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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2010

Open to Public Inspection

A For the 2010 calendar year, or tax year beginning 10-01-2010 and ending 09-30-2011

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
UNIVERSITY CORPORATION FOR ATMOSPHERIC RESEARCH

Doing Business As

Number and street (or P O box if mail is not delivered to street address) Room/suite
PO BOX 3000

City or town, state or country, and ZIP + 4
BOULDER, CO 80307

D Employer identification number
84-0412668

E Telephone number
(303) 497-8575

G Gross receipts $ 271,294,750

F Name and address of principal officer
KATHRYN SCHMOLL
PO BOX 3000
BOULDER, CO 80307

H(a) Is this a group return for affiliates? ☐ Yes ☑ No

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW FIN UCAR EDU

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ | **L** Year of formation 1946 | **M** State of legal domicile CO

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
THE CORPORATION, ON BEHALF OF AND IN COOPERATION WITH ITS UNIVERSITY MEMBERS, IS ENGAGED IN MANAGEMENT OF LONG TERM ATMOSPHERIC AND RELATED RESEARCH AND EDUCATIONAL ACTIVITIES AND OF SCIENTIFIC FACILITIES, MOSTLY THROUGH THE OPERATION OF NATIONAL CENTER FOR ATMOSPHERIC RESEARCH IT ALSO ASSUMES THE ROLES OF SCIENTIFIC LEADERSHIP AND ADVOCACY ON A NATIONAL AND INTERNATIONAL BASIS AND PROVIDES SERVICES TO THE RESEARCH COMMUNITY SUCH AS VISITOR PROGRAMS, THE DISSEMINATION OF SCIENTIFIC DATA, COMPUTING, RADAR AND AIRCRAFT FACILITIES AND FOSTERING NEW AND IMPROVED RELATIONSHIPS AMONG THE ACADEMIC RESEARCH COMMUNITY AND THE PRIVATE SECTOR

2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	**3**	19
4	Number of independent voting members of the governing body (Part VI, line 1b)	**4**	18
5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	**5**	1,715
6	Total number of volunteers (estimate if necessary)	**6**	0
7a	Total unrelated business revenue from Part VIII, column (C), line 12	**7a**	128,805
b	Net unrelated business taxable income from Form 990-T, line 34	**7b**	-17,435

			Prior Year	**Current Year**
Revenue	**8**	Contributions and grants (Part VIII, line 1h)	207,097,050	232,492,140
	9	Program service revenue (Part VIII, line 2g)	28,179,817	35,244,026
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,643,277	1,830,254
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,596,551	1,728,330
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	238,516,695	271,294,750
Expenses	**13**	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	93,212	92,120
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	143,816,010	150,183,698
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶3,518		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	75,271,759	70,843,742
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	219,180,981	221,119,560
	19	Revenue less expenses Subtract line 18 from line 12	19,335,714	50,175,190
Net Assets or Fund Balances			**Beginning of Current Year**	**End of Year**
	20	Total assets (Part X, line 16)	213,479,392	255,464,633
	21	Total liabilities (Part X, line 26)	154,080,594	147,832,247
	22	Net assets or fund balances Subtract line 21 from line 20	59,398,798	107,632,386

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

****** | 2012-08-09
Signature of officer | Date

KATHRYN SCHMOLL VP - FINANCE & ADMINISTRATION
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name COLLEEN E MILLER	Preparer's signature COLLEEN E MILLER	Date	Check if self-employed ▶ ☐	PTIN
Firm's name ▶ DELOITTE TAX LLP				Firm's EIN ▶
Firm's address ▶ 555 17TH STREET SUITE 3600 DENVER, CO 80202				Phone no ▶ (303) 292-5400

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

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III . . . . ☑

1 Briefly describe the organization's mission

THE CORPORATION, ON BEHALF OF AND IN COOPERATION WITH ITS UNIVERSITY MEMBERS, IS ENGAGED IN MANAGEMENT OF LONG TERM ATMOSPHERIC AND RELATED RESEARCH AND EDUCATIONAL ACTIVITIES AND OF SCIENTIFIC FACILITIES, MOSTLY THROUGH THE OPERATION OF NCAR IT ALSO ASSUMES THE ROLES OF SCIENTIFIC LEADERSHIP AND ADVOCACY ON A NATIONAL AND INTERNATIONAL BASIS AND PROVIDES SERVICES TO THE RESEARCH COMMUNITY SUCH AS VISITOR PROGRAMS, THE DISSEMINATION OF SCIENTIFIC DATA, COMPUTING, RADAR AND AIRCRAFT FACILITIES AND FOSTERING NEW AND IMPROVED RELATIONSHIPS AMONG THE ACADEMIC RESEARCH COMMUNITY AND THE PRIVATE SECTOR

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . ☐ **Yes** ☑ **No**

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . ☐ **Yes** ☑ **No**

If "Yes," describe these changes on Schedule O

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

4a (Code) (Expenses $ 42,060,816 including grants of $) (Revenue $ 14,886,522)

RESEARCH APPLICATIONS LABORATORY - CONDUCTED DIRECTED RESEARCH THAT CONTRIBUTED TO THE DEPTH OF FUNDAMENTAL SCIENTIFIC UNDERSTANDING, FOSTERED THE TRANSFER OF KNOWLEDGE AND TECHNOLOGY FOR THE BETTERMENT OF LIFE ON EARTH, AND SUPPORTED TECHNOLOGY TRANSFER THAT EXPANDS THE REACH OF ATMOSPHERIC SCIENCE

4b (Code) (Expenses $ 76,543,590 including grants of $) (Revenue $ 17,592,575)

COMPUTATIONAL & INFORMATIONS SYSTEMS LABORATORY - PROVIDED END-TO-END SERVICES, A SCIENCE LABORATORY THAT CONDUCTS RESEARCH, AND AN EDUCATION LABORATORY THAT TRAINS AND MENTORS

4c (Code) (Expenses $ 38,944,704 including grants of $) (Revenue $ 2,211,542)

EARTH OBSERVING LABORATORY - DEVELOPED AND EMPLOYED NEW ADVANCED OPTICAL SPECTROSCOPIC TECHNOLOGIES, INSTRUMENTS, AND ADVANCED ALGORITHMS FOR THE NEXT GENERATION OF GROUND-BASED AND AIRBORNE MEASUREMENTS OF VARIOUS ATMOSPHERIC TRACE GASES

4d Other program services (Describe in Schedule O) **See also Additional Data for Description**

(Expenses $ 42,047,411 including grants of $ 92,120) (Revenue $ 2,073,334)

4e **Total program service expenses** ▶$ 199,596,521

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		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*	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line10? *If "Yes," complete Schedule D, Part VI.*	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII.*	11b	Yes	
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	Yes	
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		No
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
14a	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? *If "Yes," complete Schedule F, Parts I and IV*	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the U S ? *If "Yes," complete Schedule F, Parts II and IV*	15		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? *If "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? *If "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? **Note.** Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Part IV **Checklist of Required Schedules** *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21		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	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b–24d and complete Schedule K. If "No," go to line 25*	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	Yes	
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *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		No
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		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		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		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	Yes	
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2* ☑ **Yes** ☐ **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? **Note.** All Form 990 filers are required to complete Schedule O	38	Yes	

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
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . .	**1a**	256			
b	Enter the number of Forms W-2G included in line 1a *Enter -0-* if not applicable	**1b**	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			**1c**	Yes	
2a	Enter the number of employees reported on Form W-3, *Transmittal of Wage and Tax Statements* filed for the calendar year ending with or within the year covered by this return	**2a**	1,715			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			**2b**	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)					
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			**3a**	Yes	
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*			**3b**	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			**4a**		No
b	If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . .			**5a**		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			**5b**		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			**5c**		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?			**6a**		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			**6b**		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			**7a**		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			**7b**		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			**7c**		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	**7d**				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			**7e**		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . .			**7f**		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			**7g**		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			**7h**		
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			**8**		
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the organization make any taxable distributions under section 4966?			**9a**		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			**9b**		
10	**Section 501(c)(7) organizations.** Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12 . . .	**10a**				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	**10b**				
11	**Section 501(c)(12) organizations.** Enter					
a	Gross income from members or shareholders	**11a**				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	**11b**				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			**12a**		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	**12b**				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O			**13a**		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	**13b**				
c	Enter the amount of reserves on hand	**13c**				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			**14a**		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* . .			**14b**		

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

Check if Schedule O contains a response to any question in this Part VI . . . . ☑

Section A. Governing Body and Management

			Line	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	**1a** 19			
b	Enter the number of voting members included in line 1a, above, who are independent	**1b** 18			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		**2**		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		**3**		No
4	Did the organization make any significant changes to its 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**		No
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?		**7b**	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	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

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Line	Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	**10a**	Yes	
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	**10b**	Yes	
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	**11a**	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? *If "No," go to line 13*	**12a**	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	**12b**	Yes	
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?			
a	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)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	**16a**		No
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**		

Section 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 ▶

MELISSA MILLER
PO BOX 3000
BOULDER,CO 80307
(303)497-8575

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
See Additional Data Table										

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
See Additional Data Table										
1b Sub-Total ▶										
c Total from continuation sheets to Part VII, Section A ▶										
d Total (add lines 1b and 1c) ▶								5,760,440	0	265,089

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 in reportable compensation from the organization ▶271

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
SAUNDERS CONSTRUCTION INC 6950 S JORDAN RD ENGLEWOOD, CO 80112	BUILDING CONSTRUCTION	46,443,284
GH PHIPPS CONST CO 5995 GWOOD PLAZA BLVD STE100 GREENWOOD VILLAGE, CO 80111	BUILDING RENOVATION	7,827,585
NEW WEST PAVING INC 7100 N BROADWAY SUITE 22PPH DENVER, CO 80221	PARKING LOT REPAVING	940,767
SBM SITE SERVICES LLC 5241 ARNOLD AVE MCCLELLAN, CA 95652	JANITORIAL SERVICES	728,612
UNIVERSITY OF TEXAS AT TYLER 3900 UNIVERSITY BLVD ADM 369 TYLER, TX 75799	PROGRAM SUPPORT	706,647

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 ▶39

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . .	1a				
	b	Membership dues	1b 58,600				
	c	Fundraising events	1c				
	d	Related organizations . . .	1d				
	e	Government grants (contributions)	1e 232,197,818				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f 235,722				
	g	Noncash contributions included in lines 1a-1f $					
	h	**Total.** Add lines 1a-1f . . . . ▶		232,492,140			
Program Service Revenue			Business Code				
	2a	CONTRACT PROG SRV REV	541700	34,305,519	34,305,519		
	b	CONFERENCE/SEMINAR REG	900099	938,044	938,044		
	c	INC FROM PARTNERSHIPS	900099	463		463	
	d						
	e						
	f	All other program service revenue					
	g	**Total.** Add lines 2a–2f . . . . ▶		35,244,026			
Other Revenue	3	Investment income (including dividends, interest and other similar amounts) . . . . . ▶		1,830,254			1,830,254
	4	Income from investment of tax-exempt bond proceeds . . ▶					
	5	Royalties . . . . ▶		-1,039			-1,039
			(i) Real / (ii) Personal				
	6a	Gross Rents	(i) 73,037 / (ii)				
	b	Less rental expenses					
	c	Rental income or (loss)	(i) 73,037 / (ii)				
	d	Net rental income or (loss) . . . . ▶		73,037			73,037
			(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory					
	b	Less cost or other basis and sales expenses					
	c	Gain or (loss)					
	d	Net gain or (loss) . . . . ▶					
	8a	Gross income from fundraising events (not including $ ____ of contributions reported on line 1c) See Part IV, line 18 . . .	a				
	b	Less direct expenses . . .	b				
	c	Net income or (loss) from fundraising events . . ▶					
	9a	Gross income from gaming activities See Part IV, line 19 .	a				
	b	Less direct expenses	b				
	c	Net income or (loss) from gaming activities . . ▶					
	10a	Gross sales of inventory, less returns and allowances .	a 7,580				
	b	Less cost of goods sold . .	b				
	c	Net income or (loss) from sales of inventory . . ▶		7,580			7,580
		Miscellaneous Revenue	Business Code				
	11a	CAFETERIA SERVICES	722210	1,088,073	1,028,092	59,981	
	b	OTHER MISC REV	900099	380,689	380,689		
	c	CHILD CARE CENTER	624410	179,990	111,629	68,361	
	d	All other revenue					
	e	**Total.** Add lines 11a–11d . . . . . . ▶		1,648,752			
	12	**Total revenue.** See Instructions . . . ▶		271,294,750	36,763,973	128,805	1,909,832

Part IX Statement of Functional Expenses

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U S See Part IV, line 21				
2 Grants and other assistance to individuals in the U S See Part IV, line 22	92,120	92,120		
3 Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	5,615,100	1,552,734	4,062,366	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	112,869,276	105,777,896	7,091,380	
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	10,856,947	10,856,947		
9 Other employee benefits	12,728,893	7,761,963	4,966,930	
10 Payroll taxes	8,113,482	8,113,482		
a Fees for services (non-employees) Management				
b Legal	115,704		115,704	
c Accounting	199,819		199,819	
d Lobbying	59,371		59,371	
e Professional fundraising services *See Part IV, line 17* . .				
f Investment management fees				
g Other	15,950,451	14,753,887	1,196,564	
12 Advertising and promotion	114,799	95,778	19,021	
13 Office expenses	9,160,622	7,938,436	1,222,186	
14 Information technology	10,072,788	8,609,193	1,463,595	
15 Royalties . .				
16 Occupancy	4,237,213	4,176,838	60,375	
17 Travel	11,747,080	11,272,752	474,328	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	3,641	3,641		
19 Conferences, conventions, and meetings	2,342,843	2,113,674	229,169	
20 Interest	3,851,092	3,798,672	52,420	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	6,916,645	6,916,645		
23 Insurance	621,376	320,680	300,696	
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a OTHER PURCHASED EQUIP	4,868,163	4,863,748	4,415	0
b AVIATION, FUEL & PARTS	1,555,882	1,554,740	1,142	0
c POST-RETIREMENT EXP	739,621	739,621	0	0
d OTHER EXP & ADJUSTMENTS	27,767	24,209	40	3,518
e INDIRECT COST POOL EXP	-2,449,296	-2,449,296	0	0
f All other expenses	708,161	708,161		
25 **Total functional expenses.** Add lines 1 through 24f	221,119,560	199,596,521	21,519,521	3,518
26 **Joint costs.** Check here ▶ ☐ if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing			1	
	2	Savings and temporary cash investments		31,629,330	2	9,961,536
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		25,904,659	4	26,657,045
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use		7,751	8	10,026
	9	Prepaid expenses and deferred charges		2,963,587	9	2,765,310
	10a	Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D*	10a 197,370,547			
	b	Less accumulated depreciation	10b 66,207,636	77,726,197	10c	131,162,911
	11	Investments—publicly traded securities			11	
	12	Investments—other securities See Part IV, line 11		54,341,300	12	70,123,228
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		20,906,568	15	14,784,577
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		213,479,392	16	255,464,633
Liabilities	17	Accounts payable and accrued expenses		12,012,621	17	13,050,963
	18	Grants payable			18	
	19	Deferred revenue		20,011,254	19	8,426,335
	20	Tax-exempt bond liabilities		88,228,751	20	92,583,587
	21	Escrow or custodial account liability *Complete Part IV of Schedule D*			21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons *Complete Part II of Schedule L*			22	
	23	Secured mortgages and notes payable to unrelated third parties		764,934	23	734,213
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities Complete Part X of Schedule D		33,063,034	25	33,037,149
	26	**Total liabilities.** Add lines 17 through 25		154,080,594	26	147,832,247
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		58,578,549	27	106,801,804
	28	Temporarily restricted net assets		424,381	28	433,414
	29	Permanently restricted net assets		395,868	29	397,168
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		59,398,798	33	107,632,386
	34	Total liabilities and net assets/fund balances		213,479,392	34	255,464,633

Part XI Reconcilliation of Net Assets

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	271,294,750
2	Total expenses (must equal Part IX, column (A), line 25)	2	221,119,560
3	Revenue less expenses Subtract line 2 from line 1	3	50,175,190
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	59,398,798
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-1,941,602
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	107,632,386

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII . . . . ☐

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other ______ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both ☐ Separate basis ☑ Consolidated basis ☐ Both consolidated and separated basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	Yes	

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
UNIVERSITY CORPORATION FOR ATMOSPHERIC RESEARCH

Employer identification number
84-0412668

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☑ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See**section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I **b** ☐ Type II **c** ☐ Type III - Functionally integrated **d** ☐ Type III - Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?	**11g(i)**		
(ii) a family member of a person described in (i) above?	**11g(ii)**		
(iii) a 35% controlled entity of a person described in (i) or (ii) above?	**11g(iii)**		

h Provide the following information about the supported organization(s)

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	183,317,699	196,990,103	204,418,009	213,554,304	235,030,713	1,033,310,828
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	183,317,699	196,990,103	204,418,009	213,554,304	235,030,713	1,033,310,828
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public Support.** Subtract line 5 from line 4						1,033,310,828

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	183,317,699	196,990,103	204,418,009	213,554,304	235,030,713	1,033,310,828
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4,681,630	6,963,327	-6,005,978	-585,891	3,231,958	8,285,046
9 Net income from unrelated business activities, whether or not the business is regularly carried on	2,528					2,528
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 **Total support** (Add lines 7 through 10)						1,041,598,402

12 Gross receipts from related activities, etc (See instructions) **12**

13 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

14	Public Support Percentage for 2010 (line 6 column (f) divided by line 11 column (f))	14	99 200 %
15	Public Support Percentage for 2009 Schedule A, Part II, line 14	15	99 000 %

16a **33 1/3% support test—2010.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☑

b **33 1/3% support test—2009.** If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

17a **10%-facts-and-circumstances test—2010.** If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶☐

b **10%-facts-and-circumstances test—2009.** If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶☐

18 **Private Foundation** If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions ▶☐

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 in) ►	**(a)** 2006	**(b)** 2007	**(c)** 2008	**(d)** 2009	**(e)** 2010	**(f)** Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b 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						
8 **Public Support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	**(a)** 2006	**(b)** 2007	**(c)** 2008	**(d)** 2009	**(e)** 2010	**(f)** Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 **Total support** (Add lines 9, 10c, 11 and 12)						

14 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section501(c)(3) organization, check this box and **stop here** ► ☐

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	**15**	
16 Public support percentage from 2009 Schedule A, Part III, line 15	**16**	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2010** (line 10c column (f) divided by line 13 column (f))	**17**	
18 Investment income percentage from **2009** Schedule A, Part III, line 17	**18**	

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

b **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 ► ☐

20 **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions ► ☐

Part IV **Supplemental Information.** 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).

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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.

OMB No 1545-0047

2010

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

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then
- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then
- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization	Employer identification number
UNIVERSITY CORPORATION FOR ATMOSPHERIC RESEARCH	84-0412668

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV

2 Political expenditures ▶ $

3 Volunteer hours

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ $

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ $

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ $

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities ▶ $

3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ $

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	**(b)** Address	**(c)** EIN	**(d)** Amount paid from filing organization's funds If none, enter -0-	**(e)** Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Part II-A **Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

A Check ☐ if the filing organization belongs to an affiliated group

B Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	**(a)** Filing Organization's Totals	**(b)** Affiliated Group Totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)	59,371	
c Total lobbying expenditures (add lines 1a and 1b)	59,371	
d Other exempt purpose expenditures	221,060,189	
e Total exempt purpose expenditures (add lines 1c and 1d)	221,119,560	
f Lobbying nontaxable amount Enter the amount from the following table in both columns	1,000,000	

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

	(a)	(b)
g Grassroots nontaxable amount (enter 25% of line 1f)	250,000	
h Subtract line 1g from line 1a If zero or less, enter -0-	0	
i Subtract line 1f from line 1c If zero or less, enter -0-	0	

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ **Yes** ☐ **No**

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.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	**(a)** 2007	**(b)** 2008	**(c)** 2009	**(d)** 2010	**(e)** Total
2a Lobbying non-taxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c Total lobbying expenditures	56,753	55,128	58,286	59,371	229,538
d Grassroots non-taxable amount	250,000	250,000	250,000	250,000	1,000,000
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f Grassroots lobbying expenditures	91	92	91		274

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

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

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

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

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

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

Part IV Supplemental Information

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

Identifier	Return Reference	Explanation
ORGANIZATIONS DIRECT AND INDIRECT POLITICAL CAMPAIGN ACTIVITIES	PART I-A, LINE 1	ON BEHALF OF UCAR'S UNIVERSITY MEMBERS AND NCAR, UCAR PERIODICALLY LOBBIES ON SPECIFIC FEDERAL LEGISLATION THAT AFFECTS THE BROADER COMMUNITY SPECIFICALLY, UCAR LOBBYING ACTIVITIES INCLUDE 1 ISSUING "ACTION ALERTS" (EMAILS) TO UNIVERSITY MEMBERS, ASKING THEM TO CONTACT MEMBERS OF THEIR OWN CONGRESSIONAL DELEGATION REGARDING SPECIFIC PIECES OF LEGISLATION, INCLUDING APPROPRIATIONS (FOR NSF, NASA, NOAA AND DOE OFFICE OF SCIENCE), POLICY (SUCH AS A CLIMATE BILL), AND AUTHORIZATION BILLS (SUCH AS AMERICA COMPETES BILL) SOME TIMES CONTACTING THEIR MEMBERS ON THEIR BEHALF, BY FAX 2 COMMENTING ON RELEVANT BILLS, INCLUDING SUGGESTING SPECIFIC LANGUAGE (SUCH AS THE NOAA ORGANIC ACT), THROUGH LETTERS, EMAILS, VISITS AND PHONE CALLS 3 DIRECTLY CONTACTING CONGRESSIONAL MEMBERS TO SUPPORT OR REJECT BILLS RELEVANT TO THE COMMUNITY, THROUGH LETTERS, EMAILS, VISITS AND PHONE CALLS

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SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
UNIVERSITY CORPORATION FOR ATMOSPHERIC RESEARCH

Employer identification number
84-0412668

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit ☐ Yes ☐ No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or pleasure)
☐ Preservation of an historically importantly land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ ____________

4 Number of states where property subject to conservation easement is located ▶ ____________

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶ ____________

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ ____________

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

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

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ ____________

(ii) Assets included in Form 990, Part X ▶ $ ____________

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ $ ____________

b Assets included in Form 990, Part X ▶ $ ____________

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

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

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other

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

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

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

			Amount
c	Beginning balance	1c	
d	Additions during the year	1d	
e	Distributions during the year	1e	
f	Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV

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

		(a) Current Year	(b) Prior Year	(c) Two Years Back	(d) Three Years Back	(e) Four Years Back
1a	Beginning of year balance	395,868	394,468	387,348		
b	Contributions	1,300	1,400	7,150		
c	Investment earnings or losses					
d	Grants or scholarships					
e	Other expenditures for facilities and programs			30		
f	Administrative expenses					
g	End of year balance	397,168	395,868	394,468		

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ▶

b Permanent endowment ▶ 100 000 %

c Term endowment ▶

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

			Yes	No
	(i) unrelated organizations	3a(i)		No
	(ii) related organizations	3a(ii)		No
b	If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

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

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		7,987,223		7,987,223
b Buildings		154,278,478	38,965,792	115,312,686
c Leasehold improvements		95,968	95,968	0
d Equipment		34,916,109	27,143,123	7,772,986
e Other		92,769	2,753	90,016
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				131,162,911

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) GUARANTEED INSURANCE CONTRACT	11,397,000	C
(B) US GOVERNMENT AGENCY SECURITIES	15,035,000	F
(C) CERTIFICATES OF DEPOSIT	13,347,000	F
(D) EQUITY SECURITIES	28,485,228	F
(E) OTHER FIXED INCOME	1,859,000	F
Total. *(Column (b) should equal Form 990, Part X, col (B) line 12)* ▶	70,123,228	

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

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

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) RESTRICTED CASH	14,784,577
Total. *(Column (b) should equal Form 990, Part X, col.(B) line 15.)* . . . . ▶	14,784,577

Part X Other Liabilities. See Form 990, Part X, line 25.

1 (a) Description of Liability	(b) Amount
Federal Income Taxes	
SALARIES, WAGES AND PAYROLL TAXES PAYABLE	10,317,294
INTEREST PAYABLE	346,900
INDIRECT COST VARIANCES	2,958,571
ACCRUED VACATION PAYABLE	13,073,305
ACCRUED POST-RETIREMENT BENEFIT	6,341,079
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	33,037,149

2. Fin 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC740)

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

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

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

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

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

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

Part XIV Supplemental Information

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

Identifier	Return Reference	Explanation
		PART V, LINE 4 UCAR'S ENDOWMENT CONSISTS OF TWO DONOR-RESTRICTED FUNDS ESTABLISHED TO SUPPORT TWO SCIENTIFIC FELLOWSHIPS FROM DONATIONS THE INVESTMENT INCOME EARNED ON THE DONATIONS IS INTENDED TO FUND THE EXPENSES OF THE FELLOWSHIPS WITH THE PRINCIPAL BALANCE REMAINING PERMANENTLY INTACT NET ASSETS ASSOCIATED WITH ENDOWMENT FUNDS ARE CLASSIFIED AND REPORTED AS PERMANENTLY RESTRICTED INVESTMENT EARNINGS ARE REPORTED AS TEMPORARILY RESTRICTED NET ASSETS
		PART X THERE HAS BEEN NO INDICATION OF A FOOTNOTE PERTAINING TO THE TAX POSITIONS TAKEN BY THE ORGANIZATION FOR OTHER LIABILITIES UNDER THE FIN 48 RULES ON THE AUDITED FINANCIALS

SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
UNIVERSITY CORPORATION FOR ATMOSPHERIC RESEARCH

Employer identification number
84-0412668

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . ☐ Yes ☐ No

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States

3 Activites per Region (Use Part V if additional space is needed)

	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
	CENTRAL AMERICA & THE CARIBBEAN	0	0	PROGRAM SERVICES	SCIENTIFIC RESEARCH/COLLABORATION/EDUCATION	44,232
	EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	SCIENTIFIC RESEARCH/COLLABORATION/EDUCATION	1,542,742
	EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	SCIENTIFIC RESEARCH/COLLABORATION/EDUCATION	1,733,918
	MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	SCIENTIFIC RESEARCH/COLLABORATION/EDUCATION	173,286
	NORTH AMERICA	0	0	PROGRAM SERVICES	SCIENTIFIC RESEARCH/COLLABORATION/EDUCATION	375,043
	RUSSIA & THE NEWLY INDEPENDENT STATES	0	0	PROGRAM SERVICES	SCIENTIFIC RESEARCH/COLLABORATION/EDUCATION	6,142
	SOUTH AMERICA	0	0	PROGRAM SERVICES	SCIENTIFIC RESEARCH/COLLABORATION/EDUCATION	160,239
	SOUTH ASIA	0	0	PROGRAM SERVICES	SCIENTIFIC RESEARCH/COLLABORATION/EDUCATION	350,583
	SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	SCIENTIFIC RESEARCH/COLLABORATION/EDUCATION	312,420
	CENTRAL AMERICA & THE CARIBBEAN	0	0	INVESTMENTS		4,677,000
3a	Sub-total	0	0			4,386,185
b	Total from continuation sheets to Part I	0	0			4,989,420
c	**Totals** (add lines 3a and 3b)	0	0			9,375,605

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

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

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . . ▶ ____________

3 Enter total number of other organizations or entities . . . . ▶

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Part V if additional space is needed.

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

Part IV Foreign Forms

1 Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)* ☐ Yes ☑ No

2 Did the organization have an interest in a foreign trust during the tax year? *If " Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)* ☐ Yes ☑ No

3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)* ☑ Yes ☐ No

4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)* ☑ Yes ☐ No

5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)* ☐ Yes ☑ No

6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).* ☐ Yes ☑ No

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

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS OUTSIDE THE U S		SCHEDULE F, PART I, LINE 2 PROCEDURES ARE BASED UPON THE TERMS AND CONDITIONS OF AWARDS RECEIVED FOR RESEARCH, COLLABORATION AND EDUCATIONAL PURPOSES, PRESCRIBED BY OMB CIRCULARS

Identifier	Return Reference	Explanation
METHOD USED TO ACCCOUNT FOR EXPENDITURES		SCHEDULE F, PART I, LINE 3 THE AMOUNT REPORTED AT PART I COLUMN (F) FOR INVESTMENTS REFLECTS THE END OF YEAR FAIR MARKET VALUE OF THESE INVESTMENTS AND DOES NOT REFLECT INVESTMENT EXPENSES IN THE REGION

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
UNIVERSITY CORPORATION FOR ATMOSPHERIC RESEARCH

Employer identification number
84-0412668

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . . ☑ Yes ☐ No

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

Part II **Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Part II can be duplicated if additional space is needed. . . . . . ▶ ☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance

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

3 Enter total number of other organizations . . . . . . ▶

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

(a) Type of grant or assistance	**(b)** Number of recipients	**(c)** Amount of cash grant	**(d)** Amount of non-cash assistance	**(e)** Method of valuation (book, FMV, appraisal, other)	**(f)** Description of non-cash assistance
(1) SCHOLARSHIPS FOR STUDENTS STUDYING ATMOSPHERIC SCIENCES	6	57,804			

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

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 TO BE CONSIDERED FOR FUNDING, STUDENTS MUST SUBMIT A FUNDING REQUEST AND ALL SUPPORTING DOCUMENTATION DOCUMENTATION INCLUDES TRANSCRIPTS AND NEED DOCUMENTATION AS DEFINED BY THE SCHOOL EACH GRANT IS MADE OUT TO THE STUDENT'S UNIVERSITY ACCOUNT THIS ENSURES THAT GRANTS ARE USED TO PAY TUITION, FEES AND OTHER SCHOOL RELATED COST

Schedule J (Form 990)

Compensation Information

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

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

▶ Attach to Form 990. ▶ See separate instructions.

Department of the Treasury
Internal Revenue Service

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
UNIVERSITY CORPORATION FOR ATMOSPHERIC RESEARCH

Employer identification number
84-0412668

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			

- [x] First-class or charter travel
- [ ] Travel for companions
- [ ] Tax idemnification and gross-up payments
- [ ] Discretionary spending account
- [ ] Housing allowance or residence for personal use
- [ ] Payments for business use of personal residence
- [ ] Health or social club dues or initiation fees
- [ ] Personal services (e g , maid, chauffeur, chef)

			Yes	No
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	**1b**	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	**2**	Yes	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply			

- [ ] Compensation committee
- [x] Independent compensation consultant
- [x] Form 990 of other organizations
- [ ] Written employment contract
- [x] Compensation survey or study
- [x] Approval by the board or compensation committee

			Yes	No
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment from the organization or a related organization?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	**4c**		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	**5a**		No
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, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**		No
b	Any related organization?	**6b**		No
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	**8**		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**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 other deferred compensation	**(D)** Nontaxable benefits	**(E)** Total of columns (B)(i)-(D)	**(F)** Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	**(ii)** Bonus & incentive compensation	**(iii)** Other reportable compensation				
See Additional Data Table								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

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
	PART I, LINE 1A	FIRST- OR BUSINESS-CLASS FARES ARE ALLOWABLE FOR INTERNATIONAL TRAVEL WHEN THE TRIP HAS A ONE-WAY IN-FLIGHT SEGMENT OF 10 HOURS OR MORE, OR WHERE THE TOTAL ELAPSED ONE-WAY IN-FLIGHT TIME IS 15 HOURS OR MORE WITHOUT OVERNIGHT STOPOVERS

Additional Data

Return to Form

Software ID:
Software Version:
EIN: 84-0412668
Name: UNIVERSITY CORPORATION FOR ATMOSPHERIC RESEARCH

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

(A) Name		**(B)** Breakdown of W-2 and/or 1099-MISC compensation			**(C)** Deferred compensation	**(D)** Nontaxable benefits	**(E)** Total of columns (B)(i)-(D)	**(F)** Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	**(ii)** Bonus & incentive compensation	**(iii)** Other compensation				
RICHARD A ANTHES	(i) (ii)	343,387 0	0 0	4,519 0	0 0	12,169 0	360,075 0	0 0
KATHRYN S SCHMOLL	(i) (ii)	252,073 0	0 0	0 0	0 0	6,674 0	258,747 0	0 0
JACK D FELLOWS	(i) (ii)	248,347 0	0 0	0 0	0 0	15,662 0	264,009 0	0 0
ROGER M WAKIMOTO	(i) (ii)	351,875 0	0 0	2,170 0	0 0	16,174 0	370,219 0	0 0
MAURA E HAGAN	(i) (ii)	213,002 0	0 0	0 0	0 0	2,229 0	215,231 0	0 0
JEFF D REAVES	(i) (ii)	176,222 0	0 0	0 0	0 0	11,460 0	187,682 0	0 0
DAN JAY WILSON	(i) (ii)	165,927 0	0 0	0 0	0 0	1,894 0	167,821 0	0 0
G BRANT FOOTE	(i) (ii)	223,210 0	0 0	0 0	0 0	1,830 0	225,040 0	0 0
ALASDAIR KELLIE	(i) (ii)	218,398 0	0 0	0 0	0 0	11,601 0	229,999 0	0 0
GREGORY HOLLAND	(i) (ii)	209,946 0	0 0	0 0	0 0	11,529 0	221,475 0	0 0
KEVIN E TRENBERTH	(i) (ii)	183,870 0	0 0	0 0	0 0	11,327 0	195,197 0	0 0
RICHARD ROTUNNO	(i) (ii)	182,162 0	0 0	0 0	0 0	11,495 0	193,657 0	0 0
MARGARET MCCLELLAN	(i) (ii)	180,268 0	0 0	0 0	0 0	6,243 0	186,511 0	0 0
BRUCE CARMICHAEL	(i) (ii)	177,627 0	0 0	0 0	0 0	2,544 0	180,171 0	0 0
RICHARD D LOFT	(i) (ii)	170,366 0	0 0	0 0	0 0	11,244 0	181,610 0	0 0
WARREN M WASHINGTON	(i) (ii)	167,932 0	0 0	0 0	0 0	1,786 0	169,718 0	0 0
RICHARD E CARBONE	(i) (ii)	167,223 0	0 0	0 0	0 0	11,150 0	178,373 0	0 0
TIMOTHY C SPANGLER	(i) (ii)	166,530 0	0 0	0 0	0 0	8,514 0	175,044 0	0 0
YING HWA KUO	(i) (ii)	166,188 0	0 0	0 0	0 0	11,236 0	177,424 0	0 0
WILLIAM LARGE	(i) (ii)	164,673 0	0 0	0 0	0 0	15,162 0	179,835 0	0 0
JAMES W HURRELL	(i) (ii)	164,214 0	0 0	0 0	0 0	15,161 0	179,375 0	0 0
ROY M RASMUSSSEN	(i) (ii)	159,546 0	0 0	0 0	0 0	15,131 0	174,677 0	0 0
WILLIAM A COOPER	(i) (ii)	178,545 0	0 0	0 0	0 0	11,229 0	189,774 0	0 0
ROBERT L GALL	(i) (ii)	173,023 0	0 0	0 0	0 0	11,338 0	184,361 0	0 0
TIMOTHY L KILLEEN	(i) (ii)	193,143 0	0 0	0 0	0 0	8,627 0	201,770 0	0 0
MICHAEL KNOELKER	(i) (ii)	175,747 0	0 0	0 0	0 0	11,296 0	187,043 0	0 0
SUE SCHAUFFLER	(i) (ii)	175,492 0	0 0	0 0	0 0	1,912 0	177,404 0	0 0
LINDA O MEARNS	(i) (ii)	165,615 0	0 0	0 0	0 0	1,457 0	167,072 0	0 0
RICHARD WAGONER	(i) (ii)	141,030 0	0 0	0 0	0 0	1,279 0	142,309 0	0 0

Schedule K (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990).
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
UNIVERSITY CORPORATION FOR ATMOSPHERIC RESEARCH

Employer identification number
84-0412668

Part I Bond Issues

	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased		(h) On Behalf of Issuer		(i) Pool financing	
							Yes	No	Yes	No	Yes	No
A	COUNTY OF BOULDER COLORADO	84-6000748	10146BEE5	12-04-2003	25,206,399	CONSTRUCT A LABORATORY BUILDING, REFURBISH EXISTING BUILDINGS, PURCHASE EQU		X		X		X
B	CO EDUCATIONAL & CULTURAL FACILITIES AUTH	84-0896727	19645RLK5	05-20-2010	28,527,506	PURCHASE BLD & REMODEL 2 BLDGS & EQU & REFUND BONDS ISSUED 1/9/97 & 2/25/99		X		X		X
C	CO EDUCATIONAL & CULTURAL FACILITIES AUTH	84-0896727	NONEABAIO	08-16-2011	25,125,000	PURCHASE BLDGS & EQUIP AND REFUND BONDS ISSUED 11/27/2001		X		X		X
D	CO EDUCATIONAL & CULTURAL FACILITIES AUTH	84-0896727	NONEABAIO	09-07-2011	8,325,000	ADVANCE REFUND A PORTION OF BONDS ISSUED 12/18/2002		X		X		X

Part II Proceeds

		A		B		C		D	
1	Amount of bonds retired	7,000,000		1,550,000					
2	Amount of bonds legally defeased								
3	Total proceeds of issue	26,458,096		28,736,955		25,125,000		8,325,000	
4	Gross proceeds in reserve funds								
5	Capitalized interest from proceeds	1,761,829		745,488					
6	Proceeds in refunding escrow	8,247,031						8,247,031	
7	Issuance costs from proceeds	534,099		392,761		181,239		50,779	
8	Credit enhancement from proceeds	375,564							
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds	23,786,604		13,165,919					
11	Other spent proceeds	2,960,170		2,960,170		18,485,364			
12	Other unspent proceeds	11,472,628		11,472,628		6,458,397		27,190	
13	Year of substantial completion	2006							
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?		X	X		X			X
15	Were the bonds issued as part of an advance refunding issue?		X		X		X	X	
16	Has the final allocation of proceeds been made?	X			X		X		X
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X		X	

Part III Private Business Use

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

Part III Private Business Use *(Continued)*

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
3a	Are there any management or service contracts that may result in private business use?	X							
b	Are there any research agreements that may result in private business use of bond-financed property?		X						
c	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?	X							
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶	0 %							
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶	0 %							
6	Total of lines 4 and 5	0 %							
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	X							

Part IV Arbitrage

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X		X		X		X
2	Is the bond issue a variable rate issue?		X		X	X			X
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?		X		X	X			X
b	Name of provider	DEUSTCHE BANK				DEUSTCHE BANK			
c	Term of hedge	9 500000000000				9 500000000000			
d	Was the hedge superintegrated?		X				X		
e	Was a hedge terminated?		X				X		
4a	Were gross proceeds invested in a GIC?		X	X		X		X	
b	Name of provider	BAYERISCHE BANK		BAYERISCHE BANK		NATIXIS		NATIXIS	
c	Term of GIC	2 000000000000		2 000000000000		2 300000000000		0 900000000000	
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?	X		X		X		X	
5	Were any gross proceeds invested beyond an available temporary period?	X			X		X		X
6	Did the bond issue qualify for an exception to rebate?		X	X		X			X

Part V Supplemental Information

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

Identifier	Return Reference	Explanation
SCH K, PART V		"A" AND "B" TOTAL GROSS PROCEEDS SHOWN IN PART II, LINE 3 EXCEED BOND ISSUE LISTED IN PART I DUE TO INVESTMENT EARNINGS PART IV, LINE 5- PROCEEDS HELD BEYOND AN AVAILABLE TEMPORARY PERIOD WERE APPROPRIATELY YIELD RESTRICTED PART IV- LINE 6- BONDS A & B WERE ANSWERED "YES" BECAUSE CURRENT REFUNDING PORTION OF THE BONDS MET THE REQUIREMENTS OF THE 6 MONTH SPENDING EXCEPTION

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
UNIVERSITY CORPORATION FOR ATMOSPHERIC RESEARCH

Employer identification number
84-0412668

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6		UCAR IS ORGANIZED AS A NONPROFIT MEMBERSHIP CORPORATION UNDER COLORADO STATUTES PURSUANT TO THE UCAR BYLAWS, ARTICLE 2, SECTION 2 QUALIFICATIONS FOR MEMBERSHIP ONLY UNIVERSITIES, OTHER NONPROFIT INSTITUTIONS OR ORGANIZATIONS, OR DIVISIONS OR UNITS OF UNIVERSITIES OR OTHER NONPROFIT INSTITUTIONS OR ORGANIZATIONS, OR GOVERNMENTAL INSTRUMENTALITIES, WHICH (A) ARE ORGANIZED FOR EDUCATIONAL OR SCIENTIFIC PURPOSES, (B) ARE LOCATED WITHIN THE BOUNDARIES OF THE UNITED STATES OF AMERICA, CANADA OR MEXICO, AND (C) HAVE MET THE FOLLOWING CRITERIA, SHALL BE ELIGIBLE FOR MEMBERSHIP PROGRAM OF STUDIES AND RESEARCH - SUCH ENTITY HAS MADE A DEFINITIVE, SUBSTANTIAL, AND CONTINUING COMMITMENT TO A FULL, COHERENT, AND INTEGRATED PROGRAM OF COURSE STUDIES AND DISSERTATION RESEARCH LEADING TO THE DOCTORATE IN ONE OR MORE OF THE ATMOSPHERIC SCIENCES OR RELATED FIELDS, AND PROGRESS IN THE ATMOSPHERIC SCIENCES OR RELATED FIELDS - SUCH ENTITY HAS MADE A DEFINITIVE, SUBSTANTIAL, AND CONTINUING COMMITMENT TO PROGRESS IN THE ATMOSPHERIC SCIENCES OR RELATED FIELDS AS EVIDENCED BY SCHOLARLY WORKS OF SIGNIFICANCE BY ITS FACULTY IN THE ATMOSPHERIC SCIENCES OR RELATED FIELDS, AND PARTICIPATION - SUCH ENTITY IS WILLING TO MAKE A CLEAR AND CONTINUING COMMITMENT TO ACTIVE PARTICIPATION IN THE ACTIVITIES OF THE CORPORATION, INCLUDING GOVERNANCE, AND ITS PROGRAMS AND FACILITIES

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A		THE MEMBERS HAVE THE RIGHT, THROUGH THEIR MEMBERS REPRESENTATIVES, TO NOMINATE AND ELECT THE BOARD OF TRUSTEES, THROUGH THE MEMBERS NOMINATING COMMITTEE AT THE ANNUAL MEETING, EACH YEAR, THE MEMBERS ELECT TRUSTEES TO SERVE ON THE BOARD OF TRUSTEES THERE ARE 18 ELECTED TRUSTEES 12 INSTITUTIONAL TRUSTEES (FROM MEMBER INSTITUTIONS) AND 6 TRUSTEES-AT-LARGE THE TRUSTEES SERVE STAGGERED TERMS, SO THE NUMBER OF TRUSTEES ELECTED DEPENDS ON TERM EXPIRATIONS AND VACANCIES, BUT IT IS TYPICALLY 3 TRUSTEES EACH YEAR

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B		THERE WERE NO BYLAW AMENDMENTS DURING THE TAX YEAR, BUT MEMBERS HAVE A RIGHT TO APPROVE ANY AMENDMENTS TO THE BYLAWS, BY A TWO-THIRDS MAJORITY VOTE.

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		THE ORGANIZATION'S TRUSTEES WERE PROVIDED AN ELECTRONIC COPY OF THE FINAL FORM 990 PRIOR TO FILING WITH THE IRS IN ADDITION, CERTAIN SECTIONS OF THE FORM 990 WERE DISCUSSSED WITH THE AUDIT AND FINANCE COMMITTEE OF THE BOARD OF TRUSTEES AND SENIOR OFFICERS OF THE ORGANIZATION DURING REGULARLY HELD MEETINGS THE ORGANIZATION'S OFFICERS WERE BRIEFED AND DISCUSSED CERTAIN SECTIONS OF THE FORM 990 PRIOR TO FILING THE VICE PRESIDENT FOR FINANCE AND ADMINISTRATION, THE DIRECTOR OF HUMAN RESOURCES, AND THE GENERAL COUNSEL REVIEWED AND PREPARED PORTIONS OF THE FORM 990 BEFORE IT WAS FILED THE DIRECTOR OF BUDGET AND FINANCE, THE ACCOUNTING MANAGER AND PROJECT ACCOUNTANT PREPARED AND REVIEWED ALL SECTIONS OF THE FORM 990 IN PREPARATION FOR FILING

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	ANNUALLY THE TRUSTEES AND OFFICERS ARE GIVEN AN OVERVIEW OF THE CONFLICT OF INTEREST POLICY, AND SIGN CONFLICT OF INTEREST FORMS THE ORGANIZATION REQUIRES ALL EMPLOYEES TO COMPLETE A CONFLICT OF INTEREST STATEMENT UPON HIRE AND UPDATE THE STATEMENT AT LEAST ONCE A YEAR ANNUAL RAISES, IF ANY, WILL NOT BE ALLOWED UNLESS AND EMPLOYEES STATEMENT IS COMPLETED AND SUBMITTED

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	THE UCAR PRESIDENT'S COMPENSATION IS SET ANNUALLY BY THE BOARD OF TRUSTEES THE PERSONNEL COMMITTEE OF THE BOARD OF TRUSTEES AND THE FULL BOARD OF TRUSTEES, ANNUALLY, AT THE MAY BOARD MEETING, CONSIDER THE COMPENSATION STRUCTURE, INCLUDING COMPARABILITY DATA AND VOTE ON STRUCTURE AND MERIT ADJUSTMENTS FOR ALL EMPLOYEES (INCLUDING TOP MANAGEMENT POSITIONS) COMPENSATION DATA, RECORD KEEPING AND DECISIONS THEREON FOR ALL EMPLOYEES, IS MAINTAINED IN UCAR HUMAN RESOURCES IN ADDITION, THE SPECIFIC COMPENSATION FOR THE FOLLOWING TOP MANAGEMENT POSITIONS UCAR PRESIDENT, NCAR DIRECTOR, VP OF FINANCE AND ADMINISTRATION, UCP DIRECTOR, NCAR DEPUTY DIRECTOR, ARE REVIEWED EVERY COUPLE OF YEARS BY A COMPENSATION SPECIALIST WITHIN UCAR HUMAN RESOURCES THE REVIEW INCLUDES MARKET SURVEY COMPENSATION FOR COMPARABLE POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS THIS MARKET DATA WAS REVIEWED BY AN EXTERNAL THIRD PARTY ORGANIZATION IN MAY 2009 AND FOUND TO BE APPROPRIATE

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	ALL OF THESE DOCUMENTS ARE MADE AVAILABLE THROUGH THE ORGANIZATION'S WEB SITE. WWW.UCAR.EDU

Identifier	Return Reference	Explanation
AVG HOURS DEVOTED TO RELATED ORG(S) WHEN RELATED COMP IS REPORTED	FORM 990, PART VII	NO HOURS WERE WORKED FOR RELATED ORGANIZATIONS

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -1,941,602

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047
2010
Open to Public Inspection

Name of the organization
UNIVERSITY CORPORATION FOR ATMOSPHERIC RESEARCH

Employer identification number
84-0412668

Part I **Identification of Disregarded Entities** (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) UCAR CHILDCARE LLC PO BOX 3000 BOULDER, CO 80307 84-0412668	CHILDCARE	CO	179,990	0	UCAR

Part II **Identification of Related Tax-Exempt Organizations** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization Yes	No
(1) UNIVERSITY CORPORATION FOR ATMOSPHERIC RESEARCH FOUNDATION PO BOX 3000 BOULDER, CO 80307 74-2439386	FOUNDATION	CO	SECTION 501(C)(3)	SCHEDULE A, LINE 11(	UCAR	Yes	

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

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

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

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)

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

			Yes	No
1	During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a	Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties **(iv)** rent from a controlled entity	**1a**	Yes	
b	Gift, grant, or capital contribution to other organization(s)	**1b**		No
c	Gift, grant, or capital contribution from other organization(s)	**1c**		No
d	Loans or loan guarantees to or for other organization(s)	**1d**		No
e	Loans or loan guarantees by other organization(s)	**1e**		No
f	Sale of assets to other organization(s)	**1f**		No
g	Purchase of assets from other organization(s)	**1g**		No
h	Exchange of assets	**1h**		No
i	Lease of facilities, equipment, or other assets to other organization(s)	**1i**		No
j	Lease of facilities, equipment, or other assets from other organization(s)	**1j**		No
k	Performance of services or membership or fundraising solicitations for other organization(s)	**1k**		No
l	Performance of services or membership or fundraising solicitations by other organization(s)	**1l**		No
m	Sharing of facilities, equipment, mailing lists, or other assets	**1m**		No
n	Sharing of paid employees	**1n**	Yes	
o	Reimbursement paid to other organization for expenses	**1o**		No
p	Reimbursement paid by other organization for expenses	**1p**		No
q	Other transfer of cash or property to other organization(s)	**1q**		No
r	Other transfer of cash or property from other organization(s)	**1r**		No

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

(a) Name of other organization	**(b)** Transaction type(a-r)	**(c)** Amount involved	**(d)** Method of determining amount involved
(1) UNIVERSITY CORPORATION FOR ATM RESEARCH FOUNDATION	A	63,227	CASH
(2)			
(3)			
(4)			
(5)			
(6)			

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproprtionate allocations?		(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner?	
			Yes	No		Yes	No		Yes	No

Part VII **Supplemental Information**

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

Identifier	Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 84-0412668
Name: UNIVERSITY CORPORATION FOR ATMOSPHERIC RESEARCH

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
RICHARD A ANTHES UCAR PRESIDENT	40 00	X		X				347,906	0	12,169
RANA FINE CHAIRPERSON	1 00	X						0	0	0
DENNIS HARTMANN VICE-CHAIR	1 00	X						0	0	0
STEVE ACKERMAN SECRETARY	1 00	X						0	0	0
RIC PORRECA TREASURER	1 00	X						0	0	0
BARBARA FEINER TRUSTEE-AT-LARGE	1 00	X						0	0	0
ROSINA BIERBAUM TRUSTEE	1 00	X						0	0	0
FRANK NUTTER TRUSTEE-AT-LARGE	1 00	X						0	0	0
STEVE RUTLEDGE TRUSTEE	1 00	X						0	0	0
SHIRLEY MALCOM TRUSTEE-AT-LARGE	1 00	X						0	0	0
RICHARD TRULY TRUSTEE-AT-LARGE	1 00	X						0	0	0
ROBERT PALMER TRUSTEE-AT-LARGE	1 00	X						0	0	0
ERI FOUFOULA-GEORGIOU TRUSTEE	1 00	X						0	0	0
KERRY COOK TRUSTEE	1 00	X						0	0	0
MARK ABBOTT TRUSTEE	1 00	X						0	0	0
ROBERTA BALSTAD TRUSTEE	1 00	X						0	0	0
FRED CARR TRUSTEE	1 00	X						0	0	0
DON WUEBBLES TRUSTEE	1 00	X						0	0	0
RICHARD CLARK TRUSTEE-AT-LARGE	1 00	X						0	0	0
ANNE THOMPSON TRUSTEE	1 00	X						0	0	0
JERRY MELILLO TRUSTEE-AT-LARGE	1 00	X						0	0	0
ERIC SALTZMAN TRUSTEE	1 00	X						0	0	0
EUGENE TAKLE TRUSTEE	1 00	X						0	0	0
SUSAN FRIBERG ASST SECRETARY	40 00			X				98,170	0	5,736
KATHRYN S SCHMOLL VP FINANCE & ADMIN	40 00			X				252,073	0	6,674

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JACK D FELLOWS VP & UCAR COMM PROJ DIR	40 00			X				248,347	0	15,662
ROGER M WAKIMOTO NCAR ASSO DIRECTOR	40 00			X				354,045	0	16,174
MAURA E HAGAN DEPUTY DIRECTOR NCAR	40 00			X				213,002	0	2,229
JEFF D REAVES ASSO VP BUSINESS ADMIN	40 00			X				176,222	0	11,460
DAN JAY WILSON DIRECTOR, TREASURY OPS	40 00			X				165,927	0	1,894
G BRANT FOOTE SCIENTIST	40 00				X			223,210	0	1,830
ALASDAIR KELLIE SCIENTIST	40 00				X			218,398	0	11,601
GREGORY HOLLAND SCIENTIST	40 00				X			209,946	0	11,529
KEVIN E TRENBERTH SCIENTIST	40 00				X			183,870	0	11,327
RICHARD ROTUNNO SCIENTIST	40 00				X			182,162	0	11,495
MARGARET MCCLELLAN UCAR CORP ATTORNEY	40 00				X			180,268	0	6,243
BRUCE CARMICHAEL SCIENTIST	40 00				X			177,627	0	2,544
RICHARD D LOFT SCIENTIST	40 00				X			170,366	0	11,244
WARREN M WASHINGTON SCIENTIST	40 00				X			167,932	0	1,786
RICHARD E CARBONE SCIENTIST	40 00				X			167,223	0	11,150
TIMOTHY C SPANGLER SCIENTIST	40 00				X			166,530	0	8,514
YING HWA KUO SCIENTIST	40 00				X			166,188	0	11,236
WILLIAM LARGE SCIENTIST	40 00				X			164,673	0	15,162
JAMES W HURRELL SCIENTIST	40 00				X			164,214	0	15,161
ROY M RASMUSSSEN SCIENTIST	40 00				X			159,546	0	15,131
WILLIAM A COOPER SCIENTIST	40 00					X		178,545	0	11,229
ROBERT L GALL SCIENTIST	40 00					X		173,023	0	11,338
TIMOTHY L KILLEEN SCIENTIST	40 00					X		193,143	0	8,627
MICHAEL KNOELKER SCIENTIST	40 00					X		175,747	0	11,296
SUE SCHAUFFLER SCIENTIST	40 00					X		175,492	0	1,912

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
LINDA O MEARNS FORMER KEY EMPLOYEE	40 00						X	165,615	0	1,457
RICHARD WAGONER FORMER KEY EMPLOYEE	40 00						X	141,030	0	1,279

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

4d. Other program services

(Code) (Expenses $ 42,047,411 including grants of $ 92,120) (Revenue $ 2,073,334)

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

PERFORMED RESEARCH TO UNDERSTAND THE BEHAVIOR OF THE ATMOSPHERE AND RELATED PHYSICAL, BIOLOGICAL, AND SOCIAL SYSTEMS, PROVIDED INFORMATION TO SUPPORT, ENHANCE, AND EXTEND THE CAPABILITIES OF THE UNIVERSITY COMMUNITY AND THE BROADER SCIENTIFIC COMMUNITY, NATIONALLY AND INTERNATIONALLY, AND FOSTERED THE TRANSFER OF KNOWLEDGE AND TECHNOLOGY FOR THE BETTERMENT OF LIFE ON EARTH