



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



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

2011

Open to Public
Inspection

A For the 2011 calendar year, or tax year beginning JUL 1, 2011 and ending JUN 30, 2012

B Check if applicable	C Name of organization THE COUNCIL ON UNDERGRADUATE RESEARCH		D Employer identification number 41-1398118
<input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Doing Business As Number and street (or P.O. box if mail is not delivered to street address) 734 15TH STREET, N.W.		Room/suite 550
	City or town, state or country, and ZIP + 4 WASHINGTON, DC 20005		E Telephone number (202) 783-4810
	F Name and address of principal officer: DUNCAN MCBRIDE SAME AS C ABOVE		G Gross receipts \$ 2,255,727.
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c)() (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	J Website: ► CUR.ORG		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ►			H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
L Year of formation: 1978			M State of legal domicile: MN

Part I. Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: COLLECT AND DISSEMINATE INFORMATION ABOUT UNDERGRADUATE RESEARCH.		
	2 Check this box ► <input type="checkbox"/> 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 15	
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4 15	
	5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5 7	
	6 Total number of volunteers (estimate if necessary)	6 0	
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a 0.	
b Net unrelated business taxable income from Form 990-T, line 34	7b 0.		
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 702,282.	Current Year 332,890.
	9 Program service revenue (Part VIII, line 2g)	1,238,263.	1,562,985.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	101,611.	61,431.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,042,156.	1,957,306.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	10,000.
	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)	601,201.	544,956.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) ► 0.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,054,829.	1,314,043.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,656,030.	1,868,999.
19 Revenue less expenses. Subtract line 18 from line 12	386,126.	88,307.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 2,678,497.	End of Year 2,865,339.
	21 Total liabilities (Part X, line 26)	727,454.	814,596.
	22 Net assets or fund balances. Subtract line 21 from line 20	1,951,043.	2,050,743.

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	► Signature of officer <i>Duncan E. McBride</i>	Date <i>8 November 2012</i>			
	► DUNCAN MCBRIDE, TREASURER				
Paid Preparer Use Only	Print/Type preparer's name GEOFFREY SECKER	Preparer's signature <i>Geoffrey Secker</i>	Date 10/10/12	Check if self-employed <input type="checkbox"/>	PTIN P00023134
	Firm's name ► SECKER & ASSOCIATES, P.C.		Firm's EIN ► 52-1941498		
	Firm's address ► 51 MONROE PLACE, SUITE 1900 ROCKVILLE, MD 20850		Phone no. 301-340-6300		

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

132001 01-23-12 LHA For Paperwork Reduction Act Notice, see the separate instructions.

X Yes No

Form 990 (2011)

916-19 8

SCANNED DEC 18 2012

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response to any question in this Part III 1 Briefly describe the organization's mission.**COLLECT AND DISSEMINATE INFORMATION ABOUT UNDERGRADUATE RESEARCH.**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 organization's program service accomplishments for each of its three largest program services, as measured 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 \$ 700,797. including grants of \$ _____) (Revenue \$ 703,658.)**CONFERENCES AND MEETINGS FOR THE DISSEMINATION OF INFORMATION CONCERNING UNDERGRADUATE RESEARCH.**4b (Code _____) (Expenses \$ 305,190. including grants of \$ _____) (Revenue \$ _____)**FEDERAL AWARD PROGRAMS TO PERFORM RESEARCH RELATED TO UNDERGRADUATE RESEARCH.**4c (Code _____) (Expenses \$ 94,573. including grants of \$ _____) (Revenue \$ 784,166.)**MEMBERSHIP SERVICES PROVIDES INFORMATION RELATED TO UNDERGRADUATE RESEARCH TO COLLEGES, UNIVERSITIES AND INDIVIDUALS WORKING IN THE FIELD OF HIGHER EDUCATION.**4d Other program services (Describe in Schedule O)(Expenses \$ 193,116. including grants of \$ _____)

) (Revenue \$ _____)

75,161.)4e Total program service expenses ► 1,293,676.

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)? <i>If "Yes," complete Schedule A</i>	1 X	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	2 X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3 X	
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? <i>If "Yes," complete Schedule C, Part II</i>	4 X	
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? <i>If "Yes," complete Schedule C, Part III</i>	5 X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6 X	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7 X	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8 X	
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? <i>If "Yes," complete Schedule D, Part IV</i>	9 X	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10 X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	11a X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b X	
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c X	
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d X	
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e X	
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)? <i>If "Yes," complete Schedule D, Part X</i>	11f X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	12a X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i>	12b X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13 X	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a X	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b X	
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 United States? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15 X	
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 United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16 X	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	17 X	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18 X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19 X	
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a X	
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b X	

Part IV Checklist of Required Schedules (continued)

		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	X
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 through 24d and complete Schedule K. If "No", go to line 25	24a	X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	X
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	X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)	28a	X
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28c	X
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	29	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	30	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	31	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	32	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	33	X
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	34	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	35a	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)? b 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	35b	X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	X
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	X

Form 990 (2011)

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck 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	2
1b	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	X
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	7
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)</i>	2b	X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	
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	X
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	X
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5b	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5c	
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	6a	X
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?	6b	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	7a	X
7	Organizations that may receive deductible contributions under section 170(c).	7b	
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?	7c	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7d	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7e	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7f	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7g	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7h	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	8	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	9a	
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?	9b	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter.	10a	
a	Initiation fees and capital contributions included on Part VIII, line 12	10b	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter.	11a	
a	Gross income from members or shareholders	11b	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
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.	13a	
a	Is the organization licensed to issue qualified health plans in more than one state? <i>Note. See the instructions for additional information the organization must report on Schedule O.</i>	13b	
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	13c	
c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
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 line 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 X

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	15	
1b		15	
2			X
3		X	
4		X	
5		X	
6	Did the organization have members or stockholders?	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?		
b	Each committee with authority to act on behalf of the governing body?		
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		X

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

	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	
13	Did the organization have a written whistleblower policy?	
14	Did the organization have a written document retention and destruction policy?	
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	X
b	Other officers or key employees of the organization	X
	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?	
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	
16b		X

Section C. Disclosure

17	List the states with which a copy of this Form 990 is required to be filed ► <input checked="" type="checkbox"/> MN
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
	<input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization. ► THE COUNCIL - 202-783-4810 734 15TH STREET, N.W., #550, WASHINGTON, DC 20005

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 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 (do not check more than one box, unless person is both an officer and a director/trustee)					(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			
(1) MARY L. CROWE <u>PRESIDENT ELECT</u>	1.00	X					0.	0.	0.
(2) ELIZABETH L. PAUL <u>IMMEDIATE PAST PRESIDENT</u>	1.00	X					0.	0.	0.
(3) IAIN CRAWFORD <u>DIRECTOR</u>	1.00	X					0.	0.	0.
(4) FRANCES VINAL FARNSWORTH <u>DIRECTOR</u>	1.00	X					0.	0.	0.
(5) VICKI MARTIN <u>DIRECTOR</u>	1.00	X					0.	0.	0.
(6) SILVIA RONCO <u>DIRECTOR</u>	1.00	X					0.	0.	0.
(7) EDWARD HANSEN <u>DIRECTOR</u>	1.00	X					0.	0.	0.
(8) PAUL C. MILLER <u>DIRECTOR</u>	1.00	X					0.	0.	0.
(9) MICHAEL DORFF <u>DIRECTOR</u>	1.00	X					0.	0.	0.
(10) DAVID J. MCGEE <u>DIRECTOR</u>	1.00	X					0.	0.	0.
(11) SUSAN J. LARSON <u>DIRECTOR</u>	1.00	X					0.	0.	0.
(12) ANDREA CHAPDELAINE <u>DIRECTOR</u>	1.00	X	X				0.	0.	0.
(13) JANICE DECOSMO <u>DIRECTOR</u>	1.00	X					0.	0.	0.
(14) LAUREN FOWLER <u>DIRECTOR</u>	1.00	X					0.	0.	0.
(15) SIBDAS GHOSH <u>DIRECTOR</u>	1.00	X					0.	0.	0.
(16) BESSIE GUERRANT <u>DIRECTOR</u>	1.00	X					0.	0.	0.
(17) WILLIAM CAMPBELL <u>PRESIDENT</u>	1.00		X				0.	0.	0.

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 (do not check more than one box, unless person is both an officer and a director/trustee)					(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			
(18) AMELIA J. AHERN-RINDELL SECRETARY	1.00		X				0.	0.	0.
(19) DUNCAN MCBRIDE TREASURER	1.00		X				0.	0.	0.
(20) NANCY HENSEL EXECUTIVE DIRECTOR	40.00			X			160,153.	0.	30,902.
1b Sub-total							160,153.	0.	30,902.
c Total from continuation sheets to Part VII, Section A							0.	0.	0.
d Total (add lines 1b and 1c)							160,153.	0.	30,902.
2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►							1		
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		X
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	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person							5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

The organization report compensation for the calendar year ending with or within the organization's tax year			
(A) Name and business address	(B) Description of services	(C) Compensation	
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►		0	

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	1 a Federated campaigns	1a			
	b Membership dues	1b			
	c Fundraising events	1c			
	d Related organizations	1d			
	e Government grants (contributions)	1e 286,072.			
	f All other contributions, gifts, grants, and similar amounts not included above	1f 46,818.			
	g Noncash contributions included in lines 1a-1f \$				
	h Total. Add lines 1a-1f		332,890.		
Program Service Revenue	2 a MEMBERSHIP	Business Code 900099	784,166.	784,166.	
	b CONFERENCES	900099	703,658.	703,658.	
	c PUBLICATIONS	900099	75,161.	75,161.	
	d				
	e				
	f All other program service revenue				
g Total. Add lines 2a-2f		1562985.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		66,669.		66,669.
	4 Income from investment of tax-exempt bond proceeds				
	5 Royalties				
	6 a Gross rents	(i) Real	(ii) Personal		
	b Less: rental expenses				
	c Rental income or (loss)				
	d Net rental income or (loss)				
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other		
	b Less: cost or other basis and sales expenses	291324.	1,859.		
	c Gain or (loss)	291128.	7,293.		
	d Net gain or (loss)	196.	<5,434.>		
	8 a 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					
9 a Gross income from gaming activities. See Part IV, line 19	a				
b Less: direct expenses	b				
c Net income or (loss) from gaming activities					
10 a Gross sales of inventory, less returns and allowances	a				
b Less: cost of goods sold	b				
c Net income or (loss) from sales of inventory					
Miscellaneous Revenue	Business Code				
11 a					
b					
c					
d All other revenue					
e Total. Add lines 11a-11d					
12 Total revenue. See instructions.		1957306.	1562985.	0.	61,431.

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).

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

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(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 United States. See Part IV, line 21				
2 Grants and other assistance to individuals in the United States. See Part IV, line 22	10,000.	10,000.		
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	100,597.	58,258.	42,339.	
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	255,563.	148,004.	107,559.	
8 Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)	34,024.	22,370.	11,654.	
9 Other employee benefits	126,025.	41,594.	84,431.	
10 Payroll taxes	28,747.	18,686.	10,061.	
11 Fees for services (non-employees):				
a Management				
b Legal	89,028.	2,380.	86,648.	
c Accounting	21,875.	14,219.	7,656.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other	159,023.	153,572.	5,451.	
12 Advertising and promotion				
13 Office expenses	31,073.	18,750.	12,323.	
14 Information technology				
15 Royalties				
16 Occupancy	85,576.	56,210.	29,366.	
17 Travel	194,372.	173,302.	21,070.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	388,091.	355,323.	32,768.	
20 Interest	787.		787.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	44,606.		44,606.	
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a PRINTING AND PUBLICATION	104,124.	99,551.	4,573.	
b EQUIPMENT	56,702.	29,784.	26,918.	
c BANK CHARGES	29,971.	19,464.	10,507.	
d INTERNET	22,969.	7,594.	15,375.	
e All other expenses	85,846.	64,615.	21,231.	
25 Total functional expenses Add lines 1 through 24e	1,868,999.	1,293,676.	575,323.	0.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here ➤ if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	524,352.	1	567,693.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	494,481.	3	122,652.
	4 Accounts receivable, net		4	15,763.
	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)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	29,759.	8	24,658.
	9 Prepaid expenses and deferred charges	21,790.	9	41,432.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	272,712.		
	b Less accumulated depreciation	135,898.	10c	130,454.
	11 Investments - publicly traded securities	1,468,782.	11	1,959,252.
	12 Investments - other securities See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11	3,435.	15	3,435.
	16 Total assets. Add lines 1 through 15 (must equal line 34)	2,678,497.	16	2,865,339.
Liabilities	17 Accounts payable and accrued expenses	129,452.	17	147,539.
	18 Grants payable		18	
	19 Deferred revenue	512,787.	19	560,475.
	20 Tax-exempt bond liabilities		20	
	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	7,797.	23	30,062.
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	77,418.	25	76,520.
	26 Total liabilities. Add lines 17 through 25	727,454.	26	814,596.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	1,420,302.	27	1,896,699.
	28 Temporarily restricted net assets	394,620.	28	17,863.
	29 Permanently restricted net assets	136,121.	29	136,181.
	Organizations that do not follow SFAS 117, check here ► <input type="checkbox"/> 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	1,951,043.	33	2,050,743.
	34 Total liabilities and net assets/fund balances	2,678,497.	34	2,865,339.

Part XI Reconciliation of Net AssetsCheck 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	1,957,306.
2 Total expenses (must equal Part IX, column (A), line 25)	2	1,868,999.
3 Revenue less expenses Subtract line 2 from line 1	3	88,307.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,951,043.
5 Other changes in net assets or fund balances (explain in Schedule O)	5	11,393.
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	2,050,743.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII

	Yes	No
1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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	X
b Were the organization's financial statements audited by an independent accountant?	2b	X
c If "Yes" to line 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?	2c	X
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		
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		
<input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate 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	X
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	

Form 990 (2011)

SCHEDULE A
(Form 990 or 990-EZ)

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

2011

**Open to Public
Inspection**

Name of the organization

Employer identification number

THE COUNCIL ON UNDERGRADUATE RESEARCH

41-1398118

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?
 (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 (ii) A family member of a person described in (i) above?
 (iii) A 35% controlled entity of a person described in (i) or (ii) above?
 h Provide the following information about the supported organization(s)

Yes	No
11g(i)	
11g(ii)	
11g(iii)	

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

1148

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

Schedule A (Form 990 or 990-EZ) 2011

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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
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						
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						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support. Add lines 7 through 10						
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 section 501(c)(3) organization, check this box and **stop here** ►

Section C. Computation of Public Support Percentage

14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2010 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2011. 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 ► <input type="checkbox"/>		
b 33 1/3% support test - 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2011. 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 ► <input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2010. 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 ► <input type="checkbox"/>		
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 ► <input type="checkbox"/>		

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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")	216,196.	286,482.	119,061.	395,254.	332,890.	1,349,883.
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	549,875.	840,853.	1,243,649.	1,238,263.	1,562,985.	5,435,625.
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	766,071.	1,127,335.	1,362,710.	1,633,517.	1,895,875.	6,785,508.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
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						0.
c Add lines 7a and 7b						0.
8 Public support (Subtract line 7c from line 6)						6,785,508.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6	766,071.	1,127,335.	1,362,710.	1,633,517.	1,895,875.	6,785,508.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	9,308.	15,118.	34,760.	71,989.	66,669.	197,844.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	9,308.	15,118.	34,760.	71,989.	66,669.	197,844.
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)	775,379.	1,142,453.	1,397,470.	1,705,506.	1,962,544.	6,983,352.

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► **Section C. Computation of Public Support Percentage**

15 Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f))	15	97.17	%
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	96.79	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f))	17	2.83	%
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18	2.95	%

19a 33 1/3% support tests - 2011. 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 - 2010. 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 ►

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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

2011

Open to Public
Inspection

Name of the organization

THE COUNCIL ON UNDERGRADUATE RESEARCH

Employer identification number
41-1398118

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 can 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)	
<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year	
a Total number of conservation easements	Held at the End of the Tax Year
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, and not on a historic structure listed in the National Register	
2d	
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 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? <input type="checkbox"/> Yes <input type="checkbox"/> 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 section 170(h)(4)(B)(ii)? <input type="checkbox"/> Yes <input type="checkbox"/> 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 (ASC 958), 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.

1b If the organization elected, as permitted under SFAS 116 (ASC 958), 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 (ASC 958) 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 acquisition, 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
1c	
1d	
1e	
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	136,121.	135,881.	135,396.	135,129.	
b Contributions	60.	240.	485.	267.	
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	136,181.	136,121.	135,881.	135,396.	

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ► %

b Permanent endowment ► %

c Temporarily restricted endowment ► %

The percentages in lines 2a, 2b, and 2c should equal 100%

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

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

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

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

	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment	208,399.	105,885.	102,514.	
e Other	64,313.	36,373.	27,940.	

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) ► 130,454.

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)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		

Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ►

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
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		

Total. (Col (b) must 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)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	

Total. (Column (b) must equal Form 990, Part X, col (B) line 15) ►

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

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DEFERRED RENT CREDITS	76,520.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	

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

76,520.

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

2. FIN 48 (ASC 740)

132053

01-23-12

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

1 Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,957,306.
2 Total expenses (Form 990, Part IX, column (A), line 25)	2	1,868,999.
3 Excess or (deficit) for the year. Subtract line 2 from line 1	3	88,307.
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	11,393.
9 Total adjustments (net). Add lines 4 through 8	9	11,393.
10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	99,700.

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	1,974,133.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains on investments	2a	11,393.
b Donated services and use of facilities	2b	
c Recoveries of prior year grants	2c	
d Other (Describe in Part XIV.)	2d	5,434.
e Add lines 2a through 2d	2e	16,827.
3 Subtract line 2e from line 1	3	1,957,306.
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	0.
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	1,957,306.

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

1 Total expenses and losses per audited financial statements	1	1,874,433.
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	5,434.
e Add lines 2a through 2d	2e	5,434.
3 Subtract line 2e from line 1	3	1,868,999.
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	0.
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	1,868,999.

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, line 2, 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.

PART V, LINE 4: BRIAN ANDREEN ENDOWMENT FUND IS A PERMANENTLY

RESTRICTED FUND. INVESTMENT INCOME MAY BE USED TO PROVIDE SCHOLARSHIPS

FOR UNDERGRADUATE RESEARCH.

PART XI, LINE 8 - OTHER ADJUSTMENTS:

UNREALIZED GAINS ON INVESTMENTS

11,393.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

Schedule D (Form 990) 2011

Part XIV Supplemental Information (continued)NET LOSSES ON DISPOSAL OF ASSETS

5,434.

PART XIII, LINE 2D - OTHER ADJUSTMENTS:DISPOSAL OF ASSETS

5,434.

卷之三

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 930, Part IV, line 22

Part III can be duplicated 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
SCHOLARSHIP FUNDS FOR A STUDENT AT HARVEY MUDD COLLEGE	1	5,000.	0.	FMV	
SCHOLARSHIP FUNDS FOR A STUDENT AT UTAH STATE UNIVERSITY	1	5,000.	0.	FMV	

卷之三

SCHEDULE I, PART I, LINE 2: SCHEDULE I, PART I, LINE 2. SCHOLARSHIPS ARE PAID DIRECTLY TO A COLLEGE OR UNIVERSITY WHICH HAS BEEN SELECTED BY THE COUNCIL. THE COLLEGE OR UNIVERSITY WHICH WAS SELECTED THEN SELECTS THE STUDENT WHO IS TO RECEIVE THE SCHOLARSHIP. THE COUNCIL MONITORS THE GRANT BY OBTAINING CONFIRMATION FROM THE COLLEGE OR UNIVERSITY THAT THE SCHOLARSHIP WAS GIVEN TO A STUDENT.

SCHEDULE J
(Form 990)

• Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization

THE COUNCIL ON UNDERGRADUATE RESEARCH

Employer identification number
41-1398118

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items

<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

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?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director. Explain in Part III

<input type="checkbox"/> Compensation committee	<input checked="" type="checkbox"/> Written employment contract
<input type="checkbox"/> Independent compensation consultant	<input type="checkbox"/> Compensation survey or study
<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

a Receive a severance payment or change-of-control payment?

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of

a The organization?

b Any related organization?

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?

b Any related organization?

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

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2011

THE COUNCIL ON UNDERGRADUATE RESEARCH

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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(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 as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 NANCY HENSEL	(i) <u>160,153.</u>	(ii) <u>0.</u>	(iii) <u>0.</u>	(C) <u>0.</u>	(D) <u>15,478.</u>	(E) <u>15,424.</u>	(F) <u>0.</u>
2	(i) <u>0.</u>	(ii) <u>0.</u>	(iii) <u>0.</u>	(C) <u>0.</u>	(D) <u>0.</u>	(E) <u>0.</u>	(F) <u>0.</u>
3	(i) <u>0.</u>	(ii) <u>0.</u>	(iii) <u>0.</u>	(C) <u>0.</u>	(D) <u>0.</u>	(E) <u>0.</u>	(F) <u>0.</u>
4	(i) <u>0.</u>	(ii) <u>0.</u>	(iii) <u>0.</u>	(C) <u>0.</u>	(D) <u>0.</u>	(E) <u>0.</u>	(F) <u>0.</u>
5	(i) <u>0.</u>	(ii) <u>0.</u>	(iii) <u>0.</u>	(C) <u>0.</u>	(D) <u>0.</u>	(E) <u>0.</u>	(F) <u>0.</u>
6	(i) <u>0.</u>	(ii) <u>0.</u>	(iii) <u>0.</u>	(C) <u>0.</u>	(D) <u>0.</u>	(E) <u>0.</u>	(F) <u>0.</u>
7	(i) <u>0.</u>	(ii) <u>0.</u>	(iii) <u>0.</u>	(C) <u>0.</u>	(D) <u>0.</u>	(E) <u>0.</u>	(F) <u>0.</u>
8	(i) <u>0.</u>	(ii) <u>0.</u>	(iii) <u>0.</u>	(C) <u>0.</u>	(D) <u>0.</u>	(E) <u>0.</u>	(F) <u>0.</u>
9	(i) <u>0.</u>	(ii) <u>0.</u>	(iii) <u>0.</u>	(C) <u>0.</u>	(D) <u>0.</u>	(E) <u>0.</u>	(F) <u>0.</u>
10	(i) <u>0.</u>	(ii) <u>0.</u>	(iii) <u>0.</u>	(C) <u>0.</u>	(D) <u>0.</u>	(E) <u>0.</u>	(F) <u>0.</u>
11	(i) <u>0.</u>	(ii) <u>0.</u>	(iii) <u>0.</u>	(C) <u>0.</u>	(D) <u>0.</u>	(E) <u>0.</u>	(F) <u>0.</u>
12	(i) <u>0.</u>	(ii) <u>0.</u>	(iii) <u>0.</u>	(C) <u>0.</u>	(D) <u>0.</u>	(E) <u>0.</u>	(F) <u>0.</u>
13	(i) <u>0.</u>	(ii) <u>0.</u>	(iii) <u>0.</u>	(C) <u>0.</u>	(D) <u>0.</u>	(E) <u>0.</u>	(F) <u>0.</u>
14	(i) <u>0.</u>	(ii) <u>0.</u>	(iii) <u>0.</u>	(C) <u>0.</u>	(D) <u>0.</u>	(E) <u>0.</u>	(F) <u>0.</u>
15	(i) <u>0.</u>	(ii) <u>0.</u>	(iii) <u>0.</u>	(C) <u>0.</u>	(D) <u>0.</u>	(E) <u>0.</u>	(F) <u>0.</u>
16	(i) <u>0.</u>	(ii) <u>0.</u>	(iii) <u>0.</u>	(C) <u>0.</u>	(D) <u>0.</u>	(E) <u>0.</u>	(F) <u>0.</u>

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

2011

Open to Public
Inspection

Name of the organization

THE COUNCIL ON UNDERGRADUATE RESEARCH

Employer identification number
41-1398118

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

RESEARCH, PUBLICATIONS AND INTERNET SERVICES HELP DISSEMINATE

INFORMATION CONCERNING UNDERGRADUATE RESEARCH.

EXPENSES \$ 193,116. INCLUDING GRANTS OF \$ 0. REVENUE \$ 75,161.

FORM 990, PART VI, SECTION A, LINE 6: MEMBERS JOIN THE ORGANIZATION AND
RECEIVE BENEFITS INCLUDING ACCESS TO INFORMATION RELATED TO UNDERGRADUATE
RESEARCH AND CAN PARTICIPATE IN ACTIVITIES OF THE ORGANIZATION, INCLUDING
MEMBERSHIP ON THE BOARD OF DIRECTORS

FORM 990, PART VI, SECTION A, LINE 7A: EACH MEMBER OF THE ORGANIZATION IS
ALLOWED TO VOTE FOR REPRESENTATIVES (COUNCILORS) OF THEIR RESPECTIVE
DIVISION (ACADEMIC AREA) WITHIN THE ORGANIZATION. COUNCILORS ELECT BOARD
MEMBERS AND OFFICERS OF THE ORGANIZATION.

FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IS REVIEWED AND
APPROVED BY THE TREASURER, EXECUTIVE OFFICER, OTHER MEMBERS OF THE
ORGANIZATION'S STAFF WITH OVERSIGHT OF FISCAL OPERATIONS. AFTER COMPLETION
OF THE REVIEW, FORM 990 IS SIGNED BY THE TREASURER. COPIES OF THE FORM 990
ARE MADE AVAILABLE TO MEMBERS OF THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 12C: OFFICERS AND DIRECTORS ARE
REQUIRED TO SIGN AN ACKNOWLEDGEMENT EACH YEAR THAT THEY HAVE RECEIVED THE
CONFLICT OF INTEREST POLICY. EACH OFFICER AND DIRECTOR IS ASKED TO NOTIFY
THE BOARD OF ANY CONFLICTS OF INTEREST. OFFICERS AND DIRECTORS ABSTAIN
FROM ANY APPROVAL OF SALARIES OR OTHER FORMS OF COMPENSATION FOR

Name of the organization

THE COUNCIL ON UNDERGRADUATE RESEARCH

Employer identification number

41-1398118

THEMSELVES.

FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION TO OFFICERS AND DIRECTORS IS EVALUATED ON AN ANNUAL BASIS BY THE BOARD OF DIRECTORS.
COMPENSATION IS BASED UPON THE LEVEL OF SKILL REQUIRED FOR THE POSITION,
COMPARISON OF COMPENSATION TO SIMILAR POSITIONS IN THE NON-PROFIT INDUSTRY,
AND AN EVALUATION OF THE INDIVIDUAL'S ACHIEVEMENTS DURING THE YEAR.
DETERMINATION OF THE COMPENSATION IS DOCUMENTED BY THE BOARD OF DIRECTORS.
BOARD MEMBERS ARE NOT COMPENSATED FOR THEIR SERVICES.

FORM 990, PART VI, SECTION C, LINE 18: COPIES OF DOCUMENTS ARE AVAILABLE FOR REVIEW UPON REQUEST.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES THE FOLLOWING DOCUMENTS AVAILABLE TO THE PUBLIC AS THEY ARE REQUESTED:

CHARITABLE REGISTRATION STATEMENT

FEDERAL FORM 990

CONFLICT OF INTEREST POLICY

FINANCIAL STATEMENTS

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

UNREALIZED GAINS ON INVESTMENTS

11,393.

2011 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction in Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Year Deduction	Ending Accumulated Depreciation
	FURNITURE & FIXTURES												
24	CONFERENCE CHAIRS	11/30/99	SL	5.00	16	1,015.			1,015.	1,015.		0.	1,015.
25	OFFICE ENVIRONMENTS	01/06/09	SL	5.00	16	8,222.			8,222.	4,933.		1,644.	6,577.
26	OFFICE ENVIRONMENTS	01/06/09	SL	5.00	16	8,222.			8,222.	4,933.		1,644.	6,577.
27	OFFICE ENVIRONMENTS	07/31/10	SL	5.00	16	1,630.			1,630.	326.		326.	652.
28	OFFICE ENVIRONMENTS	07/31/10	SL	5.00	16	1,630.			1,630.	326.		326.	652.
29	OFFICE ENVIRONMENTS	07/31/10	SL	5.00	16	1,078.			1,078.	215.		216.	431.
31	LEASEHOLD IMPROVEMENTS	10/01/97	SL	5.00	16	5,770.			5,770.	5,770.		0.	5,770.
32	PCM CONSTRUCTION	01/14/09	SL	10.00	16	1,738.			1,738.	521.		174.	695.
33	PCM CONSTRUCTION	01/14/09	SL	10.00	16	13,319.			13,319.	3,996.		1,332.	5,328.
34	PCM CONSTRUCTION	01/14/09	SL	10.00	16	21,689.			21,689.	6,507.		2,169.	8,676.
	* 990 PAGE 10 TOTAL FURNITURE & FIXTURES					64,313.			64,313.	28,542.		7,831.	36,373.
	MACHINERY & EQUIPMENT												
1	1 HP OFFICE JET 500	03/07/98	SL	5.00	16	300.			300.	300.		0.	300.
2	(D) COMPUTER HENSEL LAPTOP	09/09/02	SL	5.00	16	2,594.			2,594.	2,594.		0.	
3	DELL COMPUTER	09/01/03	SL	5.00	16	909.			909.	909.		0.	909.
4	NEC PP PROJECTOR	08/26/04	SL	5.00	16	2,245.			2,245.	2,245.		0.	2,245.
5	COMPUTER - HENSEL	09/30/05	SL	5.00	16	898.			898.	898.		0.	898.

128111
05-01-11

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2011 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	C Line o n v	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Year Deduction	Ending Accumulated Depreciation
6	SERVER	11/30/05	SL	5.00	16	3,635.				3,635.	3,635.	0.	3,635.
7	MONITOR - CARLY	10/31/06	SL	5.00	16	263.				263.	263.	0.	263.
8	MONITOR - ROBIN	10/31/06	SL	5.00	16	263.				263.	263.	0.	263.
9	MONITOR - JULIE	10/31/06	SL	5.00	16	263.				263.	263.	0.	263.
10	MONITOR - ATHENA	10/31/06	SL	5.00	16	263.				263.	263.	0.	263.
11	MONITOR - NANCY	10/31/06	SL	5.00	16	262.				262.	262.	0.	262.
12	COMPUTER - JULIE	02/28/07	SL	5.00	16	774.				774.	774.	0.	774.
13	COMPUTER - ROBIN	02/28/07	SL	5.00	16	706.				706.	706.	0.	706.
14	COMPUTER - ATHENA	02/28/07	SL	5.00	16	706.				706.	706.	0.	706.
15	ASSN SOFTWARE	01/01/08	SL	5.00	16	59,598.				59,598.	41,719.	11,920.	53,639.
16	COMPUTER	07/31/07	SL	5.00	16	1,322.				1,322.	1,058.	264.	1,322.
17	SIGMA DELL POWEREDGE SERVER	11/15/08	SL	5.00	16	3,110.				3,110.	1,866.	622.	2,488.
18	(D) SIGMA MICROSOFT EXCHANGE	11/15/08	SL	5.00	16	1,498.				1,498.	899.	300.	
19	(D) LAPTOP - ROBIN	04/29/10	SL	5.00	16	1,298.				1,298.	519.	260.	
20	COMPUTER - LINDSAY	08/26/09	SL	5.00	16	699.				699.	279.	140.	419.
21	AMERICAN EAGLE - COM	06/30/10	SL	5.00	16	42,500.				42,500.	8,500.	8,500.	17,000.
22	AMERICAN EAGLE - COM	06/30/10	SL	5.00	16	42,500.				42,500.	8,500.	8,500.	17,000.
23	DELL COMPUTER	08/31/10	SL	5.00	16	728.				728.	146.	146.	292.

128111
05-01-11

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2011 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

128111
05-01-1

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2011 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - THE COUNCIL ON UNDERGRADUATE RESEARCH

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Of Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	FURNITURE & FIXTURES											
24	CONFERENCE CHAIRS	113099SL		5.00	16	1,015.			1,015.			0.
25	OFFICE ENVIRONMENTS	010609SL		5.00	16	8,222.			8,222.	4,933.		1,644.
26	OFFICE ENVIRONMENTS	010609SL		5.00	16	8,222.			8,222.	4,933.		1,644.
27	OFFICE ENVIRONMENTS	073110SL		5.00	16	1,630.			1,630.	326.		326.
28	OFFICE ENVIRONMENTS	073110SL		5.00	16	1,630.			1,630.	326.		326.
29	OFFICE ENVIRONMENTS	073110SL		5.00	16	1,078.			1,078.	215.		216.
31	IMPROVEMENTS	100197SL		5.00	16	5,770.			5,770.	5,770.		0.
32	PCM CONSTRUCTION	011409SL		10.00	16	1,738.			1,738.	521.		174.
33	PCM CONSTRUCTION	011409SL		10.00	16	13,319.			13,319.	3,996.		1,332.
34	PCM CONSTRUCTION	011409SL		10.00	16	21,689.			21,689.	6,507.		2,169.
* 990 PAGE 10 TOTAL FURNITURE & FIXTURE MACHINERY & EQUIPMENT												
1	HP OFFICE JET 500 (D) COMPUTER HENSEL 2 LAPTOP	030798SL		5.00	16	300.			300.	300.		0.
3	DELL COMPUTER	090902SL		5.00	16	2,594.			2,594.	2,594.		0.
4	NEC PP PROJECTOR	090103SL		5.00	16	909.			909.	909.		0.
5	COMPUTER - HENSEL	082604SL		5.00	16	2,245.			2,245.	2,245.		0.
		093005SL		5.00	16	898.			898.	898.		0.

2011 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - THE COUNCIL ON UNDERGRADUATE RESEARCH

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
6	SERVER	113005SL	5.00	16	3,635.				3,635.	3,635.		0.
7	MONITOR - CARLY	103106SL	5.00	16	263.				263.	263.		0.
8	MONITOR - ROBIN	103106SL	5.00	16	263.				263.	263.		0.
9	MONITOR - JULIE	103106SL	5.00	16	263.				263.	263.		0.
10	MONITOR - ATHENA	103106SL	5.00	16	263.				263.	263.		0.
11	MONITOR - NANCY	103106SL	5.00	16	262.				262.	262.		0.
12	COMPUTER - JULIE	022807SL	5.00	16	774.				774.	774.		0.
13	COMPUTER - ROBIN	022807SL	5.00	16	706.				706.	706.		0.
14	COMPUTER - ATHENA	022807SL	5.00	16	706.				706.	706.		0.
15	ASSN SOFTWARE	010108SL	5.00	16	59,598.				59,598.	41,719.		11,920.
16	COMPUTER SIGMA DELL	073107SL	5.00	16	1,322.				1,322.	1,058.		264.
17	POWEREDGE SERVER	1111508SL	5.00	16	3,110.				3,110.	1,866.		622.
18	(D) SIGMA MICROSOFT EXCHANGE	1111508SL	5.00	16	1,498.				1,498.	899.		300.
19	(D) LAPTOP - ROBIN	042910SL	5.00	16	1,298.				1,298.	519.		260.
20	COMPUTER - LINDSAY AMERICAN EAGLE	082609SL	5.00	16	699.				699.	279.		140.
21	COM AMERICAN EAGLE	063010SL	5.00	16	42,500.				42,500.	8,500.		8,500.
22	COM AMERICAN EAGLE	063010SL	5.00	16	42,500.				42,500.	8,500.		8,500.
23	DELL COMPUTER	083110SL	5.00	16	728.				728.	146.		146.

2011 DEPRECIATION AND AMORTIZATION REPORT

THE COUNCIL ON UNDERGRADUATE RESEARCH

128102
05-01-11

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2012 DEPRECIATION AND AMORTIZATION REPORT

- NEXT YEAR FEDERAL - THE COUNCIL ON UNDERGRADUATE RESEARCH

Asset No	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
	FURNITURE & FIXTURES								
24	CONFERENCE CHAIRS	113099SL	5.00	1,015.		1,015.	1,015.	0.	0.
25	OFFICE ENVIRONMENTS	010609SL	5.00	8,222.		8,222.	6,577.	1,644.	1,644.
26	OFFICE ENVIRONMENTS	010609SL	5.00	8,222.		8,222.	6,577.	1,644.	1,644.
27	OFFICE ENVIRONMENTS	073110SL	5.00	1,630.		1,630.	652.	326.	326.
28	OFFICE ENVIRONMENTS	073110SL	5.00	1,630.		1,630.	652.	326.	326.
29	OFFICE ENVIRONMENTS	073110SL	5.00	1,078.		1,078.	431.	216.	216.
31	LEASEHOLD IMPROVEMENTS	100197SL	5.00	5,770.		5,770.	5,770.	0.	0.
32	PCM CONSTRUCTION	011409SL	10.00	1,738.		1,738.	695.	174.	174.
33	PCM CONSTRUCTION	011409SL	10.00	13,319.		13,319.	5,328.	1,332.	1,332.
34	PCM CONSTRUCTION	011409SL	10.00	21,689.		21,689.	8,676.	2,169.	2,169.
* 990 PAGE 10 TOTAL FURNITURE & FIXTURES				64,313.		64,313.	36,373.	7,831.	7,831.
	MACHINERY & EQUIPMENT								
1	HP OFFICE JET 500	030798SL	5.00	300.		300.	300.	0.	0.
3	DELL COMPUTER	090103SL	5.00	909.		909.	909.	0.	0.
4	NEC PP PROJECTOR	082604SL	5.00	2,445.		2,445.	2,445.	0.	0.
5	COMPUTER - HENSEL	093005SL	5.00	898.		898.	898.	0.	0.
6	SERVER	113005SL	5.00	3,635.		3,635.	3,635.	0.	0.
7	MONITOR - CARLY	103106SL	5.00	263.		263.	263.	0.	0.
8	MONITOR - ROBIN	103106SL	5.00	263.		263.	263.	0.	0.
9	MONITOR - JULIE	103106SL	5.00	263.		263.	263.	0.	0.
10	MONITOR - ATHENA	103106SL	5.00	263.		263.	263.	0.	0.
11	MONITOR - NANCY	103106SL	5.00	262.		262.	262.	0.	0.
12	COMPUTER - JULIE	022807SL	5.00	774.		774.	774.	0.	0.
13	COMPUTER - ROBIN	022807SL	5.00	706.		706.	706.	0.	0.
14	COMPUTER - ATHENA	022807SL	5.00	706.		706.	706.	0.	0.
15	ASSN SOFTWARE	010108SL	5.00	59,598.		59,598.	53,639.	5,959.	5,959.
16	COMPUTER	073107SL	5.00	1,322.		1,322.	1,322.	0.	0.
17	SIGMA DELL POWEREDGE SERVER	111508SL	5.00	3,110.		3,110.	2,488.	622.	622.
20	COMPUTER - LINDSAY	082609SL	5.00	699.		699.	419.	140.	140.
21	AMERICAN EAGLE . COM	063010SL	5.00	42,500.		42,500.	17,000.	8,500.	8,500.
22	AMERICAN EAGLE . COM	063010SL	5.00	42,500.		42,500.	17,000.	8,500.	8,500.
23	DELL COMPUTER	083110SL	5.00	728.		728.	728.	146.	146.

2012 DEPRECIATION AND AMORTIZATION REPORT

- NEXT YEAR FEDERAL - THE COUNCIL ON UNDERGRADUATE RESEARCH

Asset No	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
35	COPIER	033112SL	4.00	31,915.	31,915.		31,915.	1,995.	7,995.
36	COMPUTER ROBIN LAPTOP	072511SL	5.00	709.	709.		709.	130.	142.
37	AMERICAN EAGLE WEBSITE UPDATE	061812SL	5.00	12,125.	12,125.		12,125.		2,425.
38	COMPUTER MELISSA DESKTOP	120611SL	5.00	679.	679.		679.	79.	136.
39	COMPUTER AMBOS LAPTOP	051412SL	5.00	1,027.	1,027.		1,027.	34.	205.
	* 990 PAGE 10 TOTAL MACHINERY & EQUIPMENT			208,399.	208,399.		208,399.	105,885.	34,754.
	* GRAND TOTAL 990 PAGE 10 DEPR			272,712.	272,712.		272,712.	142,258.	42,585.

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ►

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Enter filer's identifying number, see instructions

Type or print File by the due date for filing your return. See instructions	Name of exempt organization or other filer, see instructions THE COUNCIL ON UNDERGRADUATE RESEARCH	Employer identification number (EIN) or Social security number (SSN) X 41-1398118
	Number, street, and room or suite no. If a P.O. box, see instructions. C/O SECKER & ASSOCIATES, P.C., 51 MONROE STREET, #	
	City, town or post office, state, and ZIP code For a foreign address, see instructions ROCKVILLE, MD 20850	

Enter the Return code for the return that this application is for (file a separate application for each return)

0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

THE COUNCIL

• The books are in the care of ► **734 15TH STREET, N.W., #550 - WASHINGTON, DC 20005**
Telephone No. ► **202-783-4810** FAX No. ► **202-783-4811**

- If the organization does not have an office or place of business in the United States, check this box ►
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ► If it is for part of the group, check this box ► and attach a list with the names and EINs of all members the extension is for

4 I request an additional 3-month extension of time until **MAY 15, 2013**
5 For calendar year _____, or other tax year beginning **JUL 1, 2011**, and ending **JUN 30, 2012**

6 If the tax year entered in line 5 is for less than 12 months, check reason Initial return Final return
 Change in accounting period

7 State in detail why you need the extension
**ADDITIONAL TIME IS REQUIRED IN ORDER TO GATHER ALL INFORMATION NEEDED
TO FILE A COMPLETE AND ACCURATE RETURN.**

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	8a	\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b	\$	0.
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	8c	\$	0.

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ►

Title ► **TREASURER**

Date ►

Form 8868 (Rev. 1-2012)