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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 private foundations)

► Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

		applicable	C Name of organization		30 2014	D Emplo	yer ider	ntification number
	dress cl		WEST VIRGINIA UNIVERSITY RESEARC	H CORPORATION		55-06	565758	3
┌ Na	me cha	inge	Doing Business As					
┌ Inr	tıal retu	ım		I is not delivered to street address) Room,	/suite	E Telepho	one num	ber
Г Те	rmınate	ed	886 CHESTNUT RIDGE ROAD NO 408			·		
┌ Am	nended	return	City or town, state or province, country	y, and ZIP or foreign postal code		(304)	293-4	008
Гар	plication	n pending	MORGANTOWN, WV 26506			G Gross r	eceipts \$	126,541,201
			F Name and address of princi	ıpal officer	H(a)	Is this a group	return	
			DANIEL DURBIN 886 CHESTNUT RIDGE ROAI	O NO 408		subordinates?		┌ Yes 🗸 No
			MORGANTOWN, WV 26506		Н(Ь)	Are all subordi	nates	┌ Yes ┌ No
			<u> </u>		_	ıncluded?		
I Ta	ıx-exen	npt status	501(c)(3)	sert no) 4947(a)(1) or 527	_	If "No," attach	a list	(see instructions)
J W	ebsite	е:► НТ	TP //RESEARCH WVU EDU		H(c)	Group exempt	ion nur	nber ►
K For	m of or	ganızatıoı	Corporation Trust Association	Other ►	L Yea	ar of formation 19		State of legal domicile
Pa	rt I	Sun	ımary				W	<i>/</i>
			describe the organization's mission	or most significant activities				
			STER AND SUPPORT RESEARCH A		•			
3								
듄	'							
E E	9	Check t	his box ┡॑ if the organization disc	ontinued its operations or dispose	d of more t	han 25% of its	net as	sets
Governance	-	CHECK	ms box Ff in the organization also	ontinued its operations of dispose	a or more t		nec as	3003
	3	Number	of voting members of the governing	g body (Part VI, line 1a)			3	15
Activities &	4	Number	of independent voting members of	the governing body (Part VI, line 1	b)		4	3
星	5	Total nu	ımber of ındıvıduals employed ın ca	lendar year 2013 (Part V, line 2a)			5	505
닿	6	Total nu	ımber of volunteers (estımate ıf nec	cessary)			6	0
•	7a	Total ur	nrelated business revenue from Par	t VIII, column (C), line 12			7a	5,338,958
	b	Net unr	elated business taxable income fro	m Form 990-T, line 34			7b	0
						Prior Year		Current Year
a.	8		ibutions and grants (Part VIII, line	,		107,245,		96,090,529
Rayenue	9		am service revenue (Part VIII, line		22,736,		29,789,985	
) j	10		tment income (Part VIII, column (·	592,		246,384	
	11		revenue (Part VIII, column (A), lii			233,	981	65,854
	12		revenue—add lines 8 through 11 (r		ine	130,808,	528	126,192,752
	13		s and similar amounts paid (Part I)			32,030,	233	25,149,842
	14	Benet	its paid to or for members (Part IX,	, column (A), line 4)			0	0
46	15		es, other compensation, employee	benefits (Part IX, column (A), line	s	1770		20110525
<u>∞</u>		5-10				17,733,		20,148,635
Expenses	16a		ssional fundraising fees (Part IX, co		•		0	0
五	b		undraising expenses (Part IX, column (D),	•	-	00.700		76.076.006
	17		expenses (Part IX, column (A), lin			80,732,		76,076,896
	18 19		expenses Add lines 13–17 (must nue less expenses Subtract line 18			130,497,		121,375,373 4,817,379
₩ 27	15	Revei	ide less expenses Subtract fine 10	3 HOIII IIII		inning of Curre		
Not Assets or Fund Balances						Year		End of Year
555 9.94 19.94	20	Total	assets (Part X, line 16)			93,050,	387	94,140,071
절절	21	Total	liabilities (Part X, line 26)			51,343,	985	46,840,284
	22		ssets or fund balances Subtract lir	ne 21 from line 20		41,706,	402	47,299,787
Pa	rt II	Sigi	nature Block					
my k	nowle	dge and	perjury, I declare that I have exam belief, it is true, correct, and comp nowledge					
		***	***			2015-05-15		
Sigr	า	I	ature of officer			Date		
Her		L DAN	IEL DURBIN TREASURER					
		Тур	e or print name and title					
			Print/Type preparer's name	Preparer's signature	Date	Check I if	PTIN	
Pai					<u> </u>	self-employed Firm's EIN	<u> </u>	
	pare	er						
Use	On	ly	Fırm's address 🟲			Phone no		

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

┌Yes ┌No

Par	t III	Statement of Program Se Check if Schedule O contains a r		<u>.</u> চ
1	Brief	ly describe the organization's miss		
			WEST VIRGINIA UNIVERSITY (WVU) AND TO PROVIDE EVALUATION, DEVELOPMEN' ING SERVICES FOR INVENTIONS BY THE FACULTY, STAFF AND STUDENTS OF WVU	Γ,
2	the pi	rıor Form 990 or 990-EZ?	inficant program services during the year which were not listed on	
2		es," describe these new services o		
3	servi	ne organization cease conducting, ces?	·	
4	Desc exper	ribe the organization's program seinses Section 501(c)(3) and 501(d	rvice accomplishments for each of its three largest program services, as measured by c)(4) organizations are required to report the amount of grants and allocations to others, for each program service reported	
4a	(Code	e) (Expenses \$	113,619,150 including grants of \$ 25,149,842) (Revenue \$ 24,451,027)	
	THE I	EXPRESSED PURPOSE TO FOSTER AND SURITABLE, EDUCATIONAL, AND SCIENTIFIC ISTRIBUTY, AND (2) TO PROVIDE EVALUATION STUDENTS OF WEST VIRGINIA UNIVERSITY PONENT OF WVURC'S REVENUE BASE THIS MITTEE LEADERSHIP FOR THE STATE IN BEERSITY HAS BEEN ACTIVELY COUNTERING BEIGHT TRAINING PROGRAMS THIS, COMBINED WITH AN EVALUANT PROGRAMS THEMSELVES SHOULD HELP DING OPPORTUNITIES IN 2013 WVURC CONTERED WITH MYLAN PHARMACEUTICALS (ILS IN 2014 THIS OPERATION GENERATED ARCH CORPORATION IS WORKING WITH STONSHIPS WITH CORPORATIONS IN AREASE GOVERNMENT FUNDED PROJECTS THAT DRIVINITIES FINALLY, THE RESEARCH CORFOR FINALLY, THE RESEARCH CORFOR FOR FINALLY, THE RESEARCH CORFOR FOR FOR FOR FOR FOR FOR FOR FOR FO	UNIVERSITY RESEARCH CORPORATION (WVURC) WAS CREATED IN ACCORDANCE WITH THE STATE LAW AND V PPORT RESEARCH AT WEST VIRGINIA UNIVERSITY (WVU) THE CORPORATION IS ORGANIZED EXCLUSIVELY FOR PURPOSES, INCLUDING FOR SUCH PURPOSES (1) TO FOSTER AND SUPPORT RESEARCH AT WEST VIRGINIA I, DEVELOPMENT, PATENTING, MANAGEMENT AND MARKETING SERVICES FOR INVENTIONS BY THE FACULTY, ST Y FROM A FUNDING PERSPECTIVE, FEDERALLY SUPPORTED RESEARCH PROGRAMS REPRESENT AN IMPORTANT IS SUPPORT HAS BEEN IMPACTED BY EVENTS SUCH AS INCREASING FEDERAL BUDGET DEFICITS, LOSS OF KEY OF THE US HOUSE AND SENATE AND THE "SPEND DOWN" OF ONE-TIME ARRA STIMULUS FUNDING THE THESE CHALLENGES BY STRENGTHENING THE COMPETITIVENESS OF ITS FACULTY FOR GRANTS THROUGH A MS AND PROPOSAL DEVELOPMENT ASSISTANCE AND WILL RELY ON WURC'S INFRASTRUCTURE TO SUPPORT TILTION OF THE EFFECTIVENESS AND EFFICIENCY OF THE SENATE RESEARCH GRANT AND SENATE FACULTY TRAV PROVIDE A USER FRIENDLY INFRASTRUCTURE PROCESS THAT FACILITATES THE IDENTIFICATION OF EXTERNA MEMERICADO OPERATIONS OF THE WVU CLINICAL AND PHARMACOLOGICAL RESEARCH CENTER THIS PROJECT HA MEMERICADO OPERATIONS OF THE WVU CLINICAL AND PHARMACOLOGICAL RESEARCH CENTER THIS PROJECT HAS REVENUES OF APPROXIMATELY \$7 MILLION AND IS POISED FOR EXPANSION IN THE WORLD) TO CONDUCT CLICAL REVENUES OF APPROXIMATELY \$7 MILLION AND IS POISED FOR EXPANSION IN THE FUTURE ADDITIONALLY, THE UNIVERSITY AND THE WVU FOUNDATION TO DEVELOP A BUSINESS ENGAGEMENT CENTER TO DEVELOP DEE AS SUCH AS CLINICAL COLLABORATIONS, SPONSORSHIP OF APPLIED RESEARCH PROJECTS, COLLABORATION TO PROATION IS ALSO DEVELOPING A STRONG SUPPORT SYSTEM TO ENCOURAGE ENTREPRENEURIAL ACTIVITIES OF AND COMMERCIALIZATION WAS STARTED IN 2014 THE CENTER IS HOME TO THE UNIVERSITY LAUNCH PAD THAT PROPERS AND FORMED BOTH A MARKETING AND INTELLECTUAL PROPERTY GROUP TO SEE WHILE FEDERAL SPONSORED AWARDS ARE IMPORTANT, THE UNIVERSITY THROUGH THE RESEARCH SEED OF FUNDING FOR THE RESEARCH ENTERPRISE FROM THE PRIVATE SECTOR SOURCES SUCH AS FOUNDATION INDUSTRY	HAT EL L AS NICAI E PPER SEEK G THE HAT IS
4b	(Code	e) (Expenses \$	ıncludıng grants of \$) (Revenue \$)	
4 c	(Code	e) (Expenses \$	ıncludıng grants of \$) (Revenue \$)	
	O+L	er program convent (December : 1	ichedule ()	
4d		er program services (Describe in S penses \$	including grants of \$) (Revenue \$)	
		al program service expenses 🕨	113.619.150	

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 $A^{\bullet \bullet}$	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? *	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I^{\bullet}	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		No
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? 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? <i>If "Yes,"</i> complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, 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 temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt{2}$	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		N o
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		N o
е	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 and XII	12a	Yes	
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 and XII 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, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? 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 other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? 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 $11e^{2}$ 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? <i>If "Yes," complete Schedule G, Part II</i>	18		N o
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		N o
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		N o
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or 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, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	23	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 through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, 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 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		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)			
а	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
С	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? <i>If "Yes," complete Schedule M</i>	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		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, 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		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 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 99 0	(2013)

αı	Statements Regarding Other 1R5 Fillings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V	• •	Yes	l No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 620			.10
	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1 c	Yes	
1	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			
)	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
1	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
	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	Yes	
	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			
ı	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		N
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	l.	
	Organizations that may receive deductible contributions under section 170(c).		1	
	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		N
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		N
	If "Yes," indicate the number of Forms 8282 filed during the year			
	74 1 1 1 1 1 1 1 1 1			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	_		
	contract?	7e		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	7f		N
	required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7h		
	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		
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter	_		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
)	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			_
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
_	Note. See the instructions for additional information the organization must report on Schedule O			
	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			
	Enter the amount of reserves on hand	 		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N
	If "Yes," has it filed a Form 7.20 to report these payments? If "No," provide an explanation in Schedule O	14h	1	

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 or note to any line in this Part VI							<u>.</u> ア

Se	ection 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			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
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		Νo
6	Did the organization have members or stockholders?	6		Νo
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?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9	Yes	
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ie Cod	e.)
<u> </u>	section B. I offices (This section B requests information about policies not required by the Internal K	CVCIIC		"
30	Tellon B. Folicies (This Section B requests information about policies not required by the Thermal K		Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		
10a				No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a	Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10a 10b 11a 12a 12b	Yes Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes	No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes	No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes	No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes	No No

- 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 made these available. Check all that apply
- 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
 ►ALAN MARTIN SECRETARY 886 CHESTNUT RIDGE ROAD
 MORGANTOWN, WV 26506 (304) 293-7398

Form 990	(2013	
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г	a	ч	_	•

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

Check if Schedule O contains a response or note to any line 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

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

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

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more t	han o	one l both	box, an o	heck sofficer (stee) Highest compensated	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

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

(A) Name and Title		Name and Title A verage hours per week (list any hours for velocity A verage hours per week (list any hours A verage hours per wore than one box, unless compensation person is both an officer and a director/trustee) A verage hours person is both an officer organization (W-organization (W-organiza									Reportable compensatior from related organizations (\	N-	(F) Estima amount o compens from t	ited fother sation the
		for related organizations below dotted line)	Individual trustiee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	1 2/1099	-MISC)	2/1099-MISC		organizati relati organiza	ed
1b	Sub-Total						•	 -						
с	Total from continuation sheet	s to Part VII, S	ection A	١.	•	•	-	•		600.004	F 001	022		672.020
d 	Total (add lines 1b and 1c). Total number of individuals (in	cluding but not	limited	to the		lictor	d abov	مر ده	ho rocowa	690,094		833		672,820
2	\$100,000 of reportable compe	_					u abov	C) W	no receive	u more u	ali			
													Yes	No
3	Did the organization list any f oon line 1a? <i>If "Yes," complete S</i>					key •	emplo	yee, •	or highes	t compen	sated employee	3	Yes	
4	For any individual listed on line organization and related organ individual											4	Yes	
5	Did any person listed on line 1 services rendered to the organ									anızatıon	or individual for	5		No
Se	ction B. Independent Co	ntractors												
1	Complete this table for your fix	e highest comp												
	compensation from the organiz													
	N	ame and business	address							Des	(b) cription of services		(C Comper	

	ation
WWI MEDICAL CORP DRALINIV HEALTH ASSOCIA PO BOX 740 MORGANTOWN WV 26507 HOSPITAL 1	77,143
WYO MEDICAE CORT DBA ONLY HEAETH ASSOCIATIO BOX 740 MORGANTOWN WY 20007	343,706
BLANCHETTE ROCKEFELLER NEUROSCIENCE INST 8 MEDICAL CENTER DRIVE MORGANTOWN WV 26506 NEUROSCIENCES RES 1,3	266,699
MARSHALL UNIV RESEARCH CORP 401 11TH ST STE 1400 HUNTINGTON WV 25701 RESEARCH 1,	.93,881
ADNET SYSTEMS INC 6720 ROCKLEDGE DR STE 504 BETHESDA MD 20814 IT SOLUTION/SERV 1,	.66,143

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 ►82

Part V	****	Check if Schedi	o r Revenue ule O contains a respo	nse or note to any lu	ne in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
रु ई	1a	Federated cam						
s, Grants Amounts	b	Membership du	ies 1b					
۾ َ وَ	c	Fundraising eve	ents 1 0					
ifts ar /	d	Related organiz	zations 1d					
".E	e	Government grant	s (contributions) 1e	93,343,544				
ributions, Gift Other Similar	f	All other contribution	ons, gifts, grants, and 1f ot included above	2,746,985				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contribute 1a-1f \$ Total. Add lines	ons included in lines		96,090,529			
<u>ਹ ਜ਼</u>		Total: Add lille:		· •	30,030,023			
e⊒	20	CDONCODED DECE	ADCU	Business Code	20 700 005	24 454 027	5 222 252	
Program Serwice Revenue	2a b	SPONSORED RESE	ARCH	900099	29,789,985	24,451,027	5,338,958	
2 <u>2</u> 0.								
Š	d	-						
ď								
Ē	e _	^ II other progra						
Ş	f	All other progra	am service revenue					
<u>~</u>	g	Total. Add lines	s 2a – 2f		29,789,985			
	3	Investment inc	ome (including divider ar amounts)	ıds, ınterest, ▶	171,200			171,200
	4		stment of tax-exempt bond					
	5	Royalties		🕨	51,000			51,000
			(ı) Real	(11) Personal				
	6a	Gross rents	14,854					
	b	Less rental expenses	0					
	c	Rental income or (loss)	14,854					
	d	, ,	me or (loss)		14,854			14,854
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other	423,633					
	ь	than inventory Less cost or						
		other basis and sales expenses	348,449					
	С	Gain or (loss)	75,184					
	d	Net gain or (los			75,184			75,184
nne	8a	Gross income f events (not inc	luding					
Other Revenue		of contributions See Part IV, lin	s reported on line 1c) ne 18 a					
her	ь	Less directles	penses b					
₹	c		(loss) from fundraising					
	9a		rom gaming activities ne 19					
	b c		a penses b (loss) from gaming act					
		Gross sales of returns and allo	ınventory, less	The state of the s				
	_		a					
	Ь	-	oods sold b	anton:				
	_ _ _	Miscellaneous	(loss) from sales of inv	Business Code				
	11a	miscenaneous	3 NEVEIIUE	Dualileas Code				
	ь							
	c							
	d	All other reven	ue					
	e		s 11a-11d	🕨				
	12	i ota i revenue.	See Instructions .		126,192,752	24,451,027	5,338,958	312,238

Part IX Statement of Functional Expenses

ection 501(c)(3) and 501(c)(4)) organizations must complete all	columns All other organizations mu	st complete column (A)

	Check if Schedule O contains a response or note to any line in this	Part IX			
	ot include amounts reported on lines 6b, o, 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 United States See Part IV, line 21	22,020,113	22,020,113		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	2,960,513	2,960,513		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	169,216	169,216		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
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	15,551,504	13,111,528	2,439,976	
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	743,145	619,725	123,420	
9	Other employee benefits	2,708,068	2,258,317	449,751	
10	Payroll taxes	1,145,918	966,128	179,790	
11	Fees for services (non-employees)				
а	Management				
b	Legal	183,078	7,536	175,542	
c	Accounting				
d	Lobbying	120,000		120,000	
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	175,334	4,647	170,687	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	650,205	598,409	51,796	
13	Office expenses	2,322,806	2,144,988	177,818	
14	Information technology	1,623,166	1,316,141	307,025	
15	Royalties	31,378		31,378	
16	Occupancy	1,558,244	1,528,714	29,530	
17	Travel	4,027,203	3,887,855	139,348	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	424,751	365,999	58,752	
20	Interest	341,870	341,870		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,096,474	1,096,474		
23	Insurance	123,930	100,193	23,737	
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)				
а	SHARED SERVICES	42,191,618	41,215,960	975,658	
b	OPERATING EXP TO WVU	9,625,359	7,522,916	2,102,443	
c	RESEARCH/EDUC SUPPLIES	6,004,895	5,989,840	15,055	
d	CONSULTING/SUBCONT FEE	4,319,810	4,219,185	100,625	
e	All other expenses	1,256,775	1,172,883	83,892	
25	Total functional expenses. Add lines 1 through 24e	121,375,373	113,619,150	7,756,223	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

Par	τX	Check if Schedule O contains a response or note to any line in thi	s Pa	art X			
		,			(A)		(B)
					Beginning of year		End of year
	1	Cash-non-interest-bearing			19,838,139		21,643,020
	2	Savings and temporary cash investments			10 150 101	2	10.010.070
	3	Pledges and grants receivable, net			19,452,401	3	18,618,079
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and former officers, dire employees, and highest compensated employees. Complete Part Schedule L	ΙΙ c	of		5	
Assets	6	Loans and other receivables from other disqualified persons (as of 4958(f)(1)), persons described in section 4958(c)(3)(B), and column and sponsoring organizations of section 501(c)(9) voluntary emporganizations (see instructions) Complete Part II of Schedule L	ntrib	outing employers		6	
sse.	7	Notes and loans receivable, net				7	
Ą	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			292,547	9	592,122
	10a	Land, buildings, and equipment cost or other basis Complete		55,525,350	,	9	392,122
	ь		0a 0b	12,403,584		10c	43,121,766
				· · ·	9,328,875	11	10,165,084
	11	Investments—publicly traded securities			9,328,873		10, 165,064
	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				15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)			93,050,387	16	94,140,071
	17	Accounts payable and accrued expenses			15,840,826	17	16,411,356
	18	Grants payable				18	
	19	Deferred revenue			13,743,818	19	8,851,272
	20	Tax-exempt bond liabilities				20	
S	21	Escrow or custodial account liability Complete Part IV of Schedu				21	
Liabilitie	22	Loans and other payables to current and former officers, directors key employees, highest compensated employees, and disqualifie		ustees,			
iak		persons Complete Part II of Schedule L				22	
"	23	Secured mortgages and notes payable to unrelated third parties			21,759,186	23	21,057,207
	24	Unsecured notes and loans payable to unrelated third parties $oldsymbol{\cdot}$				24	
	25	Other liabilities (including federal income tax, payables to related and other liabilities not included on lines 17-24) Complete Part	X of	Schedule	155	25	F20 440
					51,343,985	25	520,449 46,840,284
	26	Total liabilities. Add lines 17 through 25			51,343,965	26	40,040,284
es		Organizations that follow SFAS 117 (ASC 958), check here ► ☐ lines 27 through 29, and lines 33 and 34.	and	complete			
ınc	27	Unrestricted net assets				27	
) al	28	Temporarily restricted net assets	_			28	
d E	29	Permanently restricted net assets				29	
Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here					
or F		complete lines 30 through 34.		, .			
	30	Capital stock or trust principal, or current funds	. ,		19,275,260	30	25,768,411
Assets	31	Paid-in or capital surplus, or land, building or equipment fund.			22,431,142	31	21,531,376
As:	32	Retained earnings, endowment, accumulated income, or other fun			0	32	0
Net .	33	Total net assets or fund balances			41,706,402	33	47,299,787
Z	34	Total liabilities and net assets/fund balances			93,050,387	34	94,140,071
					1 33,000,007	5 1	Form 000 (2012)

					age ==
Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				. [✓
1	Total revenue (must equal Part VIII, column (A), line 12)	1		126,1	.92,752
2	Total expenses (must equal Part IX, column (A), line 25)	2		121,3	375,373
3	Revenue less expenses Subtract line 2 from line 1	3		4,8	317,379
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		41,7	06,402
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		7	76,006
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		47,2	299,787
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. ᅜ
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	ırate			
	☐ Separate basis ☐ Consolidated basis ☑ Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain i Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	е	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	

Software ID: **Software Version:**

EIN: 55-0665758

Name: WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION

Form 990, Part VII - Compensation Compensated Employees, and Inde	of Officers,	Directo	ors,	Tru	ste	es, k	(ey	Employees, Higl	nest	
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more th persoi and a	ion (d nan oi n is b	ne b oth ctor,	ox, u an of trus	inless fficer tee)		(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
	organizations below dotted line)	Individual trustee or clirector	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1033-1413C)	2/10/9-14130/	related organizations
JAMES PCLEMENTS	20	х		х				0	796,366	35,429
CHAIRMAN MICHELE WHEATLY	70 00 2 00									
VICE-CHAIRMAN	75 00	Х		×				0	346,242	38,069
BARBARA DUCATMAN	20	V							125 260	0.635
DIRECTOR	50 00	X						0	135,268	8,625
CHRISTOPHER COLENDA	1 00	X						0	249,604	16,000
DIRECTOR EUGENE CILENTO	70 00								,	,
	1 00	Х						0	255,969	24,351
DIRECTOR NARVEL WEESE	70 00 2 00									
DIRECTOR	65 00	Х						0	275,287	35,873
BOJAN CUKIC	1 00	Х						0	191,002	20,798
DIRECTOR	40 00	^						Ŭ,	131,002	20,730
JIM ANDERSON	10	Х						0	141,628	24,882
DIRECTOR E GORDON GEE	60 00 20									
CHAIRMAN	70 00	Х		×				0	0	0
LAURIE GUTMANN	1 00							_		
DIRECTOR	55 00	X						0	30,002	11,569
GLENN DILLON	1 00	Х						0	289,572	29,581
DIRECTOR ROBERT JONES	70 00								,	,
DIRECTOR	1 50	Х						0	225,170	19,995
ARTHUR J ROSS III	60 00 50									
DIRECTOR	50 00	Х						0	276,260	28,686
JULIE SMITH	10	×						0	0	0
DIRECTOR	0 00	^						Ů		,
MIKE GREEN	50	Х						0	0	0
DIRECTOR MARK WISE	0 00 50									
DIRECTOR	0 00	Х						0	0	0
DANIEL ROBISON	50	.,							220.470	22.605
DIRECTOR	37 50	Х						0	230,478	32,605
ANJALI HALABE	5 00			×				0	141,855	12,563
ASSISTANT TREASURER MARY JANE BUCKLAND	55 00								,	,
	2 00			x				0	97,511	21,776
ASSISTANT SECRETARY ALAN MARTIN	37 50 1 00									
SECRETARY	50 00			Х				0	139,510	17,387
DANIEL DURBIN	5 00			Х				0	205,158	29,000
TREASURER	57 00							Ů	203,130	29,000
MRIDUL GAUTAM	2 00			х				0	217,843	26,697
VICE PRESIDENT JEAN-FRANCOIS DIETIKER	75 00 37 50									
SENIOR RESEARCH ENGINEER						x		100,438	0	25,484
DANIEL VASGIRD	0 00 60 00									
DIRECTOR, RESEARCH COMPLIANCE	0 00					Х		169,503	0	28,038
LARUE WILLIAMS	37 50					х		104,257	0	13,374
DIRECTOR, RESEARCH PROGRAM MGMT	0 00					<u> </u>		107,237		15,577

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

(A) Name and Title	(B) A verage hours per week (list any hours	Posit more th persoi and a	ion (d nan o n is b	ne bo	ox, u an of	ınless fficer		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
PHILIP SPARKS	65 00					х		191,086	0	31,542
DIRECTOR, TECH TRANSFER	0 00									
GERALD IWAN	40 00					x		124,810	0	7,460
MANAGER, NATIONAL ENVIR SER	0 00									
EARL SCIME	0 00						х	0	207,102	33,128
FORMER DIRECTOR	37 50									
PATRICK CALLERY	0 00						x	0	156,141	26,163
FORMER DIRECTOR	37 50									
FRED BUTCHER	0 00						х	0	327,781	41,577
FORMER DIRECTOR	37 50									
JAMES BRICK	0 00						х	0	82,571	11,863
FORMER DIRECTOR	37 50								,	,
RUDOLPH ALMASY	0 00						х	0	63,513	20,305
FORMER DIRECTOR	37 50							_	,	

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As Filed Data -

DLN: 93493135018245

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public **Inspection**

NEST	VIRGIN	NIA UNIVERSITY RESEARCH CORPORATION				
			55-0665758			
Pa	rt I	Reason for Public Charity Status (All organizations must complete this pa	rt.) See instruct	tions.		
Γhe	organı	zation is not a private foundation because it is (For lines 1 through 11, check only one box)			
1	Γ	A church, convention of churches, or association of churches described in section 170(b)	(1)(A)(i).			
2	Γ	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)				
3	Γ	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A	v)(iii).			
4	Γ	A medical research organization operated in conjunction with a hospital described in secti hospital's name, city, and state	. , , , , , , ,	•		_
5	Γ	An organization operated for the benefit of a college or university owned or operated by a g	jovernmental unit	describe	d ın	
		section 170(b)(1)(A)(iv). (Complete Part II)				
6	Γ	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).			
7	Γ	An organization that normally receives a substantial part of its support from a government described in section 170(b)(1)(A)(vi). (Complete Part II)	al unit or from the	e general	public	
8	Γ	A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)				
9	Γ	An organization that normally receives (1) more than 331/3% of its support from contribut	ions, membership	fees, an	d gros	S
		receipts from activities related to its exempt functions—subject to certain exceptions, and	វ (2) no more thar	1 3 3 1/3%	of	
		its support from gross investment income and unrelated business taxable income (less se	ction 511 tax) fro	om busine	esses	
		acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part 3	iII)			
10	\sqcap	An organization organized and operated exclusively to test for public safety See section 5	09(a)(4).			
11	▽	An organization organized and operated exclusively for the benefit of, to perform the functione or more publicly supported organizations described in section 509(a)(1) or section 50 the box that describes the type of supporting organization and complete lines 11e through a)9(a)(2) See sect 111h	ion 509(a	a)(3).	Check
e	V	By checking this box, I certify that the organization is not controlled directly or indirectly other than foundation managers and other than one or more publicly supported organization section 509(a)(2)	ns described in se	ection 50	9(a)(1	L) or
f		If the organization received a written determination from the IRS that it is a Type I, Type I check this box		pporting o	organiz	zation,
g		Since August 17, 2006, has the organization accepted any gift or contribution from any of following persons?				
		(i) A person who directly or indirectly controls, either alone or together with persons desc	ribed in (ii)		Yes	No
		and (iii) below, the governing body of the supported organization?		11a(i)		No

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see	(iv) Is to organization col (i) listo your gove docume	ion in ted in erning	(v) Did you notify the organization in col (i) of your support?		(vi) Is organizat col (i) org	ion in anized	(vii) A mount of monetary support
		instructions))	Yes	No	Yes	No	Yes	No	
(A) WEST VIRGINIA UNIVERSITY	556000842	IRC SECTION 115	Yes		Yes		Yes		121,375,373
Total									121,375,373

(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?

Provide the following information about the supported organization(s)

11q(ii)

11g(iii)

Νo

Νo

Sch	edule A (Form 990 or 990-EZ) 2013						Page 2
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation failed	to qualify under
_	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	low, please con	iplete Part .	.111.)
	endar year (or fiscal year beginning	(-) 2000	(1-) 2010	(-) 2011	(4) 2012	(-) 201	(5) T. I.
	in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 201:	3 (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						
3	behalf The value of services or facilities						
3	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						
S	ection B. Total Support	I	<u> </u>		I		I
	endar year (or fiscal year beginning	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(6) 2010	(6) 2011	(u) 2012	(e) 2013	(I) I otal
7	A mounts 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	es, etc (see inst	ructions)	•		12	1
13	First five years. If the Form 990 is t	for the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	501(c)(3) o	rganızatıon, check
	this box and stop here				<u> </u>	<u> </u>	<u></u>
	ection C. Computation of Pub			4.4 1 (5)			
14	Public support percentage for 2013			11, column (f))		14	
15	Public support percentage for 2012	· ·	•			15	_
16a	33 1/3% support test—2013. If the condition have				line 14 is 33 1/3%	or more, che	ck this box
b	and stop here. The organization qua 33 1/3% support test—2012. If the				and line 15 is 33	8 1/3% or more	
	box and stop here. The organization				, 10 00	. 40.001111011	► F
17a	10%-facts-and-circumstances test-	-2013. If the org	anızatıon dıd not	check a box on lı			
	is 10% or more, and if the organizat						
	in Part IV how the organization mee	ts the "facts-and	d-circumstances'	test The organ	ızatıon qualıfıes a	s a publicly s	
Ь	organization 10%-facts-and-circumstances test-	-2012 . If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and L	▶ □
	15 is 10% or more, and if the organ						
	Explain in Part IV how the organizat						ublicly
	supported organization				4-71		▶ □
18	Private foundation. If the organizat instructions	ion aid not check	k a box on line 13	, 16a, 16b, 1/a,	or 1/p, check thi	s pox and se	e ▶□
							г,

Schedule A (Form 990 or 990-EZ) 2013 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

Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
_	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt						
	purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or						
4	business under section 513 Tax revenues levied for the						
•	organization's benefit and either						
	paid to or expended on its						
_	behalf The value of services or facilities						<u> </u>
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	A mounts included on lines 1, 2,						
	and 3 received from disqualified persons						
ь	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) ction B. Total Support						
	ndar year (or fiscal year beginning	() 2000	(1) 2010	() 2011	(1) 2012	() 2012	(C) T
				(A) 2011 I	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(b) 2010	(c) 2011	(4) 2012	(-,	(-,
9	in) ► A mounts from line 6	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(5, 2222	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	in) ► A mounts from line 6 Gross income from interest,	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(0, 2000	(7,7,5,5,1)
9	in) ► A mounts from line 6	(a) 2009	(b) 2010	(6) 2011	(4) 2012	(5,232	
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated	(a) 2009	(b) 2010	(6) 2011	(1) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(c) 2011	(4) 2322		
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c,	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
9 10a b c 11 12	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second				
9 10a b c 11 12 13 14	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage for 2013	or the organizati ic Support Pe (line 8, column (on's first, second ercentage f) divided by line	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201	or the organization of the	on's first, second ercentage f) divided by line art III, line 15	, third, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16 Se	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the	on's first, second ercentage f) divided by line art III, line 15 me Percenta	, third, fourth, or 13, column (f))	fifth tax year as a	a 501(c)(3) orga 15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization ic Support Performance (line 8, column (2 Schedule A, Paragraphic Performance) colors (line 10c, colors)	on's first, second ercentage f) divided by line art III, line 15 me Percentagolumn (f) divided	, third, fourth, or 13, column (f)) ge by line 13, colum	fifth tax year as a	15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17 18	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the organization of the organization of the state of the sta	on's first, second ercentage f) divided by line art III, line 15 me Percentago olumn (f) divided A, Part III, line 1	, third, fourth, or 13, column (f)) ge by line 13, column	fifth tax year as a	15 16	nization,

33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

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

Part IV	Part IV Supplemental Information. 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).									
	Facts And Circumstances Test									
Retu	ırn Reference	Explanation								
		Schodulo A / Form 000 o	000 E7) 201							

Schedule A (Form 990 or 990-EZ) 2013

DLN: 93493135018245

OMB No 1545-0047

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

► See separate instructions. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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 35c (Proxy Tax), then

Na	Section 501(c)(4), (5), or (6) orgame of the organization			Employer id	denti	ification number
WE	ST VIRGINIA UNIVERSITY RESEARCH CO	ORPORATION		55-06657	E 0	
Par	t I-A Complete if the or	ganization is exempt under s	section 501(organization.
1		ganızatıon's dırect and ındırect politic				
2	Political expenditures	gamzation's unect and munect pontic	ar campaign acc	IVICIES III F dic IV	d	.
3	Volunteer hours			•	4	P
	V ordineser fround					
Par	t I-B Complete if the or	ganization is exempt under s	section 501(c)(3).		
1	Enter the amount of any excise	e tax incurred by the organization und	ler section 4955	•	- 9	
2	Enter the amount of any excise	e tax incurred by organization manage	ers under sectior	1 4955 •	- 9	\$
3	If the organization incurred a s	ection 4955 tax, did it file Form 472	O for this year?			┌ Yes ┌ No
4a	Was a correction made?					┌ Yes ┌ No
b	If "Yes," describe in Part IV					
Par	t I-C Complete if the or	ganization is exempt under s	section 501(c), except section	<u>501</u>	.(c)(3).
1	Enter the amount directly expe	ended by the filing organization for sec	ction 527 exemp	ot function activities 🕨	- \$	
2	Enter the amount of the filing of exempt function activities	organization's funds contributed to oth	ner organizations	for section 527	\$	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here a	and on Form 112	0-POL, line 17b	-	
4	Did the filing organization file F	Form 1120-POL for this year?				┌ Yes ┌ No
5	organization made payments f amount of political contribution	nd employer identification number (EI For each organization listed, enter the ns received that were promptly and di political action committee (PAC) If a	e amount paid fro rectly delivered	m the filing organizatior to a separate political o	n's fu rgan	nds Also enter the ization, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount paid froi filing organization's funds If none, enter -	;	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
					_	
			1		- 1	

Sch	nedule C (Form 990 or 990-EZ) 2013					Page 2
Pä	art II-A Complete if the organization	is exempt under	section 501(c)(3) and file	ed Form 5768	
_	under section 501(h)).		Link in Doub TV an	- h - 66:1: - h - d		a adduses FIN
٠.	Check ► If the filing organization belongs to a expenses, and share of excess lobb		iist in Part IV ea	ch amiliated gro	up members nam	e, address, EIN,
3	Check ► ☐ If the filing organization checked bo		l" provisions app	ly		
	Limits on Lobbying E (The term "expenditures" means ar		l .)		(a) Filing organization's totals	(b) Affiliated group totals
La	Total lobbying expenditures to influence public o	pinion (grass roots lob	bying)			
ь	Total lobbying expenditures to influence a legisl	ative body (direct lobby	yıng)			
c	Total lobbying expenditures (add lines 1a and 1	o)		Γ		
d	O ther exempt purpose expenditures			Γ		
e	Total exempt purpose expenditures (add lines 1	c and 1d)		Γ		
f	Lobbying nontaxable amount Enter the amount is columns	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
	Not over \$500,000	20% of the amount on lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	00		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,0	000		
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25% of lir	ue 1f)				
h	Subtract line 1g from line 1a If zero or less, ent	er-0-				
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -				
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file	Form 4720 repo	orting	┌ Yes ┌ No
	(Some organizations that made a columns below. See t	he instructions fo	ection do not r lines 2a thro	havè to con ough 2f on p		ne five
	Lobbying Exp	enditures During	4-Year Avera ⊤	ging Period	1	1
	Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
C	Total lobbying expenditures					
d	Grassroots nontaxable amount					

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

Grassroots lobbying expenditures

Sch	edule C (Form 990 or 990-EZ) 2013					Ра	age 3
Pa		nization is exempt under section 501(c)(3) and has I tion under section 501(h)).					
For a	each "Yes" response to lines 1a through 1i	below, provide in Part IV a detailed description of the lobbying	(;	a)	1	(b)	
acti	vity.		Yes	No	An	noun	ıt.
1		ntion attempt to influence foreign, national, state or local influence public opinion on a legislative matter or referendum,		<u> </u>			
а	Volunteers?			No			
b		mpensation in expenses reported on lines 1c through 1i)?	Yes		_		
C	Media advertisements?			No			
d	Mailings to members, legislators, or t		Yes				
e	Publications, or published or broadcas	-		No			
f	Grants to other organizations for lobb	· · · · · ·	V	No			
g		staffs, government officials, or a legislative body?	Yes	NI -		18	9,723
h :	Other activities?	nventions, speeches, lectures, or any similar means?		No No			
i	Total Add lines 1c through 1:			NO		10	9,723
2a	-	organization to be not described in section 501(c)(3)?		No		10	9,723
za b	If "Yes," enter the amount of any tax	-		1110	1		
c		incurred by organization managers under section 4912					
d	•	ction 4912 tax, did it file Form 4720 for this year?		I			
		nization is exempt under section 501(c)(4), section !	501(c)(5).	or sec	ctio	
	501(c)(6).			/ (- / /			
				-	\	es/	No
1		dues received nondeductible by members?		L	1		
2		ise lobbying expenditures of \$2,000 or less?		L	2		
3		er lobbying and political expenditures from the prior year?			3		
Pa		nization is exempt under section 501(c)(4), section ! er (a) BOTH Part III-A, lines 1 and 2, are answered " 'es."					
1	Dues, assessments and similar amou	nts from members	1				
2	Section 162(e) nondeductible lobbyin expenses for which the section 527(f	g and political expenditures (do not include amounts of political) tax was paid).					
а	Current year		2a				
Ь	Carryover from last year		2b				
_C	Total		2c				
3		n 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4		n line 2c exceeds the amount on line 3, what portion of the excess ver to the reasonable estimate of nondeductible lobbying and					
	political expenditure next year?	ver to the reasonable estimate of homecachine loss, my and	4				
5	Taxable amount of lobbying and polition	cal expenditures (see instructions)	5				
Р	art IV Supplemental Inform	ation					
	ovide the descriptions required for Part irt II-B, line 1 Also, complete this part f	l-A, line 1, Part l-B, line 4, Part l-C, line 5, Part II-A (affiliated grou or any additional information	ıp lıst),	Part I	[-A, lin	e 2,	and
	Return Reference	Explanation					
PAF	A N C UTI LO B	BYING ACTIVITIES CONSIST OF IDENTIFYING FEDERAL AND DEVELOPMENT PROGRAMS WHICH CAN BE PERFORMED BY R LIZING THE LABORATORIES AND EQUIPMENT AVAILABLE TO BYING ACTIVITIES FOCUS UPON ENGINEERING, MEDICAL AN EARCH OPPORTUNITIES	ESEAR THE O	CHERS RGANI	AND S	STAI N	

201104410 0 (101111 330 01 330 12) 2013	i age i				
Part IV Supplemental Information	on <i>(continued)</i>				
Return Reference	Explanation				

Schedule D (Form 990) 2013

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DLN: 93493135018245

OMB No 1545-0047

Open to Public

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. ► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Inspection Name of the organization **Employer identification number** WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION 55-0665758

Pa	rt I	Organizations Maintaining Donor Advorganization answered "Yes" to Form 990		_	or Accounts.	. Comple	te if the
			(a) Donor advised funds		(b) Funds and o	ther accou	ınts
1	Total	number at end of year					
2	Aggre	gate contributions to (during year)					
3	Aggre	gate grants from (durıng year)					
4	Aggre	gate value at end of year					
5		e organization inform all donors and donor adviso are the organization's property, subject to the or		nor adv	ısed	┌ Yes	┌ No
6	used	e organization inform all grantees, donors, and do only for charitable purposes and not for the benef rring impermissible private benefit?				┌ Yes	┌ No
Par	t II	Conservation Easements. Complete if	the organization answered "Yes" t	o Forn	n 990, Part IV	, lıne 7.	
2	☐ Pr ☐ Pr ☐ Pr Comp	se(s) of conservation easements held by the orgoneservation of land for public use (e g , recreation otection of natural habitat eservation of open space lete lines 2a through 2d if the organization held and on the last day of the tax year	or education) Preservation of ar Preservation of a	certifie	d historic struct	cure	
					Held at the	End of the	Year
а	Total	number of conservation easements		2a			
b	Total	acreage restricted by conservation easements		2b			
C	Numb	er of conservation easements on a certified histo	ric structure included in (a)	2c			
d		er of conservation easements included in (c) acq ic structure listed in the National Register	uired after 8/17/06, and not on a	2d			
3	Numb	er of conservation easements modified, transferr	ed, released, extinguished, or terminate	ed by th	ne organization d	during	
	the ta	x year 🗠					
4	Numb	er of states where property subject to conservati	on easement is located 🛌				
5		the organization have a written policy regarding tement of the conservation easements it holds?	he periodic monitoring, inspection, han	dling of	violations, and	┌ Yes	┌ No
6	Staff a	and volunteer hours devoted to monitoring, insper	cting, and enforcing conservation easei	ments o	during the year		
7	A mou ►\$_	nt of expenses incurred in monitoring, inspecting	, and enforcing conservation easement	s durın	g the year		
8		each conservation easement reported on line 2(c ection 170(h)(4)(B)(ii)?	d) above satisfy the requirements of sec	ction 17	70(h)(4)(B)(ı)	┌ Yes	┌ No
9	balan	rt XIII, describe how the organization reports cor ce sheet, and include, if applicable, the text of the ganization's accounting for conservation easeme	e footnote to the organization's financia		•		
Par	t III	Organizations Maintaining Collection Complete if the organization answered "Y		or Ot	her Similar <i>F</i>	Assets.	
1a	works	organization elected, as permitted under SFAS 1 of art, historical treasures, or other similar assee, provide, in Part XIII, the text of the footnote t	16 (ASC 958), not to report in its reve ts held for public exhibition, education,	or rese	arch in furthera		
b	works	organization elected, as permitted under SFAS 1 of art, historical treasures, or other similar asse e, provide the following amounts relating to these	ts held for public exhibition, education,				lıc

- (i) Revenues included in Form 990, Part VIII, line 1

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

- (ii) Assets included in Form 990, Part X
- 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
- Revenues included in Form 990, Part VIII, line 1

- Assets included in Form 990, Part X

Part	••• Organizations Maintaining Co	llections of Art,	<u>, Hist</u>	tori	<u>cal Ti</u>	reası	<u>ires, or Ot</u>	the	<u>r Similar</u>	<u>Asse</u>	ets (co	ntınued)
3	Using the organization's acquisition, accessicollection items (check all that apply)	on, and other record	ds, che	eck	any of	the fol	lowing that a	re a	significant	use of	fits	
а	Public exhibition		d	Γ	Loan	orexc	hange progra	ams				
b	Scholarly research		e	\sqcap	Othe	r						
c	Preservation for future generations											
4	Provide a description of the organization's co Part XIII	llections and explai	ın how	the	y furth	er the	organızatıon'	's ex	empt purpo	se in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t	o be maintained as i	part o	fthe	organ	ızatıon	ı's collection	?			Yes	┌ No
Par	Escrow and Custodial Arrange Part IV, line 9, or reported an am						n answered	1 "Y	es" to Forr	n 990	o, 	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterme	diary	for c	ontribi	utions	or other asse	ets r	not	Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII $$	I and complete the	follow	ıng t	able		_					
								_		Amo	unt	
C	Beginning balance						—	1c				
d	Additions during the year							1d				
е	Distributions during the year							1e				
f	Ending balance							1f				
2a	Did the organization include an amount on Fo	rm 990, Part X, line	21?							Г	Yes	☐ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	natı	on has	been	provided in P	art :	XIII			Γ
Pai	t V Endowment Funds. Complete											
_		(a)Current year	(b)	Prior	year	b (c) ⊺	wo years back	(d)	Three years ba	ck (e	Four y	ears back
1a	Beginning of year balance									-		
Ь	Contributions									_		
С	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											
2	Provide the estimated percentage of the curr	ent year end balanc	e (line	e 1g	, colum	nn (a))	held as					
а	Board designated or quasi-endowment 🕨											
b	Permanent endowment ►											
c	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c shou	ıld equal 100%										
За	Are there endowment funds not in the posses	ssion of the organiza	ation t	hata	are hel	danda	admınıstered	for	the			
	organization by								г		Yes	No
	(i) unrelated organizations			•		•		•	<u> </u>	3a(i)		
ь	(ii) related organizations							•	· • •	3a(ii) 3b	<u> </u>	
4	Describe in Part XIII the intended uses of th	· ·				• ,		•		JU		
	t VI Land, Buildings, and Equipme					n ans	wered 'Yes'	to	Form 990.	Part	IV. lu	 ne
	11a. See Form 990, Part X, line 1											
	Description of property				Cost or s (inves		(b) Cost or otl basis (other		(c) Accumula depreciatio		(d) Bo	ok value
1 a	and						2,334,	855				2,334,855
b i	Buildings						53,110,	680	12,403	3,584	4	0,707,096
- 1												
C	_easehold improvements		•	L				!		!		
	Equipment		:									
d E	Equipment		· 				79,	815				79,815

Part VIII Investments—Other Securities. Co	mplete if the organization	answered 'Yes' to For	m 990, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of va	
(1)Financial derivatives		Cost or end-of-year	market value
(2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)			000 Park IV lune 11 a
Part VIII Investments—Program Related. C See Form 990, Part X, line 13.	omplete if the organization	on answered 'Yes' to Fo	orm 990, Part IV, line 11c.
(a) Description of investment	(b) Book value	(c) Method of va	
		Cost or end-of-year	market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	F		
Part IX Other Assets. Complete if the organization (a) Description		0, Part IV, line 11d See	Form 990, Part X, line 15 (b) Book value
(a) Desc	Прстоп		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line	15)		
Part X Other Liabilities. Complete if the org			ine 11e or 11f. See
Form 990, Part X, line 25.		··· , · -·· , ·	- · · _ -
1 (a) Description of liability	(b) Book value		
Federal income taxes			
OTHER LIABILITIES	-159	-	
DEFERRED GAIN ON REFUNDING ROUNDING	520,607	1	
KOUNDING	†	1	
		1	
		-	
		1	
	▶ 520,449	ho organization's financia	

Par		evenue per Audited Financial Sta vered 'Yes' to Form 990, Part IV, line :		nts With Revenue	per Re	eturn Complete if
1		r support per audited financial statements			1	126,969,000
2	Amounts included on line 1 bu	t not on Form 990, Part VIII, line 12				
а	Net unrealized gains on invest	ments	2a	776,00	7	
b	Donated services and use of fa	acılıtıes	2b			
c	Recoveries of prior year grants	5	2c			
d	Other (Describe in Part XIII)		2d			
e	Add lines 2a through 2d .		· · ·		2e	776,007
3	Subtract line ${f 2e}$ from line ${f 1}$.				3	126,192,993
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line 1				
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b .	4a			
b	Other (Describe in Part XIII)		4b	-24	1	
C	Add lines 4a and 4b				4c	-241
5	Total revenue Add lines 3 and	4c. (This must equal Form 990, Part I, line	e 12)		5	126,192,752
Part		xpenses per Audited Financial Sta swered 'Yes' to Form 990, Part IV, lind			es per l	Return. Complete
1		audited financial statements			1	121,376,000
2	A mounts included on line 1 bu	t not on Form 990, Part IX, line 25				
а	Donated services and use of fa	icilities	2a			
b	Prior year adjustments		2b		7	
C	Otherlosses		2c		7	
d	Other (Describe in Part XIII)		2d	62	7	
e	Add lines 2a through 2d				2e	627
3	Subtract line ${f 2e}$ from line ${f 1}$.				3	121,375,373
4	Amounts included on Form 990	D, Part IX, line 25, but not on line 1:				
а	Investment expenses not inclu	uded on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)		4b			
C	Add lines 4a and 4b				4c	0
5	Total expenses Add lines 3 ar	nd 4c. (This must equal Form 990, Part I, lii	ne 18)		5	121,375,373
Prov Part Infor	V, line 4, Part X, line 2, Part XI, mation Return Reference	Part II, lines 3, 5, and 9, Part III, lines 1a lines 2d and 4b, and Part XII, lines 2d and Explanation	d 4b Al			e any additional
<u>A D J U</u>	XI, LINE 4B - OTHER STMENTS	FINANCIAL STATEMENT ROUNDING -	\$241			
	XII, LINE 2D - OTHER STMENTS	FINANCIAL STATEMENT ROUNDING \$	627			
		 				_

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

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DLN: 93493135018245

SCHEDULE F (Form 990)

Department of the Treasury

Name of the organization

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.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Employer identification number

WEST VIRGINIA UNIVERSITY RESE	A D C H C O D D O D	ATION			
WLS: VIRGINIA UNIVERSITT RESE	ARCH CORPOR	AIION		55-0665758	
Part I General Information "Yes" to Form 990, Pa			ne United States. Co	omplete if the organiza	ation answered
1 For grantmakers. Does the o	rganızatıon ma	aıntaın records	to substantiate the a	mount of its grants an	d
other assistance, the grante	es' eligibility fo	r the grants or	assistance, and the s	selection criteria used	
to award the grants or assist	ance?				✓ Yes
2 For grantmakers. Describe i assistance outside the Unite		ganızatıon's pı	rocedures for monitori	ng the use of its grant	s and other
3 Activites per Region (The follow	wing Part I, line 3	table can be du	iplicated if additional spa	ace is needed)	
(а) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(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 and investments in region
(1) See Add'l Data					
(2)					
(3)					
(4)					
(5)					
3a Sub-total	0	0			545,357
b Total from continuation sheets to Part I	0	0			258,363
c Totals (add lines 3a and 3b)	0	0			803,720

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. Part II can be duplicated 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) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1) See Add'l Data								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								
_			1				1	<u> </u>

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

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.

Part III can be	duplicated if addit	ional space is ne	eded.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							
	1			l .			

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, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Г	Yes	굣	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Γ	Yes	ঘ	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)	F	Yes	Г	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	~	Yes	Г	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)	Г	Yes	굣	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).	Г	Yes	্ব	Νo

Schedule F (Form 990) 2013

Schedule F (Form 990) 2013 Page 5

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 2	SUB-RECIPIENTS ARE PAID ON A COST REIMBURSABLE OR FIXED PRICE BASIS IN BOTH INSTANCES, THE PRINCIPAL INVESTIGATOR REVIEWS AND APPROVES INVOICES FOR PAYMENT. THE PRINCIPAL INVESTIGATOR IS ALSO THE INDIVIDUAL WHO RECEIVES AND REVIEWS TECHNICAL PROGRESS REPORTS FROM SUB-RECIPIENTS EDUCATIONAL GRANTS TO STUDENTS ARE POSTED DIRECTLY TO THE STUDENTS' ACCOUNTS THE STUDENTS' ACCOUNTS ARE REVIEWED BY WVU STUDENT AFFAIRS TO DETERMINE IF ANY MONEY IS OWED BY THE STUDENT OR OWED TO THE STUDENT AS A REFUND STUDENTS ALSO REVIEW THEIR OWN ACCOUNTS TO ENSURE THAT THEY AGREE WITH THE ACTIVITY POSTED TO THEIR ACCOUNTS GRANT ELIGIBILITY AND SELECTION OF RECIPIENTS ARE DETERMINED BY THE PRINCIPAL INVESTIGATOR FOR EACH INDIVIDUAL GRANT EDUCATIONAL GRANTS ARE AWARDED BASED ON ACADEMIC MERIT IF THE RECIPIENT IS KNOWN AT THE TIME THE PRINCIPAL INVESTIGATOR WRITES THE GRANT PROPOSAL, THAT INFORMATION IS INCLUDED IN THE PROPOSAL FOR SPONSOR APPROVAL IF THE RECIPIENT IS DETERMINED AT A LATER DATE, THE PRINCIPAL INVESTIGATOR SUBMITS A REQUEST FOR A SUB-AWARD TO THE SPONSOR FOR APPROVAL AT THAT TIME

Additional Data

Software ID: Software Version:

EIN: 55-0665758

Name: WEST VIRGINIA UNIVERSITY RESEARCH

CORPORATION

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, 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
EUROPE	0	0	PROGRAM SERVICES	RESEARCH	19,778
NORTH AMERICA	0	0	PROGRAM SERVICES	RESEARCH	58,000
CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS		22,782

Form 990 Schedule F Part I - Activities Outside The United States										
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, 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					
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION	208,545					
EUROPE	0	0	PROGRAM SERVICES	FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION	109,888					
NORTH AMERICA	0	0	PROGRAM SERVICES	FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION	68,422					

Form 990 Schedule F	Part I - Activi	ties Outside 1	he United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, 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
SOUTH AMERICA	0	0	PROGRAM SERVICES	FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION	17,529
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION	40,413
CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICES	FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION	23,263

Form 990 Schedule F Part I - Activities Outside The United States											
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, 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						
SOUTH ASIA	0	0	PROGRAM SERVICES	FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION	17,222						
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION	2,749						
RUSSIA AND NEIGHBORING STATES	0	0	PROGRAM SERVICES	FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION	8,368						

Form 990 Schedule F	Form 990 Schedule F Part I - Activities Outside The United States											
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, 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							
NORTH AMERICA	0	0	PROGRAM SERVICES	OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION	44,669							
EUROPE	0	0	PROGRAM SERVICES	OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION	47,348							
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION	190							

Form 990 Schedule F Part I - Activities Outside The United States												
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, 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							
CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICES	OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION	10,000							
SOUTH AMERICA	0	0	PROGRAM SERVICES	OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION	10,966							
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION	4,000							

Form 990 Schedule F Part I - Activities Outside The United States										
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, 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					
SOUTH ASIA	0	0	PROGRAM SERVICES	OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION	3,150					
SOUTH ASIA	0	0	PROGRAM SERVICES	RESEARCH AND EDUCATIONAL INSTRUCTION	24,859					
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	RESEARCH	61,579					

Form 990 Schedu	Form 990 Schedule F Part II - Grants or Entities Outside The United States											
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuation (book, FMV, appraisal, other)				
		SOUTH ASIA	INSTRUCTION	12,717	CHECK							
		SUB-SAHARAN AFRICA	RESEARCH	61,579	CHECK							
		SOUTH ASIA	RESEARCH	12,141	CHECK							
		EUROPE	RESEARCH	19,778	CHECK							

, Form 990 Scheau	rm 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)			
		EAST ASIA & THE PACIFIC	RESEARCH	5,000	CHECK						
		NORTH AMERICA	RESEARCH	58,000	CHECK						
								<i>,</i>			

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

WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION

Part I General Information on Grants and Assistance

DLN: 93493135018245

Schedule I (Form 990)

Name of the organization

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

OMB No 1545-0047

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. ► Attach to Form 990 Department of the Treasury Internal Revenue Service Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public **Inspection**

Employer identification number

55-0665758

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and ✓ Yes 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. Part II can be duplicated if additional space is needed. (a) Name and address of **(b)** EIN (c) IRC Code (d) A mount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization section valuation non-cash assistance grant cash orassistance or government if applicable assistance (book, FMV, appraisal, other) See Additional Data Table

- Enter total number of section 501(c)(3) and government organizations listed in the line 1 table
- For Paperwork Reduction Act Notice, see the Instructions for Form 990.

88

13

(a)Type of grant or assistance

(b) Number of

AGREE WITH THE ACTIVITY POSTED TO THEIR ACCOUNTS

(f)Description of non-cash assistance

ī	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Fo	m 990	, Part IV,	line 22.
	Part III can be duplicated if additional space is needed.			

(d)A mount of

STUDENTS' ACCOUNTS THE STUDENTS' ACCOUNTS ARE REVIEWED BY WVU STUDENT AFFAIRS TO DETERMINE IF ANY MONEY IS OWED BY THE STUDENT OR OWED TO THE STUDENT AS A REFUND STUDENTS ALSO REVIEW THEIR OWN ACCOUNTS TO ENSURE THAT THEY

(c)A mount of

(e)Method of valuation

(a) Type of grant of assistant		recipients	cash grant	non-cash assistance	(book, FMV, appraisal, other)	(Typesemption of non-easin assistance	
(1) EDUCATIONAL GRANTS TO STUDENTS			2,960,513		воок		
Part IV Supplemental Ir	nformatior	1. Provide the infor	mation required in Pa	art I, line 2, Part III,	column (b), and any other	addıtıonal ınformatıon.	
Return Reference	Explanation						
PART I, LINE 2	SUB-RECIPIENTS ARE PAID ON A COST-REIMBURSABLE OR FIXED PRICE BASIS IN BOTH INSTANCES, THE PRINCIPAL INVESTIGATOR REVIEWS AND APPROVES INVOICES FOR PAYMENT THE PRINCIPAL INVESTIGATOR IS ALSO THE INDIVIDUAL WHO RECEIVES AND REVIEWS TECHNICAL PROGRESS REPORTS FROM SUB-RECIPIENTS EDUCATIONAL GRANTS TO STUDENTS ARE POSTED DIRECTLY TO THE						

Additional Data

Software ID:

Software Version:

EIN: 55-0665758

Name: WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALDERSON BROADDUS COLLEGE INC 101 COLLEGE HILL DRIVE BOX 2004 PHILIPPI,WV 26416	55-0357072	501(C)(3)	95,960		воок		RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ALLEGHENY SCIENCE AND TECHNOLOGY CORP 1000 GALLIHER DRIVE SUITE 237 FAIRMONT, WV 26554	26-4559720		27,222		воок		RESEARCH		

Form 990,Schedule 1, Pai	Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ALPHA ASSOCIATES INC 209 PRAIRIE AVENUE SUITE 209 MORGANTOWN,WV 26501	55-0516286		9,250		воок		RESEARCH			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LUNG ASSOCIATION OF THE MID ATLANTIC 3001 OLD GETTYSBURG ROAD CAMP HILL,PA 17011	25-1825116	501(C)(3)	5,861		воок		RESEARCH		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AUBURN UNIVERSITY 203 MARTIN HALL AUBURN,AL 368495119	63-6000724	SECTION 115	40,407		воок		RESEARCH		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AUTO EXPOSURE LLC 1796 SEVERN CHAPEL ROAD MILLERSVILLE,MD 21108	20-8533059		44,850		воок		PUBLIC SERVICE		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
BANNER RESEARCH INSTITUTE 10515 W SANTA FE DRIVE SUN CITY,AZ 85351	86-0768795	501(C)(3)	22,847		воок		RESEARCH				

Form 990,Schedule 1, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
BETHANY COLLEGE CRAMBLET HALL MAIN ST BETHANY,WV 26032	55-0356985	501(C)(3)	13,569		воок		OTHER			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
BLUEFIELD STATE COLLEGE RESEARCH AND DEVELOPMENT 704 BLAND ST BLUEFIELD,WV 24701	55-0785437	501(C)(3)	30,439		воок		RESEARCH			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
BUCKHANNON RIVER WATERSHED ASSOCIATION INC 112 FAYETTE ST BUCKHANNON, WV 26201	55-0783924	501(C)(3)	18,894		воок		RESEARCH			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CABIN CREEK HEALTH SYSTEMS INC PO BOX 70 DAWES,WV 25054	55-0709223	501(C)(3)	124,381		воок		INSTRUCTION			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CALIFORNIA INSTITUTE OF TECHNOLOGY 340 BECKMAN INSTITUTE MAIL CODE 139-74 PASADENA,CA 91125	95-1643307	501(C)(3)	34,997		воок		RESEARCH			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CALIFORNIA UNIVERSITY OF PENNSYLVANIA 250 UNIVERSITY AVE CALIFORNIA, PA 154191341	25-1508140		8,170		воок		INSTRUCTION			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CAMC HEALTH EDUCATION & RESEARCH INST PO BOX 765 CHARLESTON, WV 25323	55-0753754	501(C)(3)	215,769		воок		RESEARCH			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CHOOSY KIDS 3160 COLLINS FERRY ROAD MORGANTOWN,WV 26505	20-4425551		39,895		воок		RESEARCH		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CITY OF NEW ORLEANS 1300 PERDIDO ST NEW ORLEANS, LA 70112	72-6000969	SECTION 115	16,000		воок		RESEARCH			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CLARKSON UNIVERSITY BOX 5805 POTSDAM,NY 136995805	15-0543659	501(C)(3)	6,504		воок		RESEARCH		

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CLEMSON UNIVERSITY 238 POOLE AGRICULTURAL CENTER CLEMSON,SC 296340753		SECTION 115	100,491		воок		RESEARCH		

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
COMMUNITY CARE OF WEST VIRGINIA PO BOX 217 ROCK CAVE, WV 26234	55-0599096	501(C)(3)	83,631		воок		PUBLIC SERVICE		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CORNELL UNIVERSITY 341 PINE TREE ROAD ITHACA,NY 14850	15-0532082	501(C)(3)	498,081		воок		RESEARCH		

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
EAST TENNESSEE STATE UNIV PO BOX 70732 JOHNSON CITY,TN 37614	62-6021046	SECTION 115	7,513		воок		PUBLIC SERVICE		

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
EASTERN AREA HEALTH EDUCATION CENTER 2500 FOUNDATION WAY MARTINSBURG, WV 25401	35-2174239	501(C)(3)	102,941		воок		INSTRUCTION		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
EDVENTURE GROUP 1290 SUNCREST TOWNE CENTRE MORGANTOWN,WV 26505	16-1642857	501(C)(3)	110,302		воок		RESEARCH		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
EMBRY RIDDLE AERONAUTICAL UNIVERSITY INC 600 S CLYDE MORRIS BLVD DAYTONA BEACH,FL 32114	59-0936101	501(C)(3)	60,076		воок		RESEARCH		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ERALLO TECHNOLOGIES INC 20 TAYLOR ST LITTLETON, MA 014601416	05-0570246		17,000		воок		RESEARCH		

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
FAIRMONT STATE UNIVERSITY 1201 LOCUST AVE FAIRMONT,WV 26554	55-6000778	SECTION 115	31,705		воок		RESEARCH		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
FRANKLIN & MARSHALL COLLEGE PO BOX 3003 LANCASTER,PA 176043003	23-1352635	501(C)(3)	131,124		воок		RESEARCH			

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
FYDA ENERGY SOLUTIONS INC 20 TYDA DR CANONSBURG,PA 15317	46-3380773		60,000		воок		RESEARCH		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
GEORGE WASHINGTON UNIVERSITY 2130 H ST NW BLDG 209 WASHINGTON,DC 20052	53-0314394	501(C)(3)	56,949		воок		RESEARCH		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
GLENVILLE STATE COLLEGE 200 HIGH ST GLENVILLE, WV 263511200	55-6000779	SECTION 115	25,298		воок		OTHER			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
GUARDIANS OF THE WEST FORK WATERSHED GROUP 830 BENONI AVE FAIRMONT, WV 26554	55-0784772	501(C)(3)	11,650		воок		RESEARCH		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ICS LEARNING GROUP 8221 RITCHIE HWY STE 303 PASADENA,MD 21122	52-2083479		40,000		воок		PUBLIC SERVICE			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
INDIANA UNIVERSITY 250 UNIVERSITY BLVD STE 204 INDIANAPOLIS,IN 462025224	35-6001673	SECTION 115	91,508		воок		RESEARCH		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
INSTITUTE FOR ADVANCED STUDY 1 EINSTEIN DR PRINCETON,NJ 08540	21-0634988	501(C)(3)	62,233		воок		RESEARCH			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
IOWA STATE UNIVERSITY 3609 ADMINISTRATIVE SERVICES BLDG AMES,IA 50011	42-6004224	SECTION 115	45,236		воок		RESEARCH			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
JEWISH HOSPITAL LLC 4777 EAST GALBRAITH ROAD CINCINNATI,OH 45236	27-1408630	501(C)(3)	47,923		воок		RESEARCH			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
JOHNS HOPKINS UNIVERSITY 3400 N CHARLES ST BALTIMORE, MD 212182608	52-0595110	501(C)(3)	145,063		воок		RESEARCH			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
KENT STATE UNIVERSITY PO BOX 5190 KENT,OH 44242	31-6402079	SECTION 115	7,656		воок		INSTRUCTION		

Form 990, Schedule 1, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
LAFAYETTE COLLEGE 202 MARKLE HALL EASTON,PA 18042	24-0795686	501(C)(3)	42,356		воок		RESEARCH		

Form 990, Schedule 1, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
LIBRARY OF VIRGINIA 800 E BROAD STREET RICHMOND,VA 23219	54-6001813	SECTION 115	56,689		воок		PUBLIC SERVICE		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
LIMESTONE ENGINEERING 3424 LIMESTONE ROAD PARSON,WV 26287	26-1074499		51,480		воок		RESEARCH		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
LOS ALAMOS NATIONAL LABORATORY PO BOX 1663 MAIL STOP P245 LOS ALAMOS,NM 87545	20-3104541	SECTION 115	345,307		воок		RESEARCH			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MARQUETTE UNIVERSITY PO BOX 1881 MILWAUKEE,WI 532011881	39-0806250	501(C)(3)	20,389		воок		RESEARCH			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
MARSHALL UNIVERSITY RESEARCH CORPORATION 401 11TH ST STE 1400 HUNTINGTON,WV 25701	55-0683361	501(C)(3)	1,108,119		воок		PUBLIC SERVICE		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MICHIGAN STATE UNIVERSITY 110 JOHN HANNAH ADMINISTRATION BUILDING EAST LANSING,MI 488241046	38-6005984	SECTION 115	846,597		воок		RESEARCH			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
MID OHIO VALLEY HEALTH DEPT 211 6TH STREET PARKERSBURG,WV 26101	55-0619203	SECTION 115	218,601		воок		PUBLIC SERVICE		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
MSOPTI 400 N LEE ST LEWISBURG,WV 24901	55-0763235	501(C)(3)	110,956		воок		INSTRUCTION		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
NATIONAL RADIO ASTRONOMY OBSERVATORY 520 EDGEMONT RD CHARLOTTESVILLE,VA 22903	11-1630900	SECTION 115	358,219		воок		RESEARCH			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
NEXTECH MATERIALS LTD 404 ENTERPRISE DR LEWIS CENTER,OH 43035	31-1441978		27,158		воок		RESEARCH		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
NORTH CAROLINA STATE UNIVERSITY 4700 HILLSBOROUGH ST RALEIGH,NC 27606	56-6000756	SECTION 115	9,960		воок		RESEARCH			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
NOVA MEDICAL INC 150 WEST ST STE 201 WILMINGTON,MA 01887	04-3460451		88,813		воок		RESEARCH		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
OBERLIN COLLEGE 173 WEST LORAIN ST OBERLIN,OH 44074	34-0714363	501(C)(3)	68,163		воок		RESEARCH			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
OHIO DEPT OF NATURAL RESOURCESGEOLOGICAL SURVEY 2045 MORSE ROAD COLUMBUS,OH 43229	31-1334820	SECTION 115	106,780		воок		RESEARCH			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
OHIO STATE UNIVERSITY 1960 KENNY ROAD COLUMBUS,OH 43210	31-6025986	SECTION 115	115,935		воок		RESEARCH		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
OHIO VALLEY STEEL COMPANY 1721 WETZEL ST WHEELING,WV 26003	55-0585391		90,550		воок		RESEARCH		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
OREGON STATE UNIVERSITY EXTENSION & STATE COMMUNICATIONS 422 KERR ADMIN BLDG CORVALLIS, OR 973312119	93-6001786	SECTION 115	53,806		воок		RESEARCH		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
PENNSYLVANIA GEOLOGIC SURVEY DCNR TOPOGRAPHIC & GEOLOGIC 3240 SCHOOLHOUSE ROAD MIDDLETOWN,PA 17057	25-1773197	SECTION 115	102,205		воок		RESEARCH			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
RENSSELAER POLYTECHNIC INSTITUTE 110 8TH STREET WEST HALL THIRD FLOOR ROOM 311 TROY,NY 12180	14-1340095	501(C)(3)	174,527		воок		RESEARCH			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
RESEARCH FOUNDATION OF SUNY PO BOX 9 CASH RECEIPTS DEPT ALBANY,NY 12001	14-1368361	501(C)(3)	214,962		воок		RESEARCH			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
SHENANDOAH VALLEY MEDICAL SYS PO BOX 1146 MARTINSBURG,WV 25402	55-0563741	501(C)(3)	5,418		воок		PUBLIC SERVICE		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
SHEPHERD UNIVERSITY PO BOX 5000 SHERPHERDSTOWN, WV 254435000	55-6000799	SECTION 115	143,403		воок		RESEARCH		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
SMITH STRATIGRAPHIC LLC 397 STATE STREET APT 12C ALBANY,NY 12210	41-2045725		189,636		воок		RESEARCH			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
TRI COUNTY HEALTH CLINIC PO BOX 217 ROCK CAVE, WV 26234	55-0599096	501(C)(3)	88,170		воок		INSTRUCTION			

Form 990, Schedule 1, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
TRUSTEES OF COLUMBIA UNIVERSITY OFFICE OF CLINICAL TRIALS 622 W 168TH ST PH 1540 NEW YORK, NY 10032	13-5598093	501(C)(3)	115,846		воок		RESEARCH			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
TUG RIVER HEALTH ASSOCIATION INC PO BOX 507 GARY,WV 248360507	31-0889458	501(C)(3)	79,044		воок		INSTRUCTION		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
UC REGENTS SANTA CRUZ 1156 HIGH STREET SANTA CRUZ,CA 95064	94-1539563	SECTION 115	15,269		воок		RESEARCH		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNIVERSITY OF ALABAMA DEPT OF GEOLOGY BOX 870338 TUSCALOOSA, AL 354870338	63-6001138	SECTION 115	20,860		воок		RESEARCH			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNIVERSITY OF ALABAMA AT BIRMINGHAM 1530 THIRD AVE S 1170 ADMINISTRATIO BLDG BIRMINGHAM,AL 35294	63-6005396	SECTION 115	5,421		воок		RESEARCH			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
UNIVERSITY OF CALIFORNIA SAN DIEGO 9500 GILMAN DRIVE LA JOLLA,CA 92093	95-6006144	SECTION 115	66,056		воок		RESEARCH		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNIVERSITY OF CENTRAL FLORDIA PO BOX 163555 ATHLETIC TICKET OFFICE ORLANDO,FL 328163555	59-2924021	SECTION 115	5,000		воок		RESEARCH			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNIVERSITY OF KENTUCKY RESEARCH FOUNDATION NATIONAL CITY BANK SECTION 506 LOUISVILLE,KY 40289	61-6033693	501(C)(3)	648,113		воок		RESEARCH			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNIVERSITY OF MAINE SYSTEM 5717 CORBETT HALL ROOM 400 ORONO,ME 04669	01-6000769	SECTION 115	137,005		воок		RESEARCH			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
UNIVERSITY OF MARYLAND AT BALTIMORE PO BOX 41428 BALTIMORE,MD 21203	52-6002033	SECTION 115	8,894		воок		RESEARCH		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
TRI COUNTY HEALTH CLINIC INC PO BOX 217 ROCK CAVE, WV 26234	55-0599096	SECTION 115	6,444		воок		RESEARCH		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNIVERSITY OF MIAMI 5821 SAN AMARO DR CORAL GABLES,FL 331462436	59-0624458	501(C)(3)	15,163		воок		RESEARCH			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNIVERSITY OF MICHIGAN 4901 EVERGREEN RD DEARBORN,MI 481281491	38-6006309	SECTION 115	64,985		воок		RESEARCH			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNIVERSITY OF MISSISSIPPI MEDICAL CENTER 2500 N STATE STREET JACKSON,MS 39216	64-6008520	SECTION 115	178,036		воок		RESEARCH			

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
UNIVERSITY OF MISSOURI KANSAS CITY 2411 HOLMES ST KANSAS CITY, MO 64108	43-6003859	SECTION 115	246,982		воок		RESEARCH		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
UNIVERSITY OF NEW MEXICO HEALTH SCIENCE CENTER 1 UNIVERSITY OF NEW MEXICO ALBUQUERQUE,NM 87131	85-6000642	SECTION 115	13,398		воок		RESEARCH		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNIVERSITY OF NORTH CAROLINA WILMINGTON 601 SOUTH COLLEGE RD H0155 WILMINGTON, NC 284033201	56-1258660	SECTION 115	145,307		воок		RESEARCH			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNIVERSITY OF NORTH CAROLINACHAPEL HILL HEALTH SCIENCES LIBRARY NR 7585 CHAPEL HILL,NC 27599	56-6001139	SECTION 115	7,575		воок		RESEARCH			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNIVERSITY OF NORTH FLORDIA 1 UNF DR JACKSONVILLE,FL 322242672	59-2976169	SECTION 115	6,000,		воок		RESEARCH			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNIVERSITY OF NORTH TEXAS HEALTH SCIENCES CENTER 3500 CAMP BOWIE BLVD FORT WORTH,TX 76107	75-6064033	SECTION 115	980,304		воок		RESEARCH			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
UNIVERSITY OF NOTRE DAME 836A GRACE HALL NOTRE DAME,IN 46556	35-0868188	501(C)(3)	185,190		воок		RESEARCH		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
UNIVERSITY OF RHODE ISLAND 70 LOWER COLLEGE ROAD THIRD FLOOR KINGSTON,RI 02881	05-6000522	SECTION 115	75,740		воок		RESEARCH		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
UNIVERSITY OF VERMONT AND STATE AGRICULTURAL COLLEGE PO BOX 1389 WILLISTON,VT 05495	03-0179440	SECTION 115	28,987		воок		RESEARCH		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
UNIVERSITY OF WYOMING 1000 E UNIVERSITY AVENUE DEPT 3354 LARAMIE,WY 82071	83-6000331	SECTION 115	44,750		воок		RESEARCH		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNIVERSITY OF WYOMING RESEARCH CORPWESTERN RESEARCH INSTITUTE 365 N 9TH ST LARAMIE,WY 82072	74-2269704	501(C)(3)	37,145		воок		RESEARCH			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
UNIVERSITY OF WEST GEORGIA 1601 MAPLE ST ACCOUNT SERVICES CARROLLTON, GA 301184220	58-6002055	SECTION 115	9,605		воок		RESEARCH		

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
US-CHINA CLEAN ENERGY FORUM 1301 FIFTH AVE STE 2500 SEATTLE, WA 98101	26-2792365	501(C)(3)	327,791		воок		RESEARCH			

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
USDA FOREST SERVICE PO BOX 4360 MORGANTOWN, WV 265044360	72-0564834	SECTION 115	24,500		воок		RESEARCH		

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
UW MILWAUKEE CTI PO BOX 500 MILWAUKEE,WI 532011881	39-1805963	SECTION 115	84,418		воок		RESEARCH		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
VIRGINIA POLYTECHNIC INSTITUTE AND STATE UNIVERSITY OFFICE OF SPONSORED PROGRAMS 201 SOUTHGATE CTR BLACKSBURG,VA 24061	54-6001805	SECTION 115	10,808		воок		RESEARCH		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
VISHWAMITRA RESEARCH INSTITUTE 368 56TH ST CLARENDON HILLS,IL 60514	37-1490397	501(C)(3)	47,039		воок		RESEARCH			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
WEST LIBERTY UNIVERSITY RESEARCH CORP 129 CSC PO BOX 295 WEST LIBERTY, WV 26074	27-2196294	501(C)(3)	206,811		воок		RESEARCH			

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
WEST LIBERTY UNIVERSITY 1610 WARWOOD AVE WHEELING,WV 26003	55-6000822	SECTION 115	6,224		воок		OTHER		

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
WHEELING JESUIT UNIVERSITY 316 WASHINGTON AVE WHEELING,WV 26003	55-0394213	501(C)(3)	39,547		воок		OTHER		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
WORLD RESOURCES INSTITUTE 1709 NEW YORK AVE NW WASHINGTON, DC 200065206	52-1257057	501(C)(3)	164,823		воок		RESEARCH			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
WEST VIRGINIA GEOLOGICAL & ECONOMIC SURVEY 1 MONT CHATEAU ROAD MORGANTOWN, WV 26508	55-6000936	SECTION 115	94,406		воок		RESEARCH		

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
WEST VIRGINIA SCHOOL OF OSTEOPATHIC MEDIC 400 N LEE STREET LEWISBURG,WV 24901	55-0561541	SECTION 115	229,778		воок		INSTRUCTION		

Form 990,Schedule I, Pa	form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance					
WEST VIRGINIA STATE POLICE PO BOX 1833 CHARLESTON,WV 25327	55-6000772	SECTION 115	250,000		воок		INSTRUCTION					

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
WEST VIRGINIA STATE UNIVERSITY PO BOX 1000 INSTITUTE, WV 251121000	55-6000839	SECTION 115	12,980		воок		OTHER				

Form 990,Schedule I, Pai	form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance					
WEST VIRGINIA WESLEYAN COLLEGE 59 COLLEGE AVE BUCKHANNON, WV 26201	55-0357056	501(C)(3)	65,067		воок		RESEARCH					

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
WEST VIRGINIA HIGH TECH CONSORTIUM FOUNDATION 1000 TECHNOLOGY DR STE 1000 FAIRMONT, WV 26554	55-0727658	501(C)(3)	736,473		воок		RESEARCH				

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
WVMEP PO BOX 6070 MORGANTOWN, WV 265066070	55-0747460	501(C)(3)	8,000		воок		PUBLIC SERVICE				

Form 990,Schedule I, Pai	form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance					
XORAN TECHNOLOGIES 5210 S STATE ROAD ANN ARBOR, MI 48108	32-0039864		56,099		воок		RESEARCH					

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
SHACK NEIGHBORHOOD HOUSE INC PO BOX 600 PURSGLOVE, WV 265460600	55-0631216	501(C)(3)	1,200		воок		RESEARCH				

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
BLANCHETTE ROCKEFELLER NEUROSCIENCES INSTITUTE EIGHT MEDICAL CENTER DRIVE MORGANTOWN, WV 265053409	55-0771139	501(C)(3)	1,000,000		воок		SUPPORT TO FURTHER BRNI'S RESEARCH OF NEUROLOGICAL DISEASES			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
WEST VIRGINIA UNIVERSITY PO BOX 6201 MORGANTOWN, WV 265066070	55-6000842	SECTION 115	8,362,575		воок		EXPENDITURES ON GRANTS AWARDED TO WVURC ON BEHALF OF WVU FOR THE ACQUISITION OF CAPITAL ASSETS OR CONSTRUCTION WHERE THE ASSET WAS TRANSFERRED TO WVU AS A BENEFICIARY OF				

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DLN: 93493135018245

OMB No 1545-0047

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.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION **Employer identification number**

55-0665758

Pai	rtI Questions Regarding Compensation				
				Yes	No
1a	Check the appropriate box(es) if the organization provided any 990, Part VII, Section A, line 1a Complete Part III to provide				
	First-class or charter travel	ousing allowance or residence for personal use			
	Travel for companions	ayments for business use of personal residence			
	□ Tax idemnification and gross-up payments □ H	ealth or social club dues or initiation fees			
	Discretionary spending account	ersonal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization reimbursement or provision of all of the expenses described at		1b		
2	Did the organization require substantiation prior to reimbursing directors, trustees, officers, including the CEO/Executive Dire		2		
3	Indicate which, if any, of the following the filing organization us organization's CEO/Executive Director Check all that apply I used by a related organization to establish compensation of th	Do not check any boxes for methods			
	Compensation committee	/rıtten employment contract			
	☐ Independent compensation consultant ☐ C	ompensation survey or study			
	Form 990 of other organizations	pproval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, S or a related organization	Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control payment?		4a		No
b	Participate in, or receive payment from, a supplemental nonqu	alıfıed retırement plan?	4b		Νo
C	Participate in, or receive payment from, an equity-based comp	pensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the a	applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete	te lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, d compensation contingent on the revenues of	ıd the organization pay or accrue any			
а	The organization?		5a		Νo
b	Any related organization?		5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III				
6	For persons listed in Form 990, Part VII, Section A, line 1a, d compensation contingent on the net earnings of	ıd the organization pay or accrue any			
а	The organization?		6a		Νo
b	Any related organization?		6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III				
7	For persons listed in Form 990, Part VII, Section A, line 1a, d payments not described in lines 5 and 6? If "Yes," describe in		7		No
8	Were any amounts reported in Form 990, Part VII, paid or acc	ured pursuant to a contract that was			
	subject to the initial contract exception described in Regulatio				
	ın Part III		8		Νo
9	If "Yes" to line 8, did the organization also follow the rebuttable section 53 $4958-6(c)$?	e presumption procedure described in Regulations	9		

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

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

Note. The sum of columns (B)(1)-(111) 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 and Title	(B) Breakdown o	W-2 and/or 1099-MISC compensation		(C) Retirement and	(D) Nontaxable	(E) Total of	(F) Compensation
	(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	reported as deferred in prior Form 990
See Additional Data Table							

Schedule J (Form 990) 2013

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Return Reference Explanation

Schedule J (Form 990) 2013

Software ID: Software Version:

EIN: 55-0665758

Name: WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION

Form 990, Schedule J, Pa	art I	<u>I - Officers, Direc</u>	tors, Trustees, Ke	y Employees, and	Highest Compens	sated Employees		
(A) Name		(B) Breakdown of	of W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) O ther compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ
JAMES PCLEMENTS CHAIRMAN	(I) (II)		, 0	0 0 34,128	0 15,300	0 20,406	0 832,072	0 0
MICHELE WHEATLY VICE-CHAIRMAN	(I) (II)		0		0 15,300	0	0 384,341	0 0
CHRISTOPHER COLENDA DIRECTOR	(I) (II)	227,104	0 0		0 15,034	0	0	0
EUGENE CILENTO DIRECTOR	(ı) (ıı)		0 0	0 0 2,028	0 15,609	0 8,989	0 280,567	0 0
NARVEL WEESE DIRECTOR	(I) (II)	275,129	0 0	1 1	0 17,063	0 18,979	0 311,329	0
BOJAN CUKIC DIRECTOR	(I) (II)	152,108	0 3 25,415	0 13,479	0 11,748	0 9,604	0 212,354	0
JIM ANDERSON DIRECTOR	(I) (II)	125,317	0 7 15,663	0 0 648	0 8,902	0 16,534	0 167,064	0
GLENN DILLON DIRECTOR	(I) (II)	288,134	. 0	0 1,438	0 15,300	0 14,369	0 319,241	0
ROBERT JONES DIRECTOR	(I) (II)	224,963	0 0	0 0 207	0 13,807	0 6,218	0 3 245,195	0 0
ARTHUR J ROSS III DIRECTOR	(I) (II)	253,260	0 0	- I	0 15,300	0 13,416	0 304,976	0 0
DANIEL ROBISON DIRECTOR	(I) (II)	228,420	0 0	0 2,058	0 14,400	0 18,312	0 2 263,190	0
ANJALI HALABE ASSISTANT TREASURER	(I) (II)		0	~I	0 8,741	0 3,853	0 154,449	0
ALAN MARTIN SECRETARY	(I) (II)	135,583	0 0	0 3,927	0 8,623	0 9,010	0 157,143	0 0
DANIEL DURBIN TREASURER	(I) (II)	204,191	0 0	0 967	0 13,115	0 15,980	0 234,253	0 0
MRIDUL GAUTAM VICE PRESIDENT	(I) (II)	164,752	17,844	- 1	0 11,433	0 15,288	′I "I	' · · · · · · · · · · · · · · · · · ·
DANIEL VASGIRD DIRECTOR, RESEARCH COMPLIANCE	(1) (11)		0 0	0	8 ,300 0	19,976 0	197,779 0 0	0
PHILIP SPARKS DIRECTOR, TECH TRANSFER	(I) (II)	0	0 0	1 ' 1	11,803 0	20,096 0	222,985	0 0
EARL SCIME FORMER DIRECTOR	(I) (II)	201,703	0 3 4,500	- 1	0 13,065	0 20,442	0 240,609	0
PATRICK CALLERY FORMER DIRECTOR	(I) (II)	156,141	0 0	0 0	0 9,841	0 16,638	0 182,620	0
FRED BUTCHER FORMER DIRECTOR	(I)	0 327,781	1 01		0 20,355	0 21,240	0 369,376	0 0

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees										
(A) Name		(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns			
		(i) Base Compensation	(ii) Bonus & (iii) Other compensation		compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ		
JAMES BRICK FORMER DIRECTOR ((I) (II)	0 59,571	0	0 23,000	0 5,078	0 6,869	94,518	0		
RUDOLPH ALMASY FORMER DIRECTOR ((I) (II)	0 63,513	0	0 0	0 4,222	0 16,631	0 84,366	0		

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DLN: 93493135018245

OMB No 1545-0047 2013

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SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Employer identification number Name of the organization WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION 55-0665758

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	THERE IS A COMMON EMPLOYMENT RELATIONSHIP AMONGST THE MAJORITY OF MEMBERS OF THE BOARD OF DIRECTORS WITH THE EXCEPTION OF THE THREE EXTERNAL MEMBERS, ALL WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION DIRECTORS ARE EMPLOYED BY WEST VIRGINIA UNIVERSITY

Return Reference	Explanation
,	THE VOTING MEMBERSHIP OF THE BOARD OF DIRECTORS INCLUDES THE PRESIDENT OF WEST VIRGINIA UNIVERSITY (WVU) AND UP TO FOURTEEN ADDITIONAL VOTING DIRECTORS SEVEN OF THE BOARD DIRECTORS ARE APPOINTED BY THE UNIVERSITY PRESIDENT, THREE OF WHICH ARE EXTERNAL TO BOTH WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION AND WEST VIRGINIA UNIVERSITY THREE OF THE BOARD DIRECTORS ARE APPOINTED BASED ON THEIR WEST VIRGINIA UNIVERSITY POSITION THE REMAINING FOUR BOARD DIRECTORS ARE APPOINTED BASED ON THEIR WEST VIRGINIA UNIVERSITY POSITION WITHIN A COLLEGE WITH A HIGH LEVEL OF EXTERNALLY FUNDED RESEARCH WITH THE EXCEPTION OF THREE EXTERNAL BOARD DIRECTORS, EACH OF THE APPOINTED DIRECTORS MUST BE EMPLOYEES OF WEST VIRGINIA UNIVERSITY DURING THE TERM OF APPOINTMENT NON-VOTING DIRECTORS MAY BE ELECTED BY THE VOTING MEMBERS OF THE BOARD

Return Reference	Explanation			
FORM 990, PART VI, SECTION B, LINE 11	THE WEST VIRGINIA UNIVERSITY TAX SERVICES UNIT, THE WVU DIVISION OF FINANCE, THE WVURC TREASURER, AND THE WVURC ASSISTANT TREASURER REVIEW A DRAFT OF THE FORM 990 ON BEHALF OF THE WVURC A COMPLETE COPY OF THE FORM 990 IS PROVIDED TO THE BOARD PRIOR TO FILING WITH THE SERVICE			

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE WVU OFFICE OF RESEARCH INTEGRITY AND COMPLIANCE REQUIRES AND MONITORS ANNUAL DISCLOSURES BY ANY EMPLOYEE CONDUCTING RESEARCH INCLUDING BOARD DIRECTORS OR OFFICERS IN ADDITION, THE WVU OFFICE OF RESEARCH INTEGRITY AND COMPLIANCE MAINTAINS AND MONITORS ANY CONFLICT OF INTEREST DISCLOSURE MADE BY NON-RESEARCH EMPLOYEES ADDITIONALLY, WITH THE EXCEPTION OF THE THREE EXTERNAL DIRECTORS WHO ARE NOT EMPLOYED BY EITHER WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION OR WEST VIRGINIA UNIVERSITY, ALL WVURC BOARD DIRECTORS WERE EMPLOYEES OF WVU DURING THE FISCAL YEAR 2014 CONSEQUENTLY, THESE BOARD DIRECTORS ARE SUBJECT TO WVU'S POLICIES AND PROCEDURES WHICH INCLUDE THE STATE OF WEST VIRGINIA ETHICS ACT, AND THE COMPENSATION, FRINGE BENEFIT AND ACCOUNTABLE PLAN POLICIES AND PROCEDURES THE STATE OF WEST VIRGINIA ETHICS COMMISSION COMPILES ON AN ANNUAL BASIS FINANCIAL DISCLOSURES SUBMITTED BY WVU EMPLOYEES AT THE DIRECTOR LEVEL AND ABOVE

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	WITH THE EXCEPTION OF THE THREE EXTERNAL DIRECTORS WHO ARE NOT EMPLOYED BY EITHER WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION NOR WEST VIRGINIA UNIVERSITY, THE ORGANIZATIONS OFFICERS ARE COMPENSATED BY A RELATED ORGANIZATION, WEST VIRGINIA UNIVERSITY COMPENSATION FOR EVERY POSITION IS DETERMINED BY SEVERAL FACTORS INCLUDING JOB ANALYSIS AND EVALUATION, THE ESSENTIAL DUTIES AND RESPONSIBILITIES OF THE POSITION, AND SALARY SURVEY DATA ON PAY PRACTICES WE PERIODICALLY REVIEW OUR SALARY ADMINISTRATION PROGRAM AND RESTRUCTURE IT AS NECESSARY MARKET AND/OR COMPETENCY BASED ADJUSTMENTS MAY BE WARRANTED BASED ON ONE'S EMPLOYMENT FUNCTIONS, AS DETERMINED BY A CLASSIFICATION REVIEW IN ADDITION, EMPLOYEES MAY BE AWARDED MERIT-BASED PAY ADJUSTMENTS IN CONJUNCTION WITH SUPERIOR PERFORMANCE AS DOCUMENTED BY OUR PERFORMANCE EVALUATION PROCESS

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	PURSUANT TO CHAPTER 31, ARTICLE I, SECTION 28 OF THE OFFICIAL CODE OF WEST VIRGINIA, 1931, AS AMENDED, A CERTIFICATE OF INCORPORATION WAS ISSUED BY THE WEST VIRGINIA SECRETARY OF STATE ON JUNE 26, 1985 TO THE WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION THIS CERTIFICATE IS AFFIXED TO THE ARTICLES OF INCORPORATION OF THE WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION THAT CERTIFICATE ALONG WITH THE WURC'S IRS DETERMINATION LETTER AND FORM 990 ARE AVAILABLE ON WEST VIRGINIA UNIVERSITY'S WEBSITE. THE AFFIRMATIVE ACTION PLAN, FINANCIAL STATEMENTS AND FORM 990-T ARE OPEN AND AVAILABLE FOR INSPECTION AT THE WURC UPON REQUEST.

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 9	SEE THE FOLLOWING NOTE FOR FORM 990, PART VII FOR CONTACT ADDRESSES FOR OFFICERS, DIRECTORS, ETC. WHO CANNOT BE REACHED AT THE ORGANIZATION'S MAILING ADDRESS

Return Reference	Explanation
•	JULIE SMITH - 3313 FOUR-H CAMP ROAD, MORGANTOWN, WV 26508-2428 MIKE GREEN - 5000 GREYSTONE DRIVE, MORGANTOWN, WV 26508-8616 MARK WISE - 1031 IMPERIAL DRIVE, MORGANTOWN, WV 26508-9180

Return Reference	Explanation
FORM 990, PART XI, LINE 9	UNREALIZED GAINS/LOSSES 776,007 FINANCIAL STATEMENT ROUNDING -1

Return Reference	Explanation
PART XII FINANCIAL STATEMENTS AND REPORTING, LINE 2C	THERE HAS BEEN NO CHANGE FROM FISCAL YEAR 2013 TO FISCAL YEAR 2014 IN THE OVERSIGHT OF THE AUDIT, REVIEW, OR COMPILATION OF THE FINANCIAL STATEMENTS OR IN THE SELECTION PROCESS OF AN INDEPENDENT ACCOUNTANT

SCHEDULE R

(Form 990)

DLN: 93493135018245

Related Organizations and Unrelated Partnerships

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

► Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public

Department of the Treasury Internal Revenue Service	and its instructions is	is at <u>www.irs.gov/form990</u> . Open to Pu Inspecti							
Name of the organization WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION							cation number		
Part I Identification of Disregarded E	ntities Complete	of the organization	answered "Yes" or	Form 990 Pa	55-0665 rt IV line 33	758			
(a) Name, address, and EIN (if applicable) of disregarded	·	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d)	(e) End-of-year assets	D	(f) Direct controlling entity		
Part II Identification of Related Tax-E or more related tax-exempt organi	xempt Organiza zations during the	itions Complete if tax year.	the organization ar	nswered "Yes" (on Form 990, F	Part IV,	line 34 because it		
(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sect	ion (e) Public charity (if section 50		(f) Direct controlling entity	Section (13) co en	ontrolle itity?
(1) WEST VIRGINIA UNIVERSITY		EDUCATION AND	WV					Yes	No No
PO BOX 6005		RESEARCH							
MORGANTOWN, WV 265066005 55-6000842									

Schedule R (Form 990) 2013														Page	2		
Part III	Identification of Related Organ because it had one or more relate							ation ans	wered "Ye	s" on	Form	990, Part	[V, lı	ne 34	4			
	(a) Name, address, and EIN of related organization		Primary activity Legal C domicile cor		(d) Direct controlling entity	Direct Predominant income(related		(f) Share of total income	(g) Share of e end-of-year assets	(h) Disproprtionater allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managin partner?		ng ownership			
						514,	,			Yes	No		Yes	No				
Part IV	Identification of Related Organ line 34 because it had one or more	nizations Taxable e related organizati	e as a Corpo ons treated a	ration s a cor	or Trust poration or	Complet trust du	e if th	ne organı he tax y	zatıon ans ear.	wered	d "Yes	" on Form	990,	Part	IV,			
1	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)		Direct of	Direct controlling Type entity (C cor		e) of entity o, S corp, crust)	(f) Share of total income	Share	(g) of end- year assets	(h) of- Percen owner	tage		(i) Section 512 (b)(13) controlled entity?			
							_									No		
(1) F & P REA 409 MARINA T 6555 MORGANTOWI 55-0571302	OWER PO BOX	BUILDING LESSOR	WV				UNIVERS RESEAR	WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION			40,203	210,23		30 100 00	0 %		Yes	
			<u> </u>				I											

	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule									
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?										
а	a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity									
b	Gift, grant, or capital contribution to related organization(s)									
C	Gift, grant, or capital contribution from related organization(s)									
d	Loans or loan guarantees to or for related organization(s)									
е	Loans or loan guarantees by related organization(s)				1e	Yes				
f	f Dividends from related organization(s)									
g	g Sale of assets to related organization(s)									
h	h Purchase of assets from related organization(s)									
i	Exchange of assets with related organization(s)				1 i	Yes				
j	Lease of facilities, equipment, or other assets to related organization(s)				1j	Yes				
k	k Lease of facilities, equipment, or other assets from related organization(s)									
ı	l Performance of services or membership or fundraising solicitations for related organization(s)									
m Performance of services or membership or fundraising solicitations by related organization(s)										
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Yes				
0	Sharing of paid employees with related organization(s)				10	Yes				
р	Reimbursement paid to related organization(s) for expenses				1 p	Yes				
q	Reimbursement paid by related organization(s) for expenses				1q	Yes				
r	Other transfer of cash or property to related organization(s)				1r	Yes				
s	s Other transfer of cash or property from related organization(s)									
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line (a)	· · · · · · · · · · · · · · · · · · ·	<u></u>	(d)						
	Name of related organization Tr	(b) Transaction	(c) Amount involved	Method of determining amo	ount in	volved				
	ty	type (a-s)								
							_			

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

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

revenue) that was not a related organization. See instructions														
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) all partners section 501(c)(3) ganizations?	(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	
			314)	Yes	No			Yes	No		Yes	No		
]		
												\Box		
	•													

Schedule R (Form 990) 2013

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2013