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?  | 6a         |     | No |
| b   | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  | 6b         |     |    |
| •   | Organizations that may receive deductible contributions under section 170(c).  |            |     |    |
|     | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  | 7a         |     | Νo |
|     | If "Yes," did the organization notify the donor of the value of the goods or services provided?  | 7b         |     |    |
| С   | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?   | <b>7</b> c |     | Νo |
| d   | If "Yes," indicate the number of Forms 8282 filed during the year  |            |     |    |
| e   | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  | 7e         |     | No |
| f   | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?   | 7f         |     | No |
|     | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?   | 7g         |     |    |
| h   | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?   | 7h         |     |    |
| 3   | <b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? | 8          |     |    |
| ,   | Sponsoring organizations maintaining donor advised funds.  |            |     |    |
|     | Did the organization make any taxable distributions under section 4966?  | 9a         |     |    |
| _   | Did the organization make a distribution to a donor, donor advisor, or related person?   | 9b         |     |    |
| .0  | Section 501(c)(7) organizations. Enter  Instruction food and control contributions uncluded on Bart VIII. June 12  |            |     |    |
|     | Initiation fees and capital contributions included on Part VIII, line 12   |            |     |    |
| 1   | Section 501(c)(12) organizations. Enter  |            |     |    |
|     | Gross income from members or shareholders  |            |     |    |
| b   | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )   |            |     |    |
| .2a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?   | 12a        |     |    |
| b   | If "Yes," enter the amount of tax-exempt interest received or accrued during the year  |            |     |    |
| .3  | Section 501(c)(29) qualified nonprofit health insurance issuers.   |            |     |    |
| а   | Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O   | 13a        |     |    |
| b   | Enter the amount of reserves the organization is required to maintain by the states  |            |     |    |
| c   | In which the organization is licensed to issue qualified health plans  Enter the amount of reserves on hand  13b  13c  |            |     |    |
| .4a | Did the organization receive any payments for indoor tanning services during the tax year?   | 14a        |     | No |
|     | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O  | 14b        |     |    |

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

| Se      | ction A. Governing Body and Management   |          |     |    |
|---------|--|----------|-----|----|
|         |  |          | Yes | No |
|         |  |          |     |    |
| 1a      | Enter the number of voting members of the governing body at the end of the tax   |          |     |    |
| b       | Enter the number of voting members included in line 1a, above, who are   |          |     |    |
| 2       | Independent  |          |     |    |
| 3       | other officer, director, trustee, or key employee?   | 2        |     | No |
|         | supervision of officers, directors or trustees, or key employees to a management company or other person?  | 3        |     | No |
| 4       | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?   | 4        |     | No |
| 5       | Did the organization become aware during the year of a significant diversion of the organization's assets? .   | 5        |     | Νo |
| 6       | Does the organization have members or stockholders?  | 6        | Yes |    |
| 7a      | Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?  | 7a       | Yes |    |
| b       | Are any decisions of the governing body subject to approval by members, stockholders, or other persons? $\cdot$ $\cdot$  | 7b       | Yes |    |
| 8       | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following   |          |     |    |
| а       | The governing body?  | 8a       | Yes |    |
| b       | Each committee with authority to act on behalf of the governing body?  | 8b       | Yes |    |
| 9       | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O   | 9        |     | No |
|         | ection B. Policies (This Section B requests information about policies not required by the Internal  |          |     |    |
| <u></u> | evenue Code.)  |          | Yes | No |
| 10a     | Does the organization have local chapters, branches, or affiliates?  | 10a      | 163 | No |
|         | If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?   | 10b      |     |    |
| 11a     | Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?   | $\vdash$ |     |    |
| 114     | Thas the organization provided a copy of this Form 250 to an members of its governing body before mining the form.   | 11a      | Yes |    |
| b       | Describe in Schedule O the process, if any, used by the organization to review this Form 990   |          |     |    |
| 12a     | Does the organization have a written conflict of interest policy? If "No," go to line 13   | 12a      | Yes |    |
| b       | Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  | 12b      | Yes |    |
| 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      | Yes |    |
| 13      | Does the organization have a written whistleblower policy?   | 13       | Yes |    |
| 14      | Does the organization have a written document retention and destruction policy?  | 14       | Yes |    |
| 15      | Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?   |          |     |    |
| а       | The organization's CEO, Executive Director, or top management official   | 15a      | Yes |    |
| b       | Other officers or key employees of the organization  | 15b      | Yes |    |
|         | If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions )  |          |     |    |
|         | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  | 16a      | Yes |    |
| b       | If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? | 16b      |     | No |
| Se      | ection C. Disclosure   |          |     |    |
| 17      | List the States with which a copy of this Form 990 is required to be filed▶  |          |     |    |
| 18      | Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website. Another's website. Upon request                               |          |     |    |

- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization PETER BJONERUD

  1201 NEW YORK AVENUE NW

WASHINGTON, DC 20005 (202) 408-7872

## <u>Part VIII</u> Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

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

| Check this box if neither the organi |   | elated o                          | rganı                 | zatio    | on co        | ompen   | sate   | d any current office             | er, director, or trust                | ee   |  |  |                                     |
|--------------------------------------|---|-----------------------------------|-----------------------|----------|--------------|---|--------|----------------------------------|---------------------------------------|--|--|--|-------------------------------------|
| (A)<br>Name and Title                | (B)<br>Average<br>hours<br>per                                |                                   | (C<br>Position (      |          |              | <b>(C)</b><br>ition (check all<br>that apply) |        |                                  | II                                    |  | ( <b>D)</b> Reportable compensation from the | (E) Reportable compensation from related | (F)<br>Estimated<br>amount of other |
|                                      | week (describe hours for related organizations in Schedule O) | Individual trustee<br>or director | Institutional Trustee | Officei  | Ke) employee | Highest compensated employee                  | Former | organization (W-<br>2/1099-MISC) | organizations<br>(W- 2/1099-<br>MISC) | compensation<br>from the<br>organization and<br>related<br>organizations |  |  |                                     |
| See Additional Data Table            |   |                                   |                       |          |              |   |        |                                  |                                       |  |  |  |                                     |
|                                      |   |                                   |                       |          |              |   |        |                                  |                                       |  |  |  |                                     |
|                                      |   |                                   |                       |          |              |   |        |                                  |                                       |  |  |  |                                     |
|                                      |   |                                   |                       |          |              |   |        |                                  |                                       |  |  |  |                                     |
|                                      |   |                                   |                       |          |              |   |        |                                  |                                       |  |  |  |                                     |
|                                      |   |                                   |                       |          |              |   |        |                                  |                                       |  |  |  |                                     |
|                                      |   |                                   |                       |          |              |   |        |                                  |                                       |  |  |  |                                     |
|                                      |   |                                   |                       |          |              |   |        |                                  |                                       |  |  |  |                                     |
|                                      |   |                                   |                       |          |              |   |        |                                  |                                       |  |  |  |                                     |
|                                      |   |                                   |                       |          |              |   |        |                                  |                                       |  |  |  |                                     |
|                                      |   |                                   |                       |          |              |   |        |                                  |                                       |  |  |  |                                     |
|                                      |   |                                   |                       |          |              |   |        |                                  |                                       |  |  |  |                                     |
|                                      |   |                                   |                       |          |              |   |        |                                  |                                       |  |  |  |                                     |
|                                      |   |                                   |                       |          |              |   |        |                                  |                                       |  |  |  |                                     |
|                                      |   |                                   |                       |          |              |   |        |                                  |                                       |  |  |  |                                     |
|                                      |   |                                   |                       |          |              |   |        |                                  |                                       |  |  |  |                                     |
|                                      |   |                                   |                       |          |              |   |        |                                  |                                       |  |  |  |                                     |
|                                      |   |                                   |                       |          |              |   |        |                                  |                                       |  |  |  |                                     |
|                                      |   |                                   |                       |          |              |   |        |                                  |                                       |  |  |  |                                     |
|                                      |   |                                   |                       | <u> </u> | <u> </u>     |   |        |                                  |                                       |  |  |  |                                     |

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

| (A)<br>Name and Title   |  | (B)<br>Average<br>hours   |                                   | (ition i<br>that a    |            |              | II                           |            | Rep<br>comp | (D)<br>ortable<br>ensation      | (E) Reportable compensation                           |           | (F)<br>Estima<br>amount o  | ated<br>fother |
|---|--|---|-----------------------------------|-----------------------|------------|--------------|------------------------------|------------|-------------|---------------------------------|---|-----------|--|----------------|
|   |  | per week (describe hours for related organizations in Schedule O) | Individual trustee<br>or director | Institutional Trustee | Officei    | Ke) emplojee | Highest compensated employee | Former     | organı      | m the<br>zation (W-<br>19-MISC) | from related<br>organizations<br>(W- 2/1099-<br>MISC) |           | compensation<br>from the<br>organization and<br>related<br>organizations |                |
| See A   | ddıtıonal Data Table   | 1   |                                   |                       |            |              |                              |            |             |                                 |   |           |  |                |
|   |  |   |                                   |                       |            |              |                              |            |             |                                 |   |           |  |                |
|   |  |   |                                   |                       |            |              |                              |            |             |                                 |   |           |  |                |
|   |  |   |                                   |                       |            |              |                              |            |             |                                 |   |           |  |                |
|   |  |   |                                   |                       |            |              |                              |            |             |                                 |   |           |  |                |
|   |  |   |                                   |                       |            |              |                              |            |             |                                 |   |           |  |                |
|   |  |   |                                   |                       |            |              |                              |            |             |                                 |   |           |  |                |
|   |  |   |                                   |                       |            |              |                              |            |             |                                 |   |           |  |                |
|   |  |   |                                   |                       |            |              |                              |            |             |                                 |   |           |  |                |
|   |  |   |                                   |                       |            |              |                              |            |             |                                 |   |           |  |                |
|   |  |   |                                   |                       |            |              |                              |            |             |                                 |   |           |  |                |
| 1b  | Sub-Total  |   |                                   |                       |            |              |                              | Þ          |             |                                 |   |           |  |                |
|   | Total from continuation sheets  Total (add lines 1b and 1c) .                      |   |                                   |                       |            |              | _                            | <b>-</b>   |             | 1,157,292                       |   | 0         |  | 185,923        |
| 2   | Total number of individuals (inc<br>\$100,000 in reportable comper                 | ludıng but not lır  | nıted to                          | thos                  | e lıs      |              |                              | ) who      | receive     |                                 | n   |           |  | ·              |
|   |  |   |                                   |                       |            |              |                              |            |             |                                 |   |           | Yes  | No             |
| 3   | Did the organization list any <b>for</b> on line 1a? <i>If</i> "Yes," complete Sc. |   |                                   |                       |            | ey e         | mploy<br>•                   | ee, o      | r highes    | t compens                       | ated employee   | 3         |  | No             |
| 4   | For any individual listed on line organization and related organiz                 |   |                                   |                       |            |              |                              |            |             |                                 |   |           |  |                |
| 5   | Did any person listed on line 1a   | receive or accr   |                                   | •<br>nenes            | •<br>atıon | fror         | n anv                        | •<br>unrel | ated or     | anization o                     | r individual for                                      | 4         | Yes  |                |
|   | services rendered to the organiz   |   |                                   |                       |            |              |                              |            |             |                                 | •   | 5         |  | No             |
|   | ection B. Independent Con  |   |                                   |                       |            |              |                              |            |             |                                 |   |           |  |                |
| 1   | Complete this table for your five \$100,000 of compensation from                   |   |                                   | ındep                 | ende       | ent c        | ontra                        | ctors      | that re     | ceived more                     | e than  |           |  |                |
|   | Na   | <b>(A)</b><br>me and business ad                                  | dress                             |                       |            |              |                              |            |             | Descr                           | (B)<br>iption of services                             |           | <b>(C</b><br>Comper  |                |
| 101 C<br>WASH   | coyoc Assoc<br>onstitution Ave NW Ste600-W<br>INGTON, DC 20001                     |   |                                   |                       |            |              |                              |            |             | Lobbying                        |   |           | 210,464  |                |
| KPMG LLP 1801 K STREET NW STE 12000 WASHINGTON, DC 20036  Audit & Tax |  |   |                                   |                       |            |              |                              |            |             | 116,017                         |   |           |  |                |
|   |  |   |                                   |                       |            |              |                              |            |             |                                 |   | $\exists$ |  |                |

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 -2

| Form 990  |  | (010) Statement of Reveni  | 10  |                         |                       |   | P                 | age <b>9</b>  |
|---|--|--|---|-------------------------|-----------------------|---|-------------------|---|
| rait V.   |  | Statement of Revent  | 16  |                         | (A)<br>Total revenue  | (B)<br>Related<br>or<br>exempt<br>function<br>revenue |                   | excluded<br>from<br>tax<br>under<br>sections<br>512,<br>513, or |
| Contributions, gifts, grants<br>and other similar amounts | b   c   d   e   f   g                              | Federated campaigns Membership dues Fundraising events Related organizations   | . 1c . 1d . 1e and 1f nes 1a-1f \$  | 9,306,878<br>50,000     | 9,574,878             |   |                   | 514   |
| rogram Service Revei                                      | b i  | PERFORMANCE FEES  RESIDENCE FACILITY INCOME  All other program service revious and the service review and the servi |   | 900099<br>900099        |                       | 1,333,584<br>451,648                                  |                   |   |
| 6   | 4 : 5   6a   6   c   6                             | Investment income (includin and other similar amounts) Income from investment of tax-extended and income from similar amounts)  Gross Rents Less rental expenses Rental income or (loss) Net rental income or (loss)   | empt bond proceeds  | (II) Personal           | 453,403<br>0<br>0     |   |                   | 453,403   |
| 7   | 7a   1   2   3   4   4   4   4   4   4   4   4   4 | Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (loss) Gross income from fundraisii (not including   | (I) Securities 8,053,856  7,603,123  450,733                                    | (II) O ther             | 450,733               |   |                   | 450,73  |
| S   | b   c   9a   c   10a                               | Less direct expenses<br>Net income or (loss) from ga<br>Gross sales of inventory, les  | a b  Idraising events •  Civities See Part IV, line 19 . a b  ming activities • |                         | 0                     |   |                   |   |
|   | b   c   laplace                                    | returns and allowances .  Less cost of goods sold .  Net income or (loss) from sa  Miscellaneous Revenue  MISC REVENUE  All other revenue  | les of inventory  | Business Code<br>900099 | 0<br>222,715          | 222,715   |                   |   |
| 1   |  | Total. Add lines 11a-11d.  Total revenue. See Instruction  | <b>▶</b>  |                         | 222,715<br>12,486,961 | 2,007,947   | orm <b>990</b> (2 | 904,13  |

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

| Δ        | 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 no    | other organizations must complete column (A) but are not required to to<br>ot include amounts reported on lines 6b,<br>o, 9b, and 10b of Part VIII.                                    | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | ( <b>D</b> ) Fundraising expenses |  |  |  |  |  |
| 1        | Grants and other assistance to governments and organizations in the U S $$ See Part IV, line 21 $$   | 0                  | ·                            |                                     | · .                               |  |  |  |  |  |
| 2        | Grants and other assistance to individuals in the U.S. See Part IV, line 22  | 0                  |                              |                                     |                                   |  |  |  |  |  |
| 3        | Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16  | 0                  |                              |                                     |                                   |  |  |  |  |  |
| 4        | Benefits paid to or for members  | 0                  |                              |                                     |                                   |  |  |  |  |  |
| 5        | Compensation of current officers, directors, trustees, and key employees   | 1,343,214          | 213,902                      | 1,129,312                           | 0                                 |  |  |  |  |  |
| 6        | Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$                                     | 0                  |                              |                                     |                                   |  |  |  |  |  |
| 7        | Other salaries and wages   | 1,129,159          | 413,982                      | 715,177                             | 0                                 |  |  |  |  |  |
| 8        | Pension plan contributions (include section 401(k) and section 403(b) employer contributions)  | 95,579             | 38,096                       | 57,483                              | 0                                 |  |  |  |  |  |
| 9        | Other employee benefits  | 194,611            | 70,590                       | 124,021                             | 0                                 |  |  |  |  |  |
| 10       | Payroll taxes  | 0                  |                              |                                     |                                   |  |  |  |  |  |
| а        | Fees for services (non-employees) Management   | 0                  |                              |                                     |                                   |  |  |  |  |  |
| b        | Legal  | 24,263             |                              | 24,263                              | 0                                 |  |  |  |  |  |
| С        | Accounting   | 123,768            |                              | 123,768                             | 0                                 |  |  |  |  |  |
| d        | Lobbying   | 275,144            | 275,144                      |                                     |                                   |  |  |  |  |  |
| е        | Professional fundraising services See Part IV, line 17   | 0                  |                              |                                     |                                   |  |  |  |  |  |
| f        | Investment management fees   | 126,458            |                              | 126,458                             | 0                                 |  |  |  |  |  |
| g        | Other  | 43,300             | 43,300                       |                                     |                                   |  |  |  |  |  |
| 12       | Advertising and promotion  | 0                  |                              |                                     |                                   |  |  |  |  |  |
| 13       | Office expenses  | 145,379            | 72,666                       | 72,713                              | 0                                 |  |  |  |  |  |
| 14       | Information technology   | 0                  |                              |                                     |                                   |  |  |  |  |  |
| 15       | Royalties  | 0                  |                              |                                     |                                   |  |  |  |  |  |
| 16       | Occupancy  | 320,818            |                              | 320,818                             | 0                                 |  |  |  |  |  |
| 17       | Travel   | 308,320            | 273,985                      | 34,335                              | 0                                 |  |  |  |  |  |
| 18       | Payments of travel or entertainment expenses for any federal, state, or local public officials   | 0                  |                              |                                     |                                   |  |  |  |  |  |
| 19       | Conferences, conventions, and meetings   | 234,470            | 189,441                      | 45,029                              | 0                                 |  |  |  |  |  |
| 20       | Interest   | 16,544             |                              | 16,544                              | 0                                 |  |  |  |  |  |
| 21       | Payments to affiliates   | 0                  |                              |                                     |                                   |  |  |  |  |  |
| 22       | Depreciation, depletion, and amortization  | 36,698             | 33,176                       | 3,522                               | 0                                 |  |  |  |  |  |
| 23<br>24 | Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of   | 63,423             | 2,749                        | 60,674                              | 0                                 |  |  |  |  |  |
| а        | line 25, column (A) amount, list line 24f expenses on Schedule O) RESEARCH RELATED SUBAWARDS   | 8,663,873          | 8,641,704                    | 22,169                              |                                   |  |  |  |  |  |
| a<br>b   | UTILITIES  | 25,931             | 25,931                       | 22,169                              |                                   |  |  |  |  |  |
| c        | OTHER EXPENSES   | 206,956            | 114,801                      | 92,155                              |                                   |  |  |  |  |  |
| d        | OTHER EXITERACES   | 200,930            | 114,601                      | 32,133                              |                                   |  |  |  |  |  |
| e        |  |                    |                              |                                     |                                   |  |  |  |  |  |
| f        | All other expenses   |                    |                              |                                     |                                   |  |  |  |  |  |
| 25       | Total functional expenses. Add lines 1 through 24f   | 13,377,908         | 10,409,467                   | 2,968,441                           | 0                                 |  |  |  |  |  |
| 26       | Joint costs. Check here ► ☐ If following   | 13,377,308         | 10,409,407                   | 2,300,441                           |                                   |  |  |  |  |  |
|          | 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   | I                  |                              |                                     |                                   |  |  |  |  |  |

| Pa           | rt X | Balance Sheet   |         |                |                                 |            |                           |
|--------------|------|---|---------|----------------|---------------------------------|------------|---------------------------|
|              |      |   |         |                | <b>(A)</b><br>Beginning of year |            | <b>(B)</b><br>End of year |
|              | 1    | Cash—non-interest-bearing   |         |                | 51,090                          | 1          | 290,776                   |
|              | 2    | Savings and temporary cash investments  |         |                | 0                               | 2          | 0                         |
|              | 3    | Pledges and grants receivable, net  |         |                |                                 | 3          |                           |
|              | 4    | Accounts receivable, net  |         |                | 286,047                         | 4          | 690,857                   |
|              | 5    | Receivables from current and former officers, directors, trustees highest compensated employees Complete Part II of   | , key e | employees, and |                                 |            |                           |
|              |      | Schedule L  |         |                |                                 | 5          |                           |
|              | 6    | Receivables from other disqualified persons (as defined under sepersons described in section $4958(c)(3)(B)$ , and contributing ensponsoring organizations of section $501(c)(9)$ voluntary employ organizations (see instructions) | nploye  | rs, and        |                                 |            |                           |
| \$           |      | Schedule L  |         |                |                                 | 6          |                           |
| Assets       | 7    | Notes and loans receivable, net   |         |                |                                 | 7          |                           |
| As           | 8    | Inventories for sale or use   |         |                |                                 | 8          |                           |
|              | 9    | Prepaid expenses and deferred charges   |         |                | 63,116                          | 9          | 2,652,803                 |
|              | 10a  | Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>  | 10a     | 2,462,994      |                                 |            |                           |
|              | b    | Less accumulated depreciation   | 10b     | 1,465,800      | 1,010,053                       | 10c        | 997,194                   |
|              | 11   | Investments—publicly traded securities  |         | 19,978,014     | 11                              | 17,240,838 |                           |
|              | 12   | Investments—other securities See Part IV, line 11   | 451,923 | 12             | 448,831                         |            |                           |
|              | 13   | Investments—program-related See Part IV, line 11  |         |                | 13                              |            |                           |
|              | 14   | Intangible assets   |         |                |                                 | 14         |                           |
|              | 15   | Other assets See Part IV, line 11   |         |                | 32,626                          | 15         | 0                         |
|              | 16   | Total assets. Add lines 1 through 15 (must equal line 34)   |         |                | 21,872,869                      | 16         | 22,321,299                |
|              | 17   | Accounts payable and accrued expenses .   |         |                | 455,142                         | 17         | 955,001                   |
|              | 18   | Grants payable  |         | 18             |                                 |            |                           |
|              | 19   | Deferred revenue  | 54,500  | 19             | 54,500                          |            |                           |
|              | 20   | Tax-exempt bond liabilities   |         | 20             |                                 |            |                           |
| eS           | 21   | Escrow or custodial account liability Complete Part IV of Schedule  | eD.     |                |                                 | 21         | _                         |
| bilities     | 22   | Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified  |         |                |                                 |            |                           |
| Lial         |      | persons Complete Part II of Schedule L  |         |                |                                 | 22         |                           |
|              | 23   | Secured mortgages and notes payable to unrelated third parties  |         | •              |                                 | 23         |                           |
|              | 24   | Unsecured notes and loans payable to unrelated third parties  |         |                | 1,850,000                       | 24         | 1,425,000                 |
|              | 25   | Other liabilities Complete Part X of Schedule D   |         |                | 122,488                         | 25         | 2,719,335                 |
|              | 26   | Total liabilities. Add lines 17 through 25  |         |                | 2,482,130                       | 26         | 5,153,836                 |
| ~            |      | Organizations that follow SFAS 117, check here ► 🗸 and comp   | ete lii | nes 27         |                                 |            |                           |
| Ð            |      | through 29, and lines 33 and 34.  |         |                |                                 |            |                           |
| <u>a</u>     | 27   | Unrestricted net assets   |         |                | 19,390,739                      | 27         | 17,167,463                |
| B            | 28   | Temporarily restricted net assets   |         |                |                                 | 28         |                           |
| Fund Balance | 29   | Permanently restricted net assets   |         |                |                                 | 29         |                           |
| 큔            |      | Organizations that do not follow SFAS 117, check here ► ┌ and   | d com   | olete          |                                 |            |                           |
| ٥ř           |      | lines 30 through 34.  |         |                |                                 |            |                           |
|              | 30   | Capital stock or trust principal, or current funds  |         |                |                                 | 30         |                           |
| Assets       | 31   | Paid-in or capital surplus, or land, building or equipment fund .   |         |                |                                 | 31         |                           |
|              | 32   | Retained earnings, endowment, accumulated income, or other fu   | nds     |                |                                 | 32         |                           |
| Net          | 33   | Total net assets or fund balances   |         |                | 19,390,739                      | 33         | 17,167,463                |
|              | 34   | Total liabilities and net assets/fund balances  |         |                | 21,872,869                      | 34         | 22,321,299                |

| Ра  | Check if Schedule O contains a response to any question in this Part XI   |          |    | . [~ |         |
|-----|---|----------|----|------|---------|
| 1   | Total revenue (must equal Part VIII, column (A), line 12)   | 1        |    | 12,4 | 186,961 |
| 2   | Total expenses (must equal Part IX, column (A), line 25)  | 2        |    |      | 377,908 |
| 3   | Revenue less expenses Subtract line 2 from line 1   | 3        |    | -8   | 390,947 |
| 4   | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))   | 4        |    | 19,3 | 390,739 |
| 5   | Other changes in net assets or fund balances (explain in Schedule O)  | 5        |    | -1,3 | 32,329  |
| 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        |    | 17,1 | .67,463 |
| Pai | rt XII Financial Statements and Reporting   |          |    |      |         |
|     | Check if Schedule O contains a response to any question in this Part XII  |          |    | ୮    |         |
|     |   |          |    | Yes  | No      |
| 1   | Accounting method used to prepare the Form 990  |          |    |      |         |
| 2a  | Were the organization's financial statements compiled or reviewed by an independent accountant?   |          | 2a |      | Νo      |
| b   | Were the organization's financial statements audited by an independent accountant?  |          | 2b | Yes  |         |
| c   | If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain |          |    |      |         |
|     | Schedule O  | •        | 2c | Yes  |         |
| d   | If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were on a separate basis, consolidated basis, or both  | ıssued   |    |      |         |
|     | ☐ Separate basis ☐ Both consolidated and separated basis  |          |    |      |         |
| За  | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  | ne       | За | Yes  |         |
| b   | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits   | required | 3b | Yes  |         |

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DLN: 93493255000412

## 193493253000412

OMB No 1545-0047

2040

Open to Public Inspection

## **SCHEDULE A**

(Form 990 or 990EZ)

Name of the organization Southeastern Universities Research

Department of the Treasury Internal Revenue Service Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

**Public Charity Status and Public Support** 

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

Employer identification number

| Associa  | ssociation Inc 54-1156453   |  |                                     |   |   |                    |                       |   |                |                       |        |        |                               |  |
|--|---|--|-------------------------------------|---|---|--------------------|-----------------------|---|----------------|-----------------------|--------|--------|-------------------------------|--|
| Pai  | τI  | Reas   | on for Pu                           | blic Charity Sta  | <b>tus</b> (All org   | ganızatıons        | must comp             | lete this p   | art.) See in   | struction             | ıs     |        |                               |  |
| The o  | rganı   | zatıon ıs  | not a privat                        | te foundation becaus  | eıtıs (Forl   | ınes 1 throu       | gh 11, check          | only one bo   | ox)            |                       |        |        |                               |  |
| 1  | Γ   | A churc  | ch, conventi                        | on of churches, or as   | ssociation of   | churches de        | escribed in <b>se</b> | ection 170(b  | )(1)(A)(i).    |                       |        |        |                               |  |
| 2  | Γ   | A scho   | ol described                        | d in <b>section 170(b)(1</b>  | <b>)(A)(ii).</b> (At  | tach Schedu        | le E )                |   |                |                       |        |        |                               |  |
| 3  | Γ   | A hosp   | ıtal or a coo                       | perative hospital se  | rvice organiz   | atıon descri       | bed in <b>sectio</b>  | n 170(b)(1)   | (A)(iii).      |                       |        |        |                               |  |
| 4  | Γ   |  |                                     | h organization operat<br>ity, and state   | ed in conjun  | ction with a       | hospital desc         | cribed in <b>sec</b>  | tion 170(b)(1  | L)(A)(iii).           | Ente   | r the  |                               |  |
| 5  | Г   | An orga  | anization op                        | erated for the benefit  | t of a college  | or universit       | y owned or o          | perated by a  | governmenta    | al unit des           | cribe  | d ın   |                               |  |
|  |   | sect ion   | 170(b)(1)(                          | (A)(iv). (Complete P  | art II )  |                    |                       |   |                |                       |        |        |                               |  |
| 6  | $\Gamma$  |  |                                     | local government or   |   | al unit desci      | ıbed ın <b>secti</b>  | on 170(b)(1   | .)(A)(v).      |                       |        |        |                               |  |
| 7  | <b>∀</b>  | An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II)  A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)  |                                     |   |   |                    |                       |   |                |                       |        |        |                               |  |
| 8  | Γ   | A comr   | nunity trust                        | described in <b>section</b>   | 170(b)(1)(  | <b>A)(vi)</b> (Com | plete Part II         | )   |                |                       |        |        |                               |  |
| 9  | Γ   | An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of   |                                     |   |   |                    |                       |   |                |                       |        |        |                               |  |
|  |   |  |                                     |   | •   | -                  |                       |   | • •            |                       |        |        |                               |  |
|  | its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses |  |                                     |   |   |                    |                       |   |                |                       |        |        |                               |  |
| 40   | acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)                           |  |                                     |   |   |                    |                       |   |                |                       |        |        |                               |  |
| An organization organized and operated exclusively to test for public safety Seesection 509(a)(4).   |   |  |                                     |   |   |                    | ,                     |   |                |                       |        |        |                               |  |
| 11   | '   | An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See <b>section 509(a)(3).</b> Check the box that describes the type of supporting organization and complete lines 11e through 11h  a Type I  b Type III - Other |                                     |   |   |                    |                       |   |                |                       |        |        |                               |  |
| e  | Γ   | other th   | nan foundatı                        | ox, I certify that the<br>on managers and oth                                   |   |                    |                       |   |                |                       |        |        |                               |  |
| f  |   | If the o   | 509(a)(2)<br>rganızatıon<br>hıs box | received a written de   | etermination  | from the IRS       | S that it is a T      | Гуре I, Туре  | e II or Type I | II suppor             | tıng o | rganız | ation,                        |  |
| g  |   |  |                                     | 2006, has the organi  | zatıon accep  | ted any gift       | or contributio        | on from any   | of the         |                       |        |        |                               |  |
|  |   |  | g persons?                          |   |   |                    |                       |   |                |                       |        |        |                               |  |
|  |   |  |                                     | rectly or indirectly c  |   |                    |                       | persons des   | cribed in (ii) |                       | (:\    | Yes    | No                            |  |
|  |   |  |                                     | governing body of th  |   | _                  | tion?                 |   |                |                       | lg(i)  |        | <del></del>                   |  |
|  |   |  | •                                   | er of a person descri   |   |                    | ha                    |   |                |                       | .g(ii) |        | <del></del>                   |  |
|  |   |  |                                     | lled entity of a person   |   |                    |                       |   |                | 111                   | g(iii) |        |                               |  |
| h  |   | Provide  | the following                       | ng information about  | the supporte  | ed organizati      | on(s)                 |   |                |                       |        |        |                               |  |
| (i) Name of supported organization  Type |   |  |                                     | (iii)  Type of  organization (described on lines 1- 9 above or IRC section (see | (iv) Is the organization in col (i) listed in your governing document?  (v) Did you notify the organization in col (i) of your support? |                    |                       | Did you notify the Is the organization in col (i) of your col (i) organ |                | e<br>Ion In<br>anized | A moi  |        | <b>rii)</b><br>unt of<br>port |  |
|  |   |  |                                     | instructions))  | Yes   | No                 | Yes                   | No  | Yes            | No                    |        |        |                               |  |
|  |   |  |                                     |   |   |                    |                       |   |                |                       |        |        |                               |  |
|  |   |  |                                     |   |   | 1                  | I                     | 1   | 1              | I                     | 1 -    |        |                               |  |

Total

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

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

|          | under Fait III. II the   | organization ia  | ins to quanty ur   | idei tile tests i   | isted below, pie  | case co                                    | ilpiete F                     | ait 111.)                                |
|----------|--|--|--|---|---|--|-------------------------------|--|
|          | ection A. Public Support   | _  |  |   |   |  |                               |  |
| Cal      | endar year (or fiscal year beginning<br>in) ▶  | (a) 2006   | <b>(b)</b> 2007  | <b>(c)</b> 2008   | <b>(d)</b> 2009   | <b>(e)</b> 2                               | 010                           | (f) Total                                |
| 1        | Gifts, grants, contributions, and<br>membership fees received (Do not<br>include any "unusual<br>grants")  | 2,332,809  | 2,287,979  | 915,704   | 659,122   | 9  | ,574,878                      | 15,770,492                               |
| 2        | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf  |  |  |   |   |  |                               |  |
| 3        | The value of services or facilities furnished by a governmental unit to  |  |  |   |   |  |                               |  |
| 4        | the organization without charge <b>Total.</b> Add lines 1 through 3  | 2,332,809  | 2,287,979  | 915,704   | 659,122   | 9  | ,574,878                      | 15,770,492                               |
| 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  |  |  |   |   |  |                               |  |
| 6        | (f) <b>Public Support.</b> Subtract line 5  from line 4  |  |  |   |   |  |                               | 15,770,492                               |
| <u> </u> | ection B. Total Support  |  |  |   |   |  |                               |  |
|          | endar year (or fiscal year   |  | <i></i>  |   | (1) 2222  |  |                               |  |
|          | beginning in) 🟲  | (a) 2006   | <b>(b)</b> 2007  | (c) 2008  | (d) 2009  | <b>(e)</b> 20                              |                               | (f) Total                                |
| 7        | A mounts from line 4   | 2,332,809  | 2,287,979  | 915,704   | 659,122   | 9  | ,574,878                      | 15,770,492                               |
| 8        | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources   | 623,523  | 666,457  | 758,964   | 549,828   |  | 453,403                       | 3,052,175                                |
| 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)  | 149,918  | 258,064  | 55,924  | 15,473  |  | 222,715                       | 702,094                                  |
| 11       | Total support (Add lines 7 through 10)   |  |  |   |   |  |                               | 19,524,761                               |
| 12       | Gross receipts from related activition   | es, etc (See ınstr   | uctions )  |   |   | 12   | 1                             | 9,413,314                                |
| 13       | First Five Years If the Form 990 is for check this box and stop here   | or the organizatio   | n's first, second,   | thırd, fourth, or f   | fth tax year as a   | 501(c)(3                                   |                               | ation,<br>▶/                             |
|          | ection C. Computation of Pub   |  |  |   |   |  |                               |  |
| 14       | Public Support Percentage for 2010   |  |  | .1 column (f))  |   | 14   |                               | 80 772 %                                 |
| 15       | Public Support Percentage for 2009   |  |  |   |   | 15   |                               | 93 490 %                                 |
| b        | 33 1/3% support test—2010. If the and stop here. The organization qua 33 1/3% support test—2009. If the box and stop here. The organization 10%-facts-and-circumstances test-is 10% or more, and if the organization Part IV how the organization mee organization | lifies as a publicly organization did riqualifies as a pul<br>- <b>2010.</b> If the orga | y supported organ<br>not check the box<br>blicly supported o<br>nization did not cl<br>cts and circumsta | ization<br>on line 13 or 16<br>irganization<br>heck a box on lin<br>ances" test, chec | a, and line 15 is i<br>e 13, 16a, or 16l<br>ck this box and <b>st</b> | 33 1/3%<br>b and line<br>c <b>op here.</b> | or more, o<br>e 14<br>Explain | ►  <b>▽</b><br>check this<br>►  <b>¯</b> |
| ь<br>18  | 10%-facts-and-circumstances test-<br>15 is 10% or more, and if the organ<br>Explain in Part IV how the organizat<br>supported organization<br>Private Foundation If the organizationstructions   | ization meets the<br>tion meets the "fa  | "facts and circun<br>cts and circumsta   | nstances" test, o<br>ances" test The  | heck this box an<br>organization qua                                  | d <b>stop he</b><br>lifies as a            | e <b>re.</b><br>a publicly    | <b>▶</b> □                               |
|          |  |  |  |   |   |  |                               | - 1                                      |

organization

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total ın) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified 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 c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total in) 9 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f)) 15 16 Public support percentage from 2009 Schedule A, Part III, line 15 16 Section D. Computation of Investment Income Percentage Investment income percentage for **2010** (line 10c column (f) divided by line 13 column (f)) 17 **17** Investment income percentage from 2009 Schedule A, Part III, line 17 18 18 19a 33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported

33 1/3% support tests-2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

**▶**□

Part IV

**Supplemental Information.** Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Schedule A (Form 990 or 990-EZ) 2010

DLN: 93493255000412

OMB No 1545-0047

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

Department of the Treasury Internal Revenue Service

**Political Campaign and Lobbying Activities** 

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public **Inspection** 

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

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

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

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

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

| Name of the organization  |  |  | Employer iden   | tıfıcatıon number  |
|---|--|--|---|--|
| Southeastern Universities Research                              |  |  | Limployer iden  | cincation number   |
| Association Inc   |  |  | 54-1156453  |  |
| Part I-A Complete if the or                                     | ganization is exempt und   | er section 501(                                | c) or is a section 527  | organization.  |
| 1 Provide a description of the or                               | ganization's direct and indirect p   | olitical campaign act                          | ivities in Part IV  |  |
| 2 Political expenditures  |  |  | ►   | \$   |
| 3 Volunteer hours   |  |  |   |  |
| Part I-B Complete if the or                                     | ganization is exempt und   | er section 501(                                | c)(3).  |  |
| 1 Enter the amount of any excis-                                | e tax incurred by the organization   | under section 4955                             | <b>.</b>  | \$   |
| 2 Enter the amount of any excis-                                | e tax incurred by organization ma  | ınagers under sectioi                          | n 4955 🕨  | \$   |
| 3 If the organization incurred a s                              | section 4955 tax, did it file Form   | 4720 for this year?                            |   | ┌ Yes ┌ No   |
| <b>4a</b> Was a correction made?                                |  |  |   | ┌ Yes ┌ No   |
| <b>b</b> If "Yes," describe in Part IV                          |  |  |   |  |
| Part I-C Complete if the or                                     | ganization is exempt und   | er section 501(                                | c) except section 501   | l(c)(3).   |
| 1 Enter the amount directly expe                                | ended by the filing organization fo  | r section 527 exemp                            | ot function activities 🕨  | \$   |
|   | organization's funds contributed t   | o other organizations                          | for section 527   |  |
| exempt funtion activities                                       |  |  | •   | \$   |
| 3 Total exempt function expendi                                 | itures Add lines 1 and 2 Enter h   | ere and on Form 112                            | 0-POL, line 17b ►   | \$   |
| <b>4</b> Did the filing organization file <b>I</b>              | Form 1120-POL for this year?   |  |   | ☐ Yes ☐ No   |
|   | nd employer identification numbe   | I (ETIT) OF AIR SECTION                        | 327 political organizations   | to willen the ining  |
| amount of political contribution                                | For each organization listed, entens received that were promptly a political action committee (PAC | nd directly delivered                          | to a separate political orga  | nızatıon, such as a  |
| amount of political contribution                                | ns received that were promptly a   | nd directly delivered                          | to a separate political orga  | (e) A mount of political contributions received and promptly and directly delivered to a separate political                        |
| amount of political contribution separate segregated fund or a  | ns received that were promptly a political action committee (PAC                                   | nd directly delivered<br>) If additional space | to a separate political orga<br>is needed, provide informat<br>(d) A mount paid from<br>filing organization's | (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,  |
| amount of political contribution separate segregated fund or a  | ns received that were promptly a political action committee (PAC                                   | nd directly delivered<br>) If additional space | to a separate political orga<br>is needed, provide informat<br>(d) A mount paid from<br>filing organization's | (e) A mount of politica contributions received and promptly and directly delivered to a separate political organization If none,   |
| amount of political contributions separate segregated fund or a | ns received that were promptly a political action committee (PAC                                   | nd directly delivered<br>) If additional space | to a separate political orga<br>is needed, provide informat<br>(d) A mount paid from<br>filing organization's | (e) A mount of politica contributions received and promptly and directly delivered to a separate political organization If none,   |
| amount of political contribution separate segregated fund or a  | ns received that were promptly a political action committee (PAC                                   | nd directly delivered<br>) If additional space | to a separate political orga<br>is needed, provide informat<br>(d) A mount paid from<br>filing organization's | (e) A mount of politica contributions received and promptly and directly delivered to a separate political organization. If none,  |
| amount of political contribution separate segregated fund or a  | ns received that were promptly a political action committee (PAC                                   | nd directly delivered<br>) If additional space | to a separate political orga<br>is needed, provide informat<br>(d) A mount paid from<br>filing organization's | (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,  |
| amount of political contribution separate segregated fund or a  | ns received that were promptly a political action committee (PAC                                   | nd directly delivered<br>) If additional space | to a separate political orga<br>is needed, provide informat<br>(d) A mount paid from<br>filing organization's | (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,  |
| amount of political contribution separate segregated fund or a  | ns received that were promptly a political action committee (PAC                                   | nd directly delivered<br>) If additional space | to a separate political orga<br>is needed, provide informat<br>(d) A mount paid from<br>filing organization's | (e) A mount of politica contributions received and promptly and directly delivered to a separate political organization. If none,  |
| amount of political contribution separate segregated fund or a  | ns received that were promptly a political action committee (PAC                                   | nd directly delivered<br>) If additional space | to a separate political orga<br>is needed, provide informat<br>(d) A mount paid from<br>filing organization's | (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none,  |
| amount of political contribution separate segregated fund or a  | ns received that were promptly a political action committee (PAC                                   | nd directly delivered<br>) If additional space | to a separate political orga<br>is needed, provide informat<br>(d) A mount paid from<br>filing organization's | (e) A mount of politica contributions received and promptly and directly delivered to a separate political organization If none,   |
| amount of political contribution separate segregated fund or a  | ns received that were promptly a political action committee (PAC                                   | nd directly delivered<br>) If additional space | to a separate political orga<br>is needed, provide informat<br>(d) A mount paid from<br>filing organization's | (e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none, |
| amount of political contribution separate segregated fund or a  | ns received that were promptly a political action committee (PAC                                   | nd directly delivered<br>) If additional space | to a separate political orga<br>is needed, provide informat<br>(d) A mount paid from<br>filing organization's | (e) A mount of politica contributions received and promptly and directly delivered to a separate political organization If none,   |

section 4911 tax for this year?

┌ Yes ┌ No

| Ρ     | art II-A Complete if the organization under section 501(h)).  | is exempt under section 501(c)(3) a               | nd filed Form 5768                     | (election                                |  |  |  |
|-------|---|---|--|--|--|--|--|
|       | Check If the filing organization belongs to   |   |  |  |  |  |  |
| В     | Check I if the filing organization checked bo  Limits on Lobbying I  (The term "expenditures" means a |   | (a) Filing<br>Organization's<br>Totals | <b>(b)</b> Affiliated<br>Group<br>Totals |  |  |  |
| 1a    | Total lobbying expenditures to influence public of  | opinion (grass roots lobbying)                    |  |  |  |  |  |
| b     | Total lobbying expenditures to influence a legisl   | ative body (direct lobbying)                      | 280,521                                |  |  |  |  |
| C     | Total lobbying expenditures (add lines 1a and 1   | 280,521   |  |  |  |  |  |
| d     | O ther exempt purpose expenditures  | 13,097,387  |  |  |  |  |  |
| е     | Total exempt purpose expenditures (add lines 1  | 13,377,908  |  |  |  |  |  |
| f     | Lobbying nontaxable amount Enter the amount columns   | from the following table in both                  | 818,895                                |  |  |  |  |
|       | If the amount on line 1e, column (a) or (b) is:   | The lobbying nontaxable amount 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 over \$1,500,000  |  |  |  |  |  |
|       | Over \$17,000,000   | \$1,000,000                                       |  |  |  |  |  |
| <br>g | Grassroots nontaxable amount (enter 25% of li   | ne 1f)  | 204,724                                |  |  |  |  |
| h     | Subtract line 1g from line 1a If zero or less, ent  | rer -0 -  |  |  |  |  |  |
| i     | Subtract line 1f from line 1c If zero or less, ento   |   |  |  |  |  |  |

# 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting

|           | Lobbying Expenditures During 4-Year Averaging Period       |                 |                 |                 |                  |                  |  |  |
|-----------|--|-----------------|-----------------|-----------------|------------------|------------------|--|--|
|           | Calendar year (or fiscal year beginning in)                | <b>(a)</b> 2007 | <b>(b)</b> 2008 | <b>(c)</b> 2009 | ( <b>d)</b> 2010 | <b>(e)</b> Total |  |  |
| <u>2a</u> | Lobbying non-taxable amount                                | 528,079         | 455,283         | 387,304         | 818,895          | 2,189,561        |  |  |
| _b        | Lobbying ceiling amount<br>(150% of line 2a, column(e))    |                 |                 |                 |                  | 3,284,342        |  |  |
| _с        | Total lobbying expenditures                                | 325,511         | 270,709         | 271,010         | 280,521          | 1,147,751        |  |  |
| d         | Grassroots non-taxable amount                              | 132,020         | 113,821         | 96,826          | 204,724          | 547,391          |  |  |
| е<br>     | Grassroots ceiling amount<br>(150% of line 2d, column (e)) |                 |                 |                 |                  | 821,087          |  |  |
| f         | Grassroots lobbying expenditures                           | 0               | 0               | 0               | 0                | 0                |  |  |

| che             | edule C (Form 990 or 990-EZ) 2010  |        |              |          | Pί    | age <b>3</b> |
|-----------------|--|--------|--------------|----------|-------|--------------|
| Pa              | rt II-B Complete if the organization is exempt under section 501(c)(3) and has N (election under section 501(h)).  | IOT fi | led F        | orm      | 5768  | 3            |
|                 |  | (;     | a)           |          | (b)   |              |
|                 |  | Yes    | No           | , F      | Amoun | it           |
| L               | During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of               |        |              |          |       |              |
| а               | Volunteers?  |        |              |          |       |              |
| b<br>c          | Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  Media advertisements?  |        |              | -        |       |              |
|                 | Mailings to members, legislators, or the public?   |        | $\vdash$     | +-       |       |              |
|                 |  |        | $\vdash$     | +-       |       |              |
| e               | Publications, or published or broadcast statements?  |        |              | +-       |       |              |
| f               | Grants to other organizations for lobbying purposes?   |        | <del></del>  | ₩        |       |              |
| g               | Direct contact with legislators, their staffs, government officials, or a legislative body?  |        | <u> </u>     | ₩        |       |              |
| h<br>i          | Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  Other activities? If "Yes," describe in Part IV   |        | <del> </del> | $\vdash$ |       |              |
| j               | Total lines 1c through 1i  |        |              | +-       |       |              |
| ,<br>2a         | Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?  |        | I            |          |       |              |
|                 | If "Yes," enter the amount of any tax incurred under section 4912  |        |              | ┨        |       |              |
|                 | If "Yes," enter the amount of any tax incurred by organization managers under section 4912   |        |              |          |       |              |
|                 | If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?   |        | I            |          |       |              |
|                 | t III-A Complete if the organization is exempt under section 501(c)(4), section 5  | 01/6   | 1(5)         |          |       |              |
|                 | 501(c)(6).   | J)10-  | <u>,,,,</u>  |          |       |              |
|                 |  |        | _            | _        | Yes   | No           |
| 1               | Were substantially all (90% or more) dues received nondeductible by members?   |        | - L          | 1        |       |              |
| 2               | Did the organization make only in-house lobbying expenditures of \$2,000 or less?  |        | L            | 2        |       |              |
| 3               | Did the organization agree to carryover lobbying and political expenditures from the prior year?   |        |              | 3        |       |              |
| <sup>2</sup> aı | t III-B Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part II answered "Yes".   |        |              |          | ectio | n            |
| 1               | Dues, assessments and similar amounts from members   | 1      |              |          |       |              |
| 2               | Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  |        |              |          |       |              |
| а               | Current year   | 2a     |              |          |       |              |
| b               | Carryover from last year   | 2b     |              |          |       |              |
| c               | Total  | 2c     |              |          |       |              |
| 3               | Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  | 3      |              |          |       |              |
| 4               | If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? | 4      |              |          |       |              |

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 11

Identifier | Return Reference | Explanation

Part IV Supplemental Information

Also, complete this part for any additional information

5 Taxable amount of lobbying and political expenditures (see instructions)

5

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

DLN: 93493255000412

OMB No 1545-0047

**SCHEDULE D** (Form 990)

Department of the Treasury

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

Open to Public

| emal     | Revenue Service                                 | ► Attach to Fo  | orm 990. ► See separate instructions.   |          |                         | Inspec     | tion      |
|----------|---|---|---|----------|-------------------------|------------|-----------|
|          | me of the organi                                |   |   | Emp      | loyer ident if ica      | tion numb  | er        |
|          | theastern Universitie<br>ociation Inc           | es Research   |   | 54-      | 1156453                 |            |           |
| Pa       | rt I Organ                                      | izations Maintaining Donor A  | dvised Funds or Other Similar F   |          |                         | . Comple   | te if the |
|          | organiz   | zation answered "Yes" to Form 99  |   |          |                         |            |           |
|          |   |   | (a) Donor advised funds   | - (      | ( <b>b)</b> Funds and o | ther accou | unts      |
| •        | Total number a                                  |   |   |          |                         |            |           |
|          | 55 5  | tributions to (during year)   |   |          |                         |            |           |
| ;        | 33 3 3  | nts from (during year)  |   |          |                         |            |           |
| •        |   | e at end of year  |   | <u> </u> |                         |            |           |
| •        | _   |   | sors in writing that the assets held in dor<br>organization's exclusive legal control?  | nor advi | sed                     | ┌ Yes      | ┌ No      |
| ,        | used only for c                                 |   | donor advisors in writing that grant funds efit of the donor or donor advisor, or for a   |          |                         | ┌ Yes      | ┌ No      |
| aı       |   |   | if the organization answered "Yes" t  | o Forn   | n 990, Part IV          | , line 7.  |           |
| <u>'</u> | Preservati Protection Preservati Complete lines | conservation easements held by the or<br>ion of land for public use (e g , recreati<br>i of natural habitat<br>ion of open space<br>s 2a-2d if the organization held a quali<br>he last day of the tax year |   | certifie | d historic struc        |            | ea        |
|          |   |   |   |          | Held at the             | End of the | e Year    |
| а        | Total number o                                  | of conservation easements   |   | 2a       |                         |            |           |
| b        | Total acreage i                                 | restricted by conservation easements  |   | 2b       |                         |            |           |
| c        | Number of cons                                  | servation easements on a certified his  | toric structure included in (a)   | 2c       |                         |            |           |
| d        | Number of cons                                  | servation easements included in (c) ac  | cquired after 8/17/06   | 2d       |                         |            |           |
| ı        | the taxable yea                                 | servation easements modified, transfe<br>ar <b>F</b><br>es where property subject to conserva   | erred, released, extinguished, or terminate   | ed by th | ne organization         | during     |           |
|          |   | nization have a written policy regarding<br>f the conservation easements it holds?  | g the periodic monitoring, inspection, han  | dling of | violations, and         | ┌ Yes      | ┌ No      |
|          |   |   | pecting and enforcing conservation easen  |          |                         | -          |           |
| ,        | ·   | <del>-</del>  | ng, and enforcing conservation easement   | •        | g the year 🟲 \$ _       |            |           |
| j        | 170(h)(4)(B)(ı)                                 | ) and 170(h)(4)(B)(II)?   | (d) above satisfy the requirements of sec   |          |                         | ☐ Yes      | ┌ No      |
| )        | balance sheet,                                  |   | onservation easements in its revenue and<br>the footnote to the organization's financia<br>nents                                    |          |                         |            |           |
| ar       | <b>t IIII Organ</b><br>Comple                   | izations Maintaining Collectio<br>ete ıf the organızatıon answered '  | ns of Art, Historical Treasures,<br>'Yes" to Form 990, Part IV, line 8.   | or Otl   | her Similar <i>i</i>    | Assets.    |           |
| .a       | art, historical t                               | reasures, or other similar assets held  | 116, not to report in its revenue stateme<br>for public exhibition, education or resear<br>ancial statements that describes these i | ch ın fu |                         |            | e,        |
| b        | historical treas                                | ·   | 116, to report in its revenue statement a<br>public exhibition, education, or research i<br>s                                       |          |                         | •          |           |
|          | (i) Revenues II                                 | ncluded in Form 990, Part VIII, line 1  |   |          | <b>►</b> \$             |            |           |
|          | (ii) Assets incl                                | luded in Form 990, Part X   |   |          |                         |            |           |
| <u>!</u> | If the organizat                                | •   | orical treasures, or other similar assets f<br>S 116 relating to these items  | or finan |                         |            | _         |
| а        | Revenues incli                                  | uded in Form 990. Part VIII. line 1   |   |          | <b>▶</b> \$             |            |           |

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

| Part    | •••• Organizations Maintaining Co  | llections of Art       | <u>:, His</u> | tori     | <u>cal Tre</u>          | <u>easu</u> | res, or Ot                   | <u>:her</u> | <u>Similar A</u> | sset       | <b>S</b> (co.   | ntınued) |
|---------|--|------------------------|---------------|----------|-------------------------|-------------|------------------------------|-------------|------------------|------------|-----------------|----------|
| 3       | Using the organization's accession and othe items (check all that apply)   | r records, check an    | y of th       | ne foll  | lowing t                | hat are     | e a significai               | nt us       | e of its colle   | ction      |                 |          |
| а       | Public exhibition  |                        | d             | Γ        | Loan o                  | rexch       | nange progra                 | ams         |                  |            |                 |          |
| b       | Scholarly research   |                        | e             | Γ        | Other                   |             |                              |             |                  |            |                 |          |
| С       | Preservation for future generations  |                        |               |          |                         |             |                              |             |                  |            |                 |          |
| 4       | Provide a description of the organization's co   | ollections and expla   | ıın hov       | w the    | y furthe                | r the o     | rganızatıon's                | s exe       | empt purpose     | ın         |                 |          |
| 5       | During the year, did the organization solicit of assets to be sold to raise funds rather than t  |                        |               |          |                         |             |                              |             | lar              | <b>Γ</b> γ | 'es             | ┌ No     |
| Par     | Escrow and Custodial Arrang Part IV, line 9, or reported an an   |                        |               |          |                         |             | answered                     | Ι "Υϵ       | es" to Form      | 990,       |                 |          |
| 1a      | Is the organization an agent, trustee, custod included on Form 990, Part X?  | ıan or other ınterme   | ediary        | for c    | ontribut                | ions d      | or other asse                | ets n       | ot               | <b>┌</b>   | 'es             | ☐ No     |
| b       | If "Yes," explain the arrangement in Part XIV  | / and complete the     | follow        | ving t   | able                    |             | Г                            | <u> </u>    | Δ                | mour       | •+              |          |
| c       | Darwaya balanca  |                        |               |          |                         |             | <b>-</b>                     | 1c          | ^                | IIIOui     | <u> </u>        |          |
| d       | Beginning balance  |                        |               |          |                         |             | <u> </u>                     | 1d          |                  |            |                 |          |
| e       | The state of the s |                        |               |          |                         |             |                              |             |                  |            |                 |          |
| f       |  |                        |               |          |                         |             |                              |             |                  |            |                 |          |
|         | Ending balance  Did the organization include an amount on Fo   | orm 990 Bart V I:-     | A 217         |          |                         |             | <u>_</u>                     |             |                  |            |                 |          |
| 2a<br>L | <del>-</del>   | •                      | e Zī '        |          |                         |             |                              |             |                  | , 1        | es              | ) NO     |
|         | If "Yes," explain the arrangement in Part XIV <b>rt V Endowment Funds.</b> Complete  |                        | n and         |          | ad "Vac                 | " to [      | Form 000                     | Dort        | · TV   line 10   |            |                 |          |
| Pa      | Endowinient Funds. Complete  | (a)Current Year        |               | )Prior ' |                         |             |                              |             | hree Years Back  |            | our Ye          | ars Back |
| 1a      | Beginning of year balance  | (,                     | <u> </u>      | ,        |                         | (-,         |                              | (/-         |                  | (-,-       |                 |          |
| ь       | Contributions  |                        |               |          |                         |             |                              |             |                  |            |                 |          |
| c       | Investment earnings or losses  |                        |               |          |                         |             |                              |             |                  |            |                 |          |
| d       | Grants or scholarships   |                        |               |          |                         |             |                              |             |                  |            |                 |          |
| e       | Other expenditures for facilities and programs   |                        |               |          |                         |             |                              |             |                  |            |                 |          |
| f       | Administrative expenses  |                        |               |          |                         |             |                              |             |                  |            |                 |          |
| g       | End of year balance  |                        |               |          |                         |             |                              |             |                  |            |                 |          |
| 2       | Provide the estimated percentage of the yea  | r end balance held     | as            |          |                         |             |                              |             |                  |            |                 |          |
| а       | Board designated or quasi-endowment 🕨  |                        |               |          |                         |             |                              |             |                  |            |                 |          |
| b       | Permanent endowment 🕨  |                        |               |          |                         |             |                              |             |                  |            |                 |          |
| c       | Term endowment ▶   |                        |               |          |                         |             |                              |             |                  |            |                 |          |
| 3a      | Are there endowment funds not in the posses  | ssion of the organiz   | atıon         | that a   | are held                | and a       | dmınıstered                  | for t       | :he              | _          |                 |          |
|         | organization by  |                        |               |          |                         |             |                              |             | _                |            | Yes             | No       |
|         | (i) unrelated organizations  |                        |               | •        |                         |             |                              | •           |                  | (i)        |                 |          |
|         | (ii) related organizations   |                        |               |          |                         |             |                              |             | · · · -          | (ii)       |                 |          |
| ь<br>4  | If "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of the   | •                      |               |          |                         |             |                              | •           |                  | 3b         |                 |          |
|         | t VI Investments—Land, Buildings   |                        |               |          |                         | 20 Da       | rt V ling 1                  | 10          |                  |            |                 |          |
| Геп     | t vi investments—Land, buildings   | s, and Equipme         | 111.          |          |                         |             | ,                            |             | (-)              |            |                 |          |
|         | Description of investment  |                        |               |          | ) Cost or<br>is (invest |             | (b)Cost or ot<br>basis (othe |             | (c) Accumulated  |            | ( <b>d</b> ) Bo | ok value |
| 1a      | Land   |                        |               |          |                         |             | 780,                         | ,789        |                  |            |                 | 780,789  |
| b       | Buildings  |                        |               |          |                         |             | 1,392                        | ,726        | 1,211            | ,148       |                 | 181,578  |
| c       | Leasehold improvements   |                        |               |          |                         |             | 28                           | ,042        | 15               | ,131       |                 | 12,911   |
| d I     | Equipment  |                        |               |          |                         |             | 261                          | ,437        | 239              | ,521       |                 | 21,916   |
|         | Other  | <u> </u>               |               |          |                         |             |                              |             |                  | $\_\_$     |                 |          |
| Tota    | <b>I.</b> Add lines 1a-1e <i>(Column (d) should equal Fo</i>   | orm 990, Part X, colui | mn (B,        | ), line  | 10(c).)                 |             |                              |             | 🕨                |            |                 | 997,194  |
|         |  |                        |               |          |                         |             |                              |             | Schedule         | D (Fo      | orm 9           | 90) 2010 |

| Investments—Other Securities. See   | orm 990, Part X, line 12                |                     |                      |
|---|---|---------------------|----------------------|
| (a) Description of security or category   | (b)Book value                           | (c) Method of v     |                      |
| (including name of security)  | (2)20011 10100                          | Cost or end-of-year | market value         |
| (1)Financial derivatives  |   |                     |                      |
| (2)Closely-held equity interests  |   |                     |                      |
| Other   |   |                     |                      |
|   |   |                     |                      |
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| Total. (Column (b) should equal Form 990, Part X, col (B) line 12)  |   |                     |                      |
| Part VIII Investments—Program Related. See  | Form 990. Part X. line                  | 13.                 |                      |
|   |   | (c) Method of v     | aluation             |
| (a) Description of investment type  | (b) Book value                          | Cost or end-of-year | market value         |
|   |   | Cost of the of year | market value         |
|   |   |                     |                      |
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| Total (Column (h) should agual Form 900, Bart V, col (B) line 12.)  |   |                     |                      |
|   |   |                     |                      |
| Part IX Other Assets. See Form 990, Part X, lin   | e 15.                                   |                     |                      |
|   | e 15.                                   |                     | <b>b)</b> Book value |
| Part IX Other Assets. See Form 990, Part X, lin   | e 15.                                   |                     | <b>b)</b> Book value |
| Part IX Other Assets. See Form 990, Part X, lin   | e 15.                                   |                     | <b>b)</b> Book value |
| Part IX Other Assets. See Form 990, Part X, lin   | e 15.                                   |                     | <b>b)</b> Book value |
| Part IX Other Assets. See Form 990, Part X, lin   | e 15.                                   |                     | <b>b)</b> Book value |
| Part IX Other Assets. See Form 990, Part X, lin   | e 15.                                   |                     | <b>b)</b> Book value |
| Part IX Other Assets. See Form 990, Part X, lin   | e 15.                                   |                     | <b>b)</b> Book value |
| Part IX Other Assets. See Form 990, Part X, lin   | e 15.                                   |                     | <b>b)</b> Book value |
| Part IX Other Assets. See Form 990, Part X, lin   | e 15.                                   |                     | <b>b)</b> Book value |
| Part IX Other Assets. See Form 990, Part X, lin   | e 15.                                   |                     | <b>b)</b> Book value |
| Part IX Other Assets. See Form 990, Part X, lin   | e 15.                                   |                     | <b>b)</b> Book value |
| Part IX Other Assets. See Form 990, Part X, lin   | e 15.                                   |                     | <b>b)</b> Book value |
| Part IX Other Assets. See Form 990, Part X, lin   | e 15.                                   |                     | <b>b)</b> Book value |
| Part IX Other Assets. See Form 990, Part X, lin   | e 15.                                   |                     | <b>b)</b> Book value |
| Part IX Other Assets. See Form 990, Part X, lin   | e 15.                                   |                     | <b>b)</b> Book value |
| Part IX Other Assets. See Form 990, Part X, lin   | e 15.                                   |                     | <b>b)</b> Book value |
| Part IX Other Assets. See Form 990, Part X, lin   | e 15.                                   |                     | <b>b)</b> Book value |
| Part IX Other Assets. See Form 990, Part X, lin   | e 15.                                   |                     | <b>b)</b> Book value |
| Part IX Other Assets. See Form 990, Part X, lin (a) Descrip   | e 15.<br>tion                           |                     | <b>b)</b> Book value |
| Part IX Other Assets. See Form 990, Part X, lin (a) Descrip  Total. (Column (b) should equal Form 990, Part X, col.(B) line 1:  | e 15. tion  5.)                         |                     | <b>b)</b> Book value |
| Part IX Other Assets. See Form 990, Part X, line (a) Descrip  | e 15. tion  5.)                         |                     | <b>b)</b> Book value |
| Part IX Other Assets. See Form 990, Part X, lin (a) Descrip  Total. (Column (b) should equal Form 990, Part X, col.(B) line 1:  | e 15. tion  5.) , line 25.              |                     | <b>b)</b> Book value |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1:  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability                         | e 15. tion  5.) , line 25. (b) Amount   |                     | <b>b)</b> Book value |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1:  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes | E 15. tion  5.) , line 25. (b) Amount 0 |                     | <b>b)</b> Book value |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1:  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes | e 15. tion  5.) , line 25. (b) Amount   |                     | <b>b)</b> Book value |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1:  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes | E 15. tion  5.) , line 25. (b) Amount 0 |                     | <b>b)</b> Book value |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1:  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes | E 15. tion  5.) , line 25. (b) Amount 0 |                     | <b>b)</b> Book value |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1:  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes | E 15. tion  5.) , line 25. (b) Amount 0 |                     | <b>b)</b> Book value |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1:  Part X Other Liabilities. See Form 990, Part X   | E 15. tion  5.) , line 25. (b) Amount 0 |                     | <b>b)</b> Book value |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1:  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes | E 15. tion  5.) , line 25. (b) Amount 0 |                     | b) Book value        |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1:  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes | E 15. tion  5.) , line 25. (b) Amount 0 |                     | b) Book value        |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1:  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes | E 15. tion  5.) , line 25. (b) Amount 0 |                     | b) Book value        |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1:  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes | E 15. tion  5.) , line 25. (b) Amount 0 |                     | b) Book value        |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1:  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes | E 15. tion  5.) , line 25. (b) Amount 0 |                     | b) Book value        |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1:  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes | E 15. tion  5.) , line 25. (b) Amount 0 |                     | b) Book value        |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1:  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes | E 15. tion  5.) , line 25. (b) Amount 0 |                     | b) Book value        |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1:  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes | E 15. tion  5.) , line 25. (b) Amount 0 |                     | b) Book value        |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1:  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes | E 15. tion  5.) , line 25. (b) Amount 0 |                     | b) Book value        |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1:  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes | E 15. tion  5.) , line 25. (b) Amount 0 |                     | b) Book value        |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1:  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes | E 15. tion  5.) , line 25. (b) Amount 0 |                     | b) Book value        |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1:  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes | E 15. tion  5.) , line 25. (b) Amount 0 |                     | b) Book value        |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1:  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes | E 15. tion  5.) , line 25. (b) Amount 0 |                     | b) Book value        |

| Par  | t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen  | ts    |        |
|------|--|-------|--------|
| 1    | Total revenue (Form 990, Part VIII, column (A), line 12)   | 1     |        |
| 2    | Total expenses (Form 990, Part IX, column (A), line 25)  | 2     |        |
| 3    | Excess or (deficit) for the year Subtract line 2 from line 1   | 3     |        |
| 4    | Net unrealized gains (losses) on investments   | 4     |        |
| 5    | Donated services and use of facilities   | 5     |        |
| 6    | Investment expenses  | 6     |        |
| 7    | Prior period adjustments   | 7     |        |
| 8    | Other (Describe in Part XIV)   | 8     |        |
| 9    | Total adjustments (net) Add lines 4 - 8  | 9     |        |
| 10   | Excess or (deficit) for the year per financial statements Combine lines 3 and 9  | 10    |        |
| Part | Reconciliation of Revenue per Audited Financial Statements With Revenue pe   | er Re | turn   |
| 1    | Total revenue, gains, and other support per audited financial statements   | 1     |        |
| 2    | Amounts included on line 1 but not on Form 990, Part VIII, line 12   |       |        |
| а    | Net unrealized gains on investments  |       |        |
| b    | Donated services and use of facilities   |       |        |
| c    | Recoveries of prior year grants  |       |        |
| d    | Other (Describe in Part XIV)   |       |        |
| e    | Add lines <b>2a</b> through <b>2d</b>  | 2e    |        |
| 3    | Subtract line <b>2e</b> from line <b>1</b>   | 3     |        |
| 4    | Amounts included on Form 990, Part VIII, line 12, but not on line 1  |       |        |
| а    | Investment expenses not included on Form 990, Part VIII, line 7b . 4a  |       |        |
| b    | Other (Describe in Part XIV)   |       |        |
| С    | Add lines <b>4a</b> and <b>4b</b>  | 4c    |        |
| 5    | Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)  | 5     |        |
|      | Reconciliation of Expenses per Audited Financial Statements With Expenses  | per F | Return |
| 1    | Total expenses and losses per audited financial statements   | 1     |        |
| 2    | Amounts included on line 1 but not on Form 990, Part IX, line 25   |       |        |
| a    | Donated services and use of facilities   |       |        |
| ь    | Prior year adjustments   |       |        |
| c    | Other losses   |       |        |
| d    | Other (Describe in Part XIV) 2d  |       |        |
| e    | Add lines 2a through 2d  | 2e    |        |
| 3    | Subtract line <b>2e</b> from line <b>1</b>   | 3     |        |
| 4    | Amounts included on Form 990, Part IX, line 25, but not on line 1:   |       |        |
| а    | Investment expenses not included on Form 990, Part VIII, line 7b 4a  |       |        |
| b    | Other (Describe in Part XIV) 4b  |       |        |
| c    | Add lines <b>4a</b> and <b>4b</b>  | 4c    |        |
| 5    | Total expenses Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 18)   | 5     |        |
| Par  | t XIV Supplemental Information   |       |        |
|      | plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Pai<br>V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete th |       |        |

additional information

| Identifier  | Return Reference | Explanation   |
|---|------------------|---|
| FIN 48 Footnote from Consolidated<br>Audited Financial Statements |                  | FASB ASC 740-10-25 requires that management evaluate tax positions taken by SURA and recognize a tax liability (or assets) if SURA has taken an uncertain tax position that more likely than not would not be sustained upon examination by the Internal Revenue Service SURA has analyzed the tax positions taken and has concluded that as of September 30, 2011, there are no uncertain tax positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in financial statements |

**Compensation Information** 

DLN: 93493255000412

OMB No 1545-0047

**Schedule J** (Form 990)

Department of the Treasury

Internal Revenue Service

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

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

| Name of the organization           |
|------------------------------------|
| Southeastern Universities Research |
| Association Inc                    |

**Employer identification number** 

54-1156453

| Pa | Questions Regarding Compensatio   | n          |  |    |     |    |
|----|---|------------|--|----|-----|----|
|    |   |            |  |    | Yes | No |
| 1a | Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part II                            |            |  |    |     |    |
|    | First-class or charter travel   | Г          | Housing allowance or residence for personal use              |    |     |    |
|    | Travel for companions   |            | Payments for business use of personal residence              |    |     |    |
|    | Tax idemnification and gross-up payments  | Γ          | Health or social club dues or initiation fees                |    |     |    |
|    | Discretionary spending account  | Γ          | Personal services (e g , maid, chauffeur, chef)              |    |     |    |
| b  | If any of the boxes in line 1a are checked, did the o reimbursement orprovision of all the expenses desc                            |            |  | 1b |     |    |
| 2  | Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executive                           |            |  | 2  |     |    |
| 3  | Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all to Compensation committee |            |  |    |     |    |
|    | ✓ Independent compensation consultant   | 굣          | Compensation survey or study                                 |    |     |    |
|    | Form 990 of other organizations   | <u> </u>   | Approval by the board or compensation committee              |    |     |    |
| 4  | During the year, did any person listed in Form 990, or a related organization   | Part VII   | , Section A, line 1a with respect to the filing organization |    |     |    |
| а  | Receive a severance payment or change-of-control  | paymen     | t from the organization or a related organization?           | 4a |     | No |
| b  | Participate in, or receive payment from, a suppleme   | ntal non   | qualified retirement plan?                                   | 4b |     | Νo |
| C  | Participate in, or receive payment from, an equity-b  | ased co    | mpensation arrangement?                                      | 4c |     | Νo |
|    | If "Yes" to any of lines 4a-c, list the persons and pi  | rovide th  | e applicable amounts for each item in Part III               |    |     |    |
|    | Only 501(c)(3) and 501(c)(4) organizations only me  | ust comp   | olete lines 5-9.   |    |     |    |
| 5  | For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of                                     | , lıne 1a, | did the organization pay or accrue any                       |    |     |    |
| а  | The organization?   |            |  | 5a |     | Νo |
| b  | Any related organization?   |            |  | 5b |     | No |
|    | If "Yes," to line 5a or 5b, describe in Part III  |            |  |    |     |    |
| 6  | For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of                                 | , lıne 1a, | did the organization pay or accrue any                       |    |     |    |
| а  | The organization?   |            |  | 6a |     | Νo |
| b  | Any related organization?   |            |  | 6b |     | Νo |
|    | If "Yes," to line 6a or 6b, describe in Part III  |            |  |    |     |    |
| 7  | For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes,"                              |            |  | 7  |     | No |
| 8  | Were any amounts reported in Form 990, Part VII, subject to the initial contract exception described in                             |            |  |    |     |    |
|    | subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III                 |            |  |    |     | No |
| 9  | If "Yes" to line 8, did the organization also follow th section 53 4958-6(c)?   | e rebutta  | able presumption procedure described in Regulations          | 9  |     |    |

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

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

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

| (A) Name               |             | (B) Breakdown of W-2 and/or 1099-MISC compensation |   |   | (C) Retirement and             | ( <b>D)</b> Nontaxable | (E) Total of columns |   |
|------------------------|-------------|--|---|---|--------------------------------|------------------------|----------------------|---|
|                        |             | (i) Base<br>compensation                           | (ii) Bonus &<br>ıncentıve<br>compensatıon | (iii) Other<br>reportable<br>compensation | other deferred<br>compensation | benefits               | (B)(ı)-(D)           | reported in prior<br>Form 990 or<br>Form 990-EZ |
| (1) PETER BJONERUD     | (ı)<br>(ıı) | 222,818  | 0   | 0 0                                       | 22,282                         | 11,798<br>0            | 256,898<br>0         | 0   |
| (2)ELIZABETH<br>LAWSON | (ı)<br>(ıı) | 176,256<br>0                                       | 0   | ,   | 17,626                         | 9,990<br>0             | 203,872              | 0   |
| (3) GREG KUBIAK        | (ı)<br>(ıı) | 168,483<br>0                                       | 0   | `   | 16,848                         |                        | 197,094<br>0         | C   |
| (4) JERRY DRAAYER      | (ı)<br>(ıı) | 406,004  | 0   | []  | 22,912                         | 42,533<br>0            | 471,449<br>0         | C   |
| (5) GARY CRANE         | (ı)<br>(ıı) | 183,731<br>0                                       | 0   | i l                                       | 18,373                         | 11,798<br>0            | 213,902              | 0   |
| (6)                    |             |  | 1   |   |                                |                        |                      |   |
| (7)                    |             | 1  | 1   |   |                                |                        |                      |   |
| (8)                    | +           | <u>'</u>   |   |   | †                              |                        |                      |   |
| (9)                    | +-          | <b>†</b>   |   |   | †                              |                        |                      |   |
| ( 10 )                 | +           | <b>!</b>   |   |   | †                              |                        |                      |   |
| ( 11 )                 | +-          | †  |   |   | †                              |                        |                      |   |
| ( 12 )                 | +           | †  |   |   | †                              |                        |                      |   |
| ( 13 )                 | +           | +  |   |   | †                              |                        |                      |   |
| ( 14 )                 | +-          | +  |   |   | †                              |                        |                      |   |
| ( 15 )                 | +           | +  |   |   | †                              |                        |                      |   |
| ( 16 )                 | +-          | +  |   |   | +                              |                        | -                    |   |

Schedule J (Form 990) 2010 Page **3** 

## Part III Supplemental Information

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

|  | Identifier | Return Reference | Explanation |
|--|------------|------------------|-------------|
|--|------------|------------------|-------------|

Schedule J (Form 990) 2010

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493255000412

OMB No 1545-0047

**SCHEDULE 0** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

> Form 990 or to provide any additional information. ► Attach to Form 990 or 990-EZ.

Open to Public Inspection

| Name of the organization           | Employer identification number |
|------------------------------------|--------------------------------|
| Southeastern Universities Research |                                |
| Association Inc                    | 54-1156453                     |

| ldentifier                                | Return<br>Reference | Explanation  |
|---|---------------------|--|
| Form 990, Part IV,<br>Line 12 and Part XI |                     | SURA receives a consolidated annual audit in accordance with generally accepted accounting principles Consistent with SURA's majority and controlling interest in Jefferson Science Associates LLC (JSA), the consolidated financial statements include the activities of SURA and the operations of JSA |

| Identifier                                | Return<br>Reference | Explanation  |
|---|---------------------|--|
| Form 990,<br>Part VI,<br>Lines 6 and<br>7 |                     | SURA is organized as a non-stock, non-profit corporation and has three categories of members standard members, entity members, and affiliate members. Standard members are institutions of higher learning or other complementary organizations that are exempt section 501(c)(3) of the Internal Revenue Code, or that are the equivalent of Section 501(c)(3) organizations, and desire full participation in SURA's activities and support its goals Each standard member has one vote and is represented both on the council of presidents, which provides overall direction and leadership to the corporation, and the board of trustees which manages the funds and business of the corporation. Entity members are for-profit entities which participate in some or all programmatic activities of the organization and support the goals of the corporation. There are 3 classes of entity membership, A, B and C, but only class A entity members have a vote and are represented on the council of presidents and the board of trustees. Class B and C entity members may attend the board of trustees meetings by invitation only and may participate in programmatic activities as permitted by policy and procedures. Affiliate members are non profit members desiring some participation in SURA's programmatic activites. Affiliate members do not have a vote nor are they represented on the council of presidents or the board of trustees. Both the standard member and the class A entity member are admitted to the corporation by the affirmative vote of the council of presidents. All other membership categories are admitted by affirmative vote of the board of trustees. |

| ldentifier                       | Return<br>Reference | Explanation  |  |
|----------------------------------|---------------------|--|--|
| Form 990,<br>Part VI, Line<br>11 |                     | The CFO is responsible for assembling all information required to complete the form 990 which is ultimately prepared and reviewed by the organization's independent accounting firm KPMG. A final review of the form 990 is then conducted first by the CEO and then by the chair of the SURA finance committee on behalf of the board. Shortly before submitting the form 990 to the IRS, an information copy is provided to each trustee of the SURA board of trustees. A copy of the Form 990 is also provided to the corporate secretary as a permanent file copy for public access. |  |

| ldentifier                        | Return<br>Reference | Explanation   |
|-----------------------------------|---------------------|---|
| Form 990,<br>Part VI,<br>Line 12c |                     | It is SURA's policy that trustees, officers, committee members, staff, volunteers and others while acting on behalf of SURA, must avoid conflicts of interest. Even appearance of a conflict of interest must be avoided. Monitoring compliance with this policy is accomplished through a "mandatory conflict of interest disclosure policy" which requires that all board of trustees, officers, senior staff as designated by the president, and other specific individuals who may be considered to be "disqualified persons" under Federal Regulation 53 4958-3 sign and submit on an annual basis a mandatory disclosure statement to the corporate secretary. The corporate secretary is responsible for enforcing the mandatory disclosure policy and is required to maintain and annually update a file of signed mandatory disclosure statements. Disclosure statements are distributed annually and second notices are sent to non respondents. If the corporate secretary in consultation with SURA's general counsel conclude that a conflict of interest exists, the individual must not participate in the deliberations, consideration or vote in the transaction or matter at issue. A notation must be made in the minutes of any meeting at which deliberation, consideration or vote in the transaction or matter at issue is undertaken indicating that the individual with a conflict or potential conflict was excused for the meeting, took no part in any discussions pertaining to the transaction or matter, and refrained from voting on the transaction or matter. |

| Identifier                       | Return<br>Reference | Explanation   |
|----------------------------------|---------------------|---|
| Form 990,<br>Part VI,<br>Line 15 |                     | The SURA board of trustees elects a compensation committee (committee) consisting of the chair and vice chair of the council of presidents, the chair and immediate past chair of the board of trustees, and the chair of the finance committee. The committee is an independent body responsible for compensation review and approval of, or transactions with, SURA's top management officials, officers, and key employees in accordance with SURA's compensation policy and intermediate sanctions compliance policy. The committee reviews or determines compensation for SURA's top management officials, officers, and key employees in comparison to compensation levels and other consideration paid by similarly situated organizations, both taxable and tax-exempt, for functionally comparable positions or transactions, and taking into account the location of the other organizations and the availability of similar specialties in the geographic area. The committee determines competitive compensation each year through surveys by nationally recognized independent firms and other relevant data when appropriate. The committee supplements this information by retaining independent human resources management consultants approximately every three years. The deliberations and decisions of the committee are facilitated and contemporaneously documented by the SURA Director of Administration and Human Resource Services. In compliance with the independent compensation analysis, the committee approves the salary range and specific salary of the SURA president and prepares formal correspondence amending the employment contract of the president. The committee reviews and approves salary range recommendations of the president for other corporate officers and key employees. The most recent compensation study was performed in 2010 by Mercer, a nationally recognized compensation and benefits consulting firm. The study resulted in an executive compensation review compliant with the terms of the RFP and committee responsibilities outlined above. |

| Identifier                       | Return<br>Reference | Explanation  |
|----------------------------------|---------------------|--|
| Form 990,<br>Part VI, Line<br>19 |                     | SURA's governing documents (e.g. bylaws and board resolutions) and the most recent prior two years audited consolidated statements of financial position are available to the public via SURA's web site at www sura org In addition, SURA's conflict of interest policy, as well as, other governance and corporate related policies are readily accessible at www sura org/staff |

| ldentifier         | Return Reference | Explanation                     |                |             |
|--------------------|------------------|---------------------------------|----------------|-------------|
| Form 990, Part XI, | OTHER CHANGES IN | UNREALIZED LOSS ON INVESTMENTS  | \$ (1,332,329) | TOTAL OTHER |
| Line 5             | NET ASSETS       | CHANGES IN NET ASSETS \$ (1,332 | 2,329)         |             |

SCHEDULE R

Related Ore

DLN: 93493255000412

## Related Organizations and Unrelated Partnerships

201

**2010** 

OMB No 1545-0047

Open to Public Inspection

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

► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

(Form 990)

**Employer identification number** Name of the organization Southeastern Universities Research Association Inc 54-1156453 Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.) Part I (c) Legal domicile (state Name, address, and EIN of disregarded entity Primary activity Total income End-of-year assets Direct controlling or foreign country) entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one Part II or more related tax-exempt organizations during the tax year.) (g) Section 512(b)(13) Name, address, and EIN of related organization Legal domicile (state Exempt Code section Public charity status Direct controlling Primary activity controlled (if section 501(c)(3)) or foreign country) entity organization

| Part III | Identif | ication of Relat   | ed Org  | anizations Tax    | able as a Partne   | ership (Complete   | ıf the organizatio | n answered | "Yes" on Form 9 | 90, Part I\ | /, line 34 |
|----------|---------|--------------------|---------|-------------------|--------------------|--------------------|--------------------|------------|-----------------|-------------|------------|
|          | because | e it had one or mo | re rela | ted organizations | treated as a parti | nership during the | e tax year.)       |            |                 |             |            |
|          |         |                    |         |                   |                    |                    |                    |            |                 |             |            |

| (a)<br>Name, address, and EIN<br>of<br>related organization  | <b>(b)</b><br>Primary activity | (c) Legal domicile (state or foreign country) | (d)<br>Direct controlling<br>entity | (e) Predominant income (related, unrelated, excluded from tax under sections 512- 514) | (f)<br>Share of total income | <b>(g)</b><br>Share of end-of-year<br>assets | (h<br>Disprop<br>allocat | ortionate | (i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) | (j<br>Gene<br>mana<br>part | ral or<br>aging | <b>(k)</b><br>Percentage<br>ownership |
|--|--------------------------------|---|-------------------------------------|--|------------------------------|--|--------------------------|-----------|---|----------------------------|-----------------|---------------------------------------|
|  |                                |   |                                     |  |                              |  | Yes                      | No        | 1   | Yes                        | No              | 1                                     |
| (1) JEFFERSON SCIENCE<br>ASSOCIATES IIC<br>1201 New York Avenue<br>NW<br>Washington, DC20005<br>20-3974952 | RESEARCH                       | VA  | SURA                                | Related  | 1,333,604                    | 16,287,706                                   |                          | No        |   | Yes                        |                 | 60 000 %                              |
|  |                                |   |                                     |  |                              |  |                          |           |   |                            |                 |                                       |
|  |                                |   |                                     |  |                              |  |                          |           |   |                            |                 |                                       |
|  |                                |   |                                     |  |                              |  |                          |           |   |                            |                 |                                       |
|  |                                |   |                                     |  |                              |  |                          |           |   |                            |                 |                                       |
|  |                                |   |                                     |  |                              |  |                          |           |   |                            |                 |                                       |
|  |                                |   |                                     |  |                              |  |                          |           |   |                            |                 |                                       |
| Part IV Identif  | fication of Relat              | ed Org  | janizations Tax                     | able as a Corpo  | ration or Trust              | (Complete if the o                           | organı                   | zatıon    | answered "Yes"  | on Fo                      | rm 9            | 90, Part IV,                          |

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

| (a)<br>Name, address, and EIN of related organization | <b>(b)</b><br>Primary activity | <b>(c)</b><br>Legal domicile<br>(state or<br>foreign<br>country) | (d)<br>Direct controlling<br>entity | (e) Type of entity (C corp, S corp, or trust) | (f)<br>Share of total income | (g)<br>Share of<br>end-of-year<br>assets | <b>(h)</b><br>Percentage<br>ownership |
|---|--------------------------------|--|-------------------------------------|---|------------------------------|--|---------------------------------------|
|   |                                |  |                                     |   |                              |  |                                       |
|   |                                |  |                                     |   |                              |  |                                       |
|   |                                |  |                                     |   |                              |  |                                       |
|   |                                |  |                                     |   |                              |  |                                       |
|   |                                |  |                                     |   |                              |  |                                       |
|   |                                |  |                                     |   |                              |  |                                       |
|   |                                |  |                                     |   |                              |  |                                       |
| ·   | ,                              | ·  | -                                   | ,   | -                            |  | -                                     |

| During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?  a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity  b Gift, grant, or capital contribution to other organization(s)  c Gift, grant, or capital contribution from other organization(s)  d Loans or loan guarantees to or for other organization(s)  d Loans or loan guarantees by other organization(s)  f Sale of assets to other organization(s)  f Purchase of assets from other organization(s)  it Lease of facilities, equipment, or other assets to other organization(s)  it Lease of facilities, equipment, or other assets from other organization(s)  it Lease of facilities, equipment, or other assets from other organization(s)  it Performance of services or membership or fundraising solicitations by other organization(s)  in Sharing of paid employees  o Reimbursement paid to other organization for expenses  in Performance of services or membership or fundraising solicitations for other organization(s)  in Performance of services or membership or fundraising solicitations for other organization(s)  in Performance of services or membership or fundraising solicitations for other organization(s)  in Performance of services or membership or fundraising solicitations for other organization(s)  in Performance of services or membership or fundraising solicitations for other organization(s)  in Performance of services or membership or fundraising solicitations for other organization(s)  in Performance of services or membership or fundraising solicitations for other organization(s)  in Performance of services or membership or fundraising solicitations for other organization(s)  in Performance of services or membership or fundraising solicitations for other organization for expenses  in Performance of services or membership or fundraising solicitations for other organization for expenses  in Performance of services or membership or fundraising sol | Schedule R (Form 990) 2010   |            | Рa  | ge .     |
|--|--|------------|-----|----------|
| 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?  a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity  b Gift, grant, or capital contribution to other organization(s)  c Gift, grant, or capital contribution from other organization(s)  d Loans or loan guarantees to or for other organization(s)  d Loans or loan guarantees by other organization(s)  e Loans or loan guarantees by other organization(s)  f Sale of assets to other organization(s)  g Purchase of assets from other organization(s)  it Lease of facilities, equipment, or other assets to other organization(s)  j Lease of facilities, equipment, or other assets from other organization(s)  k Performance of services or membership or fundraising solicitations for other organization(s)  it Ves  l Performance of services or membership or fundraising solicitations by other organization(s)  m Sharing of facilities, equipment, mailing lists, or other assets  o Reimbursement paid to other organization for expenses  o Reimbursement paid to other organization for expenses  o Reimbursement paid to other organization for expenses  q Other transfer of cash or property to other organization(s)  q Other transfer of cash or property to other organization(s)  | Part V Transactions With Related Organizations (Complete of the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or   | 36.)       |     |          |
| a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity  b Gift, grant, or capital contribution to other organization(s)  c Gift, grant, or capital contribution from other organization(s)  d Loans or loan guarantees to orfor other organization(s)  e Loans or loan guarantees by other organization(s)  f Sale of assets to other organization(s)  f Purchase of assets from other organization(s)  it Lease of facilities, equipment, or other assets to other organization(s)  j Lease of facilities, equipment, or other assets from other organization(s)  it Performance of services or membership or fundraising solicitations for other organization(s)  m Sharing of facilities, equipment, mailing lists, or other assets  o Reimbursement paid to other organization for expenses  q Other transfer of cash or property to other organization(s)  la   In   In   In   In   In   In   In   I   | Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A,  Note. Complete line 1 if any entity is listed in Parts II, III or IV  During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?  a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity  b Gift, grant, or capital contribution from other organization(s)  c Gift, grant, or capital contribution from other organization(s)  d Loans or loan guarantees to or for other organization(s)  f Sale of assets to other organization(s)  g Purchase of assets from other organization(s)  f Exchange of assets  i Lease of facilities, equipment, or other assets to other organization(s)  j Lease of facilities, equipment, or other assets from other organization(s)  k Performance of services or membership or fundraising solicitations for other organization(s)  m Sharing of facilities, equipment, mailing lists, or other assets  Sharing of paid employees  o Reimbursement paid to other organization for expenses  Reimbursement paid by other organization for expenses  Q Other transfer of cash or property to other organization(s) |            | Yes | N        |
| b Gift, grant, or capital contribution to other organization(s)  c Gift, grant, or capital contribution from other organization(s)  d Loans or loan guarantees to or for other organization(s)  e Loans or loan guarantees by other organization(s)  f Sale of assets to other organization(s)  f Purchase of assets from other organization(s)  f Exchange of assets  f Exchange of assets  i Lease of facilities, equipment, or other assets to other organization(s)  j Lease of facilities, equipment, or other assets from other organization(s)  k Performance of services or membership or fundraising solicitations for other organization(s)  l Performance of services or membership or fundraising solicitations by other organization(s)  n Sharing of facilities, equipment, mailing lists, or other assets  n Sharing of paid employees  o Reimbursement paid to other organization for expenses  q Other transfer of cash or property to other organization(s)  lq I of the transfer of cash or property to other organization(s)  lq I other transfer of cash or property to other organization(s)   | 1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?   |            |     | Т        |
| c Gift, grant, or capital contribution from other organization(s) d Loans or loan guarantees to or for other organization(s) e Loans or loan guarantees by other organization(s)  f Sale of assets to other organization(s)  g Purchase of assets from other organization(s)  h Exchange of assets i Lease of facilities, equipment, or other assets to other organization(s)  j Lease of facilities, equipment, or other assets from other organization(s)  if Vesion and the programment of services or membership or fundraising solicitations for other organization(s)  m Sharing of facilities, equipment, mailing lists, or other assets  n Sharing of paid employees  o Reimbursement paid to other organization for expenses  q Other transfer of cash or property to other organization(s)  la I I I I I I I I I I I I I I I I I I I   | a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity  | 1a         |     | N        |
| d Loans or loan guarantees to or for other organization(s)  e Loans or loan guarantees by other organization(s)  f Sale of assets to other organization(s)  f Purchase of assets from other organization(s)  i Lease of facilities, equipment, or other assets to other organization(s)  i Lease of facilities, equipment, or other assets from other organization(s)  i Lease of facilities, equipment, or other assets from other organization(s)  i Performance of services or membership or fundraising solicitations for other organization(s)  in Sharing of facilities, equipment, mailing lists, or other assets  in Sharing of paid employees  o Reimbursement paid to other organization for expenses  q Other transfer of cash or property to other organization(s)  la In  | <b>b</b> Gift, grant, or capital contribution to other organization(s)   | 1b         |     | N        |
| e Loans or loan guarantees by other organization(s)  f Sale of assets to other organization(s)  g Purchase of assets from other organization(s)  h Exchange of assets i Lease of facilities, equipment, or other assets to other organization(s)  j Lease of facilities, equipment, or other assets from other organization(s)  k Performance of services or membership or fundraising solicitations for other organization(s)  l Performance of services or membership or fundraising solicitations by other organization(s)  m Sharing of facilities, equipment, mailing lists, or other assets  n Sharing of paid employees  o Reimbursement paid to other organization for expenses  p Reimbursement paid by other organization for expenses  q Other transfer of cash or property to other organization(s)  la In   | c Gift, grant, or capital contribution from other organization(s)  | 1c         |     | N        |
| f Sale of assets to other organization(s)  g Purchase of assets from other organization(s)  h Exchange of assets  i Lease of facilities, equipment, or other assets to other organization(s)  j Lease of facilities, equipment, or other assets from other organization(s)  k Performance of services or membership or fundraising solicitations for other organization(s)  l Performance of services or membership or fundraising solicitations by other organization(s)  m Sharing of facilities, equipment, mailing lists, or other assets  n Sharing of paid employees  o Reimbursement paid to other organization for expenses  p Reimbursement paid by other organization for expenses  q Other transfer of cash or property to other organization(s)  1d  | d Loans or loan guarantees to or for other organization(s)   | 1d         |     | N        |
| Purchase of assets from other organization(s)    Exchange of assets   1h   | e Loans or loan guarantees by other organization(s)  | 1e         |     | N        |
| h Exchange of assets i Lease of facilities, equipment, or other assets to other organization(s)  j Lease of facilities, equipment, or other assets from other organization(s)  k Performance of services or membership or fundraising solicitations for other organization(s)  l Performance of services or membership or fundraising solicitations by other organization(s)  m Sharing of facilities, equipment, mailing lists, or other assets  n Sharing of paid employees  l n n sharing of paid employees  o Reimbursement paid to other organization for expenses  p Reimbursement paid by other organization for expenses  q Other transfer of cash or property to other organization(s)  l n n n n n n n n n n n n n n n n n n   | f Sale of assets to other organization(s)  | 1f         |     | N        |
| i Lease of facilities, equipment, or other assets to other organization(s)  j Lease of facilities, equipment, or other assets from other organization(s)  k Performance of services or membership or fundraising solicitations for other organization(s)  l Performance of services or membership or fundraising solicitations by other organization(s)  m Sharing of facilities, equipment, mailing lists, or other assets  n Sharing of paid employees  o Reimbursement paid to other organization for expenses  p Reimbursement paid by other organization for expenses  q Other transfer of cash or property to other organization(s)  11  | g Purchase of assets from other organization(s)  | <b>1</b> g |     | N        |
| j Lease of facilities, equipment, or other assets from other organization(s)  k Performance of services or membership or fundraising solicitations for other organization(s)  l Performance of services or membership or fundraising solicitations by other organization(s)  m Sharing of facilities, equipment, mailing lists, or other assets  n Sharing of paid employees  o Reimbursement paid to other organization for expenses  p Reimbursement paid by other organization for expenses  o Other transfer of cash or property to other organization(s)  | h Exchange of assets   | 1h         |     | N        |
| k Performance of services or membership or fundraising solicitations for other organization(s)  I Performance of services or membership or fundraising solicitations by other organization(s)  II Performance of services or membership or fundraising solicitations by other organization(s)  II Performance of services or membership or fundraising solicitations by other organization(s)  II Performance of services or membership or fundraising solicitations for other organization(s)  II Performance of services or membership or fundraising solicitations for other organization(s)  II Performance of services or membership or fundraising solicitations for other organization(s)  II Performance of services or membership or fundraising solicitations for other organization(s)  II Performance of services or membership or fundraising solicitations for other organization(s)  II Performance of services or membership or fundraising solicitations for other organization(s)  II Performance of services or membership or fundraising solicitations for other organization(s)  II Performance of services or membership or fundraising solicitations for other organization(s)  II Performance of services or membership or fundraising solicitations for other organization(s)  II Performance of services or membership or fundraising solicitations for other organization(s)  II Performance of services or membership or fundraising solicitations by other organization(s)  II Performance of services or membership or fundraising solicitations by other organization(s)  II Performance of services or membership or fundraising solicitations by other organization(s)  II Performance of services or membership or fundraising solicitations by other organization(s)  II Performance of services or membership or fundraising solicitations by other organization(s)  II Performance of services or membership or fundraising solicitations by other organization(s)  II Performance of services or membership or fundraising solicitations by other organization(s)  II Performance of ser | i Lease of facilities, equipment, or other assets to other organization(s)   | <b>1</b> i |     | N        |
| Performance of services or membership or fundraising solicitations by other organization(s)  m Sharing of facilities, equipment, mailing lists, or other assets  n Sharing of paid employees  o Reimbursement paid to other organization for expenses  p Reimbursement paid by other organization for expenses  q Other transfer of cash or property to other organization(s)  | j Lease of facilities, equipment, or other assets from other organization(s)   | 1 <u>j</u> |     | N        |
| m Sharing of facilities, equipment, mailing lists, or other assets  n Sharing of paid employees  o Reimbursement paid to other organization for expenses  p Reimbursement paid by other organization for expenses  q Other transfer of cash or property to other organization(s)   | k Performance of services or membership or fundraising solicitations for other organization(s)   | 1k         | Yes | $\vdash$ |
| n Sharing of paid employees  n Reimbursement paid to other organization for expenses  p Reimbursement paid by other organization for expenses  q Other transfer of cash or property to other organization(s)   | I Performance of services or membership or fundraising solicitations by other organization(s)  | 11         |     | N        |
| o Reimbursement paid to other organization for expenses  p Reimbursement paid by other organization for expenses  q Other transfer of cash or property to other organization(s)  | m Sharing of facilities, equipment, mailing lists, or other assets   | 1m         | 1   | N        |
| p Reimbursement paid by other organization for expenses  q Other transfer of cash or property to other organization(s)   | n Sharing of paid employees  | 1n         |     | N        |
| p Reimbursement paid by other organization for expenses  q Other transfer of cash or property to other organization(s)   |  |            |     | T        |
| q Other transfer of cash or property to other organization(s)  | o Reimbursement paid to other organization for expenses  | 10         |     | N        |
| The familiar of cash of property to other organization(s)  | p Reimbursement paid by other organization for expenses  | <b>1</b> p |     | N        |
| The familiar of cash of property to other organization(s)  |  |            |     |          |
| <del>-   -   -   -   -   -   -   -   -   -  </del>   | <b>q</b> O ther transfer of cash or property to other organization(s)  | <b>1</b> q |     | N        |
|  | r Other transfer of cash or property from other organization(s)  | 1r         | Yes |          |

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

| (a)<br>Name of other organization    | <b>(b)</b><br>Transaction<br>type(a-r) | (c)<br>Amount involved | (d)<br>Method of determining amount<br>involved |
|--------------------------------------|--|------------------------|---|
| (1) Jefferson Science Associates LLC | k                                      | 1,333,584              |   |
| (2) Jefferson Science Associates LLC | r                                      | 1,336,676              |   |
| (3)                                  |  |                        |   |
| (4)                                  |  |                        |   |
| (5)                                  |  |                        |   |
| (6)                                  |  |                        |   |

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

| (a)<br>Name, address, and EIN of entity | (b) Primary activity  (c) Legal domicile (state or foreign country) |  | (d<br>Are<br>parti<br>sect<br>501(d<br>organiz | ners<br>ion<br>:)(3)<br>:ations? | <b>(e)</b><br>Share of<br>end-of-year<br>assets | (f)<br>Disproprtionate<br>allocations? |          | (g)<br>Code V—UBI<br>amount in box<br>20 of Schedule K-1<br>(Form 1065) |     | iaging<br>tner? |  |
|---|---|--|--|----------------------------------|---|--|----------|---|-----|-----------------|--|
|   |   |  | Yes  | No                               |   | Yes                                    | No       |   | Yes | No              |  |
|   |   |  |  |                                  |   |  |          |   | +   | $\vdash$        |  |
|   |   |  |  |                                  |   |  |          |   |     |                 |  |
|   |   |  |  |                                  |   |  |          |   |     | 1               |  |
|   |   |  |  |                                  |   |  |          |   |     |                 |  |
|   |   |  |  |                                  |   |  |          |   |     |                 |  |
|   |   |  |  |                                  |   |  |          |   |     |                 |  |
|   |   |  |  |                                  |   |  |          |   |     |                 |  |
|   |   |  |  |                                  |   |  | $\vdash$ |   | +   | $\vdash$        |  |
|   |   |  |  |                                  |   |  |          |   |     |                 |  |
|   |   |  |  |                                  |   |  |          |   |     | T               |  |
|   |   |  |  |                                  |   |  |          |   |     |                 |  |
|   |   |  |  |                                  |   |  |          |   |     |                 |  |
|   |   |  |  |                                  |   |  |          |   | -   | $\vdash$        |  |
|   |   |  |  |                                  |   |  |          |   |     |                 |  |
|   |   |  |  |                                  |   |  |          |   |     | ╁               |  |
|   |   |  |  |                                  |   |  |          |   |     |                 |  |
|   |   |  |  |                                  |   |  |          |   |     |                 |  |
|   |   |  |  |                                  |   |  |          |   |     |                 |  |
|   |   |  |  |                                  |   |  |          |   |     |                 |  |
|   |   |  |  |                                  |   |  |          |   | +   | +               |  |
|   |   |  |  |                                  |   |  |          |   |     |                 |  |
|   |   |  |  |                                  |   |  |          |   |     |                 |  |
|   |   |  |  |                                  |   |  |          |   |     |                 |  |
|   |   |  |  |                                  |   |  |          |   |     |                 |  |
|   |   |  |  |                                  |   |  |          |   |     |                 |  |
|   |   |  |  |                                  |   |  |          |   |     |                 |  |

## Part VII Supplemental Information

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

| Identifier | Return Reference | Explanation |
|------------|------------------|-------------|
|------------|------------------|-------------|

Schedule R (Form 990) 2010

Software ID: Software Version:

**EIN:** 54-1156453

Name: Southeastern Universities Research

Association Inc

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

| (A) Name and Title  | ( <b>B</b> )<br>Average<br>hours | Posi                              | ((                    | che     | ck a         |                              |        | (D)<br>Reportable<br>compensation            | <b>(E)</b><br>Reportable<br>compensation              | <b>(F)</b><br>Estimated<br>amount of other                               |
|---|----------------------------------|-----------------------------------|-----------------------|---------|--------------|------------------------------|--------|--|---|--|
|   | per<br>week                      | Individual trustee<br>or director | Institutional Trustee | Officei | Key employee | Highest compensated employee | Former | from the<br>organization (W-<br>2/1099-MISC) | from related<br>organizations<br>(W- 2/1099-<br>MISC) | compensation<br>from the<br>organization and<br>related<br>organizations |
| DR DOUG RIGNEY VP for Information Technology  | 1 0                              | Х                                 |                       |         |              |                              |        | О  | 0   | 0  |
| DR ALICE M CLARK  |                                  |                                   |                       |         |              |                              |        |  |   |  |
| Vice Chan-Research & Spon Prgm  | 1 0                              | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |
| DR CURT PETERSON  VP for Research & Econ Dvpmt  | 1 0                              | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |
| DR GERALD SONNENFELD  | 1.0                              |                                   |                       |         |              |                              |        | 0  | 0   | 0  |
| VP for Research   | 1 0                              | Х                                 |                       |         |              |                              |        | 0  | 0   |  |
| DR LISA CLOUGH<br>Interim Assoc V Chanc for Res   | 1 0                              | Х                                 |                       |         |              |                              |        | О  | 0   | 0  |
| DR CAMILLE COLEY  | 1 0                              | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |
| Asst VP for Research  | 10                               | ^                                 |                       |         |              |                              |        | ٥  |   |  |
| DR LEO M CHALUPA<br>VP for Research   | 1 0                              | Х                                 |                       |         |              |                              |        | О  | 0   | 0  |
| DR SPIROS DIMOLITSAS<br>Senior Vice President   | 1 0                              | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |
| MR JAMES O'CONNOR   | 1 0                              | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |
| Interim Assoc VP and CIO  DR ELIZABETH ANDERSON FLETCHER Assoc VP for Research & TechTr | 1 0                              | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |
| DR CHRISTOPHER F D'ELIA<br>Dean & Prof, School of Coast                                 | 1 0                              | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |
| DR KELVIN DROEGEMEIER<br>VP for Research  | 1 0                              | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |
| DR STEPHEN KRESOVICH VP for Research & Grad Educ  | 1 0                              | Х                                 |                       |         |              |                              |        | О  | 0   | 0  |
| DR FRED D TOMPKINS<br>Assoc VP for Research & EconDv                                    | 1 0                              | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |
| DR KEITH WILLIAMSON<br>Assoc V Provost for Research                                     | 1 0                              | Х                                 |                       |         |              |                              |        | o  | 0   | 0  |
| DR JAMES M RANKIN<br>V Provost Rsch & Econ Dvpmt  | 1 0                              | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |
| DR DANIEL I SOBER<br>Chair, Department of Physics                                       | 1 0                              | Х                                 |                       |         |              |                              |        | o  | 0   | 0  |
| DR MARK A BARTEAU<br>Snr V Provost Rsch & Strat In                                      | 1 0                              | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |
| DR DAVID C LEE<br>VP for Research & Assoc Prov  | 1 0                              | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |
| DR DENIS A WIESENBURG<br>V P for Research   | 1 0                              | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |
| DR ANDREW MEYERS<br>Vice Provost for Research   | 1 0                              | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |
| DR ANDRES GIL<br>Vice President, Research   | 1 0                              | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |
| DR DAVID J ERNST<br>Professor of Physics  | 1 0                              | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |
| DR DONALD J BENSON<br>Interim VP for Research   | 1 0                              | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |
| DR ROBERT DIXON<br>DEAN, SCHOOL OF SCIENCE  | 1 0                              | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |

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

| Compensated Employees, and Independent Contractors                |                         |                                   |                       |        |          |                   |        |  |   |   |  |
|---|-------------------------|-----------------------------------|-----------------------|--------|----------|-------------------|--------|--|---|---|--|
| (A)<br>Name and Title   | (B)<br>Average<br>hours | Posi<br>t                         | tion (<br>that a      | che    | ′)       |                   |        | ( <b>D)</b> Reportable compensation from the | <b>(E)</b> Reportable compensation from related | <b>(F)</b> Estimated amount of other compensation |  |
|   | per<br>week             | Individual trustee<br>or director | Institutional Trustee | Office | Key emp  | Highest compensat | Former | organization (W-<br>2/1099-MISC)             | organizations<br>(W- 2/1099-<br>MISC)           | from the organization and related organizations   |  |
|   |                         | l tiustee<br>or                   | al Trustee            | ĕ      | emplo)ee | npensated         | ner    |  |   |   |  |
| DR ROBERT R TWILLEY Vice President for Research                   | 1 0                     | Х                                 |                       |        |          |                   |        | 0  | 0   | 0   |  |
| DR SARA J GRAVES<br>Director, IT & Systems Center                 | 1 0                     | Х                                 |                       |        |          |                   |        | 0  | 0   | 0   |  |
| DR JOHN M MASON<br>VP for Research                                | 1 0                     | Х                                 |                       |        |          |                   |        | 0  | 0   | 0   |  |
| DR TRUELL HYDE VP Provost for Research                            | 1 0                     | Х                                 |                       |        |          |                   |        | 0  | 0   | 0   |  |
| DR M J SOILEAU<br>VP for Research                                 | 1 0                     | Х                                 |                       |        |          |                   |        | 0  | 0   | 0   |  |
| DR EDWARD BRASH<br>Associate Professor of Physics                 | 1 0                     | х                                 |                       |        |          |                   |        | 0  | 0   | 0   |  |
| DR JAMES N SIEDOW   | 1 0                     | Х                                 |                       |        |          |                   |        | 0  | 0   | 0   |  |
| Vice Provost for Research  DR WINFRED M PHILLIPS  VP for Research | 1 0                     | Х                                 |                       |        |          |                   |        | 0  | 0   | 0   |  |
| DR DAVID R SHAW Exec Asst V P for Research                        | 1 0                     | Х                                 |                       |        |          |                   |        | 0  | 0   | 0   |  |
| DR RICHARD NEWMAN Assoc VP, IT                                    | 1 0                     | Х                                 |                       |        |          |                   |        | 0  | 0   | 0   |  |
| DR PAUL EUGENIO Professor, Dept of Physics                        | 1 0                     | Х                                 |                       |        |          |                   |        | 0  | 0   | 0   |  |
| DR ROGER R STOUGH<br>VP-Research & Economic Dvp                   | 1 0                     | Х                                 |                       |        |          |                   |        | 0  | 0   | 0   |  |
| DR GEOFFREY SUMMERS<br>V P for Research                           | 1 0                     | Х                                 |                       |        |          |                   |        | 0  | 0   | 0   |  |
| MR J L ALBERT<br>Associate Provost and CIO                        | 1 0                     | Х                                 |                       |        |          |                   |        | 0  | 0   | 0   |  |
| DR CELESTINE A NTUEN<br>Interım V Chanc Rsch & Dvpmt              | 1 0                     | Х                                 |                       |        |          |                   |        | 0  | 0   | 0   |  |
| DR JOHN NOFTSINGER<br>Vice Prov-Rsrch & Public Serv               | 1 0                     | Х                                 |                       |        |          |                   |        | 0  | 0   | 0   |  |
| DR JAMES W TRACY<br>Vice President for Research                   | 1 0                     | Х                                 |                       |        |          |                   |        | 0  | 0   | 0   |  |
| DR LES GUICE<br>VP for Research & Development                     | 1 0                     | Х                                 |                       |        |          |                   |        | 0  | 0   | 0   |  |
| DR ELIZABETH J BEISE<br>Prof Physics & Assoc Provost              | 1 0                     | Х                                 |                       |        |          |                   |        | 0  | 0   | 0   |  |
| MR CHARLIE MCMAHON V P Information Technology                     | 1 0                     | Х                                 |                       |        |          |                   |        | 0  | 0   | 0   |  |
| DR JUNE L MATTHEWS<br>Professor of Physics                        | 1 0                     | Х                                 |                       |        |          |                   |        | 0  | 0   | 0   |  |
| DR RONI AVISSAR<br>Dean, RSoM&AS                                  | 1 0                     | Х                                 |                       |        |          |                   |        | 0  | 0   | 0   |  |
| DR SCOTT L WHITTENBURG Vice Chan for Research                     | 1 0                     | Х                                 |                       |        |          |                   |        | 0  | 0   | 0   |  |
| DR JO SEPH C HALL<br>V P Research & Econ Dvpmt                    | 1 0                     | Х                                 |                       |        |          |                   |        | 0  | 0   | 0   |  |
| DR MARC HOIT<br>V Chancellor IT                                   | 1 0                     | Х                                 |                       |        |          |                   |        | 0  | 0   | 0   |  |

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

| Compensated Employees, and Independent Contractors   |                         |                                   |                       |         |              |                              |        |  |   |  |  |  |  |
|--|-------------------------|-----------------------------------|-----------------------|---------|--------------|------------------------------|--------|--|---|--|--|--|--|
| <b>(A)</b><br>Name and Title                         | (B)<br>Average<br>hours |                                   | tion (<br>that a      | che     | ')           |                              |        | (D) Reportable compensation                  | (E) Reportable compensation                           | (F) Estimated amount of other  |  |  |  |
|  | per<br>week             | Individual trustee<br>or director | Institutional Trustee | Officei | Key employee | Highest compensated employee | Former | from the<br>organization (W-<br>2/1099-MISC) | from related<br>organizations<br>(W- 2/1099-<br>MISC) | compensation<br>from the<br>organization and<br>related<br>organizations |  |  |  |
| DR HARVEY SEIM                                       | 1 0                     | l x                               |                       |         |              |                              |        | 0  | 0   | 0  |  |  |  |
| Professor Marine Science                             |                         |                                   |                       |         |              |                              |        |  |   |  |  |  |  |
| DR JEFFREY R SEEMANN V P Research & Graduate Stud    | 1 0                     | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |  |  |  |
| DR MOHAMMAD KARIM<br>Vice President for Research     | 1 0                     | ×                                 |                       |         |              |                              |        | 0  | 0   | 0  |  |  |  |
| DR JAMES S COLEMAN V Provost, Research               | 1 0                     | х                                 |                       |         |              |                              |        | 0  | 0   | 0  |  |  |  |
| DR GERARD P GILFOYLE<br>Professor of Physics         | 1 0                     | х                                 |                       |         |              |                              |        | 0  | 0   | 0  |  |  |  |
| DR KAREN A HOLBROOK Snr VP Research & Innovation     | 1 0                     | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |  |  |  |
| DR JUAN SANCHEZ<br>Vice President for Research       | 1 0                     | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |  |  |  |
| DR ZISIS PAPANDREOU<br>Professor of Physics          | 1 0                     | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |  |  |  |
| DR DENNIS M MANOS<br>V Provost for Research          | 1 0                     | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |  |  |  |
| DR THOMAS C SKALAK<br>Vice President for Research    | 1 0                     | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |  |  |  |
| DR FRANCIS L MACRINA<br>Vice President for Research  | 1 0                     | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |  |  |  |
| DR TERRY L HERDMAN<br>Assc VP for Research Computing | 1 0                     | Х                                 |                       |         |              |                              |        | 0  | 0   | 0  |  |  |  |
| PETER BJONERUD<br>CFO & CORP TREASURER               | 40 0                    |                                   |                       | х       |              |                              |        | 222,818                                      | 0   | 34,080   |  |  |  |
| ELIZABETH LAWSON<br>CORPORATE SECRETARY              | 40 0                    |                                   |                       | х       |              |                              |        | 176,256                                      | 0   | 27,616   |  |  |  |
| GREG KUBIAK<br>Chief Communication Officer           | 40 0                    |                                   |                       | Х       |              |                              |        | 168,483                                      | 0   | 28,611   |  |  |  |
| JERRY DRAAYER<br>President & CEO                     | 40 0                    |                                   |                       | х       |              |                              |        | 406,004                                      | 0   | 65,445   |  |  |  |
| GARY CRANE<br>Director of IT Initiatives             | 40 0                    |                                   |                       |         | Х            |                              |        | 183,731                                      | 0   | 30,171   |  |  |  |