

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form 990

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2024

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.

Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A For the 2024 calendar year, or tax year beginning JUL 1, 2024 and ending JUN 30, 2025

Form header section containing organization name (WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION), EIN (55-0665758), address (PO BOX 6005, ONE WATERFRONT PLACE, MORGANTOWN, WV 26506), principal officer (BARBARA WEISS), and website (HTTP://RESEARCH.WVU.EDU).

Part I Summary

Summary table with columns for Revenue, Expenses, and Net Assets or Fund Balances. Rows include mission statement (TO FOSTER AND SUPPORT RESEARCH AT WEST VIRGINIA UNIVERSITY), governance metrics, and financial data for Prior Year and Current Year.

Part II Signature Block

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

Signature block form with fields for officer signature (Barbara Weiss), date (5/14/26), title (TREASURER), and preparer information.

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III X

1 Briefly describe the organization's mission:
**TO FOSTER AND SUPPORT RESEARCH AT WEST VIRGINIA UNIVERSITY (WVU) AND
TO PROVIDE EVALUATION, DEVELOPMENT, PATENTING, MANAGEMENT AND
MARKETING SERVICES FOR INVENTIONS BY THE FACULTY, STAFF, AND STUDENTS
OF WVU.**

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: _____) (Expenses \$ 169,584,592. including grants of \$ 34,299,951.) (Revenue \$ 24,016,827.)
SEE SCHEDULE O

4b (Code: _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4c (Code: _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4d Other program services (Describe on Schedule O.)
(Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4e Total program service expenses 169,584,592.

WEST VIRGINIA UNIVERSITY
RESEARCH CORPORATION

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1 X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	2 X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4 X	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5	X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6	X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8	X
9 Did the organization report an amount in Part X, line 21, 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? <i>If "Yes," complete Schedule D, Part IV</i>	9	X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	11a X	
b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b	X
c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c	X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d	X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f	X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	12b X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15 X	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16	X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	17	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18	X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a	X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21 X	

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Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV		X
b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV		X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
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	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	X	
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		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a 690		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15	X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17	

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

Check if Schedule O contains a response or note to any line in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
1b	Enter the number of voting members included on 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?	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	The governing body?	X	
8b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
10b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
11b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	X	
15b	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
16b	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?		

Section C. Disclosure

17	List the states with which a copy of this Form 990 is required to be filed	NONE
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input checked="" type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain on Schedule O)	
19	Describe on 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, address, and telephone number of the person who possesses the organization's books and records KATIE STORES, SECRETARY - 304-293-4769 886 CHESTNUT RIDGE ROAD, MORGANTOWN, WV 26506	

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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) E. GORDON GEE DIRECTOR	0.20 70.00	X						0.	2,015,353.	30,990.
(2) CLAY MARSH EXECUTIVE DIRECTOR	1.00 70.00			X				0.	1,195,411.	27,816.
(3) PAULA CONGELIO DIRECTOR	0.25 65.00	X						0.	424,152.	59,536.
(4) MING LEI DIRECTOR	5.00 40.00	X						0.	445,213.	32,935.
(5) MARYANNE REED FORMER DIRECTOR	0.00 75.00						X	0.	416,886.	34,726.
(6) PAUL KREIDER DIRECTOR	1.00 40.00	X						0.	392,685.	38,717.
(7) EARL SCIME FORMER DIRECTOR	0.00 90.00						X	0.	398,515.	31,135.
(8) STEPHANIE TAYLOR DIRECTOR	5.00 40.00	X						0.	348,851.	46,616.
(9) BARBARA WEISS TREASURER	5.00 40.00			X				0.	343,101.	38,307.
(10) PEDRO J MAGO DIRECTOR	1.00 40.00	X						0.	339,775.	38,976.
(11) MAURA MCLAUGHLIN DIRECTOR	1.00 40.00	X						0.	287,153.	36,649.
(12) FRED KING EXECUTIVE DIRECTOR	2.00 59.00			X				0.	287,329.	28,979.
(13) J. ROBERT ALSOP FORMER EXECUTIVE DIRECTOR	0.00 40.00						X	0.	286,515.	16,611.
(14) SAMUEL TAYLOR GENERAL OPERATIONS MANAGER	37.50					X		174,702.	0.	53,945.
(15) MATTHEW TENAN GENERAL & OPERATIONS MANAG	37.50					X		181,332.	0.	44,673.
(16) DAVID KOSSLOW ASSOCIATE TREASURER	5.00 40.00			X				0.	188,959.	37,931.
(17) KATIE STORES SECRETARY	1.00 40.00			X				0.	210,960.	12,658.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) SHELLEY WELCH GENERAL & OPERATIONS MANAG	37.50					X		182,628.	0.	34,284.
(19) JOSEPH PEAL GENERAL & OPERATIONS MANAG	37.50					X		165,752.	0.	41,611.
(20) ROSSI WILES OFFICER	1.00 40.00			X				0.	168,053.	21,714.
(21) MATTHEW ARMISTEAD COMPUTER & INFORMATION RESEARCH SCIE	37.50					X		175,191.	0.	10,500.
1b Subtotal								879,605.	7,748,911.	719,309.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								879,605.	7,748,911.	719,309.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 49

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
FISHER SCIENTIFIC CO LLC 13551 COLLECTIONS CTR DR, CHICAGO, IL 60693	RESEARCH SERVICES	2,531,448.
ADNET SYSTEMS INC, 6720B ROCKLEDGE DR STE 504, BETHESDA, MD 20817	IT SOLUTION/SERV	1,544,047.
CROTHALL FACILITIES MANAGEMENT INC, 1500 LIBERTY RIDGE DRIVE, STE 210, UKG INC	CONSTRUCTION	1,263,312.
1485 N PARK DRIVE, WESTON, FL 33326	PAYROLL PROCESSING	810,278.
HURON CONSULTING SERVICES LLC, 1925 NW AMBEGLEN PARKWAY, BEAVERTON, OR 97706	CONSULTING SERVICES	744,975.

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 128

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Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

				(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a						
	b Membership dues	1b						
	c Fundraising events	1c						
	d Related organizations	1d						
	e Government grants (contributions)	1e	145,343,452.					
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	14,577,996.					
	g Noncash contributions included in lines 1a-1f	1g	\$					
	h Total. Add lines 1a-1f			159921448.				
Program Service Revenue	2 a SCI RESEARCH & DEV SER	Business Code	541700	16,394,707.	15562201.	832,506.		
	b MISC FIN INVEST ACT		523000	9,722.		9,722.		
	c							
	d							
	e							
	f All other program service revenue							
	g Total. Add lines 2a-2f			16,404,429.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			1,298,852.			1298852.	
	4 Income from investment of tax-exempt bond proceeds							
	5 Royalties			252,838.			252,838.	
	6 a Gross rents	6a	(i) Real	58,773.				
			(ii) Personal					
	b Less: rental expenses ...	6b		0.				
	c Rental income or (loss)	6c		58,773.				
	d Net rental income or (loss)			58,773.			58,773.	
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	2,648,572.				
			(ii) Other					
	b Less: cost or other basis and sales expenses	7b		2,914,260.				
c Gain or (loss)	7c		-265,688.					
d Net gain or (loss)			-265,688.			-265,688.		
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a							
b Less: direct expenses	8b							
c Net income or (loss) from fundraising events								
9 a Gross income from gaming activities. See Part IV, line 19	9a							
b Less: direct expenses	9b							
c Net income or (loss) from gaming activities								
10 a Gross sales of inventory, less returns and allowances	10a							
b Less: cost of goods sold	10b							
c Net income or (loss) from sales of inventory								
Miscellaneous Revenue	11 a TRANSFER OF ASSETS	Business Code	900099	8,454,626.	8,454,626.			
	b							
	c							
	d All other revenue							
	e Total. Add lines 11a-11d			8,454,626.				
12 Total revenue. See instructions			186125278.	24016827.	842,228.	1344775.		

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RESEARCH CORPORATION**

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Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	30,649,136.	30,649,136.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	3,566,150.	3,566,150.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	84,665.	84,665.		
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	33,973,728.	32,636,614.	1,337,114.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,773,927.	1,700,180.	73,747.	
9 Other employee benefits	7,211,225.	6,911,435.	299,790.	
10 Payroll taxes	2,444,658.	2,343,908.	100,750.	
11 Fees for services (nonemployees):				
a Management				
b Legal	489,862.	1,722.	488,140.	
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	98,938.	564.	98,374.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)				
12 Advertising and promotion	277,196.	243,215.	33,981.	
13 Office expenses	1,958,123.	1,609,192.	348,931.	
14 Information technology	1,595,156.	920,051.	675,105.	
15 Royalties	11,068.		11,068.	
16 Occupancy	3,571,632.	3,477,930.	93,702.	
17 Travel	4,427,484.	4,326,862.	100,622.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	671,671.	623,255.	48,416.	
20 Interest	2,493,239.	1,717,589.	775,650.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	3,066,040.	3,042,575.	23,465.	
23 Insurance	454,518.	103,434.	351,084.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a SHARED SERVICES	59,340,583.	53,804,186.	5,536,397.	
b OPERATING EXP TO WVU	11,457,521.	10,632,672.	824,849.	
c RESEARCH/EDUC. SUPPLIES	10,041,927.	10,041,927.		
d				
e All other expenses	2,295,265.	1,147,330.	1,147,935.	
25 Total functional expenses. Add lines 1 through 24e	181,953,712.	169,584,592.	12,369,120.	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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**WEST VIRGINIA UNIVERSITY
RESEARCH CORPORATION**

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Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

		(A)			(B)	
		Beginning of year			End of year	
Assets	1 Cash - non-interest-bearing	27,570,079.	1		38,778,049.	
	2 Savings and temporary cash investments		2			
	3 Pledges and grants receivable, net	50,431,789.	3		50,483,506.	
	4 Accounts receivable, net		4			
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5			
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6			
	7 Notes and loans receivable, net	215,424.	7		2,145,772.	
	8 Inventories for sale or use		8			
	9 Prepaid expenses and deferred charges	379,292.	9		320,066.	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 104,839,378.				
	b Less: accumulated depreciation	10b 34,570,442.				
	11 Investments - publicly traded securities	68,211,148.	10c		70,268,936.	
	12 Investments - other securities. See Part IV, line 11	16,515,077.	11		17,678,426.	
	13 Investments - program-related. See Part IV, line 11		12			
	14 Intangible assets		13			
	15 Other assets. See Part IV, line 11		14			
16 Total assets. Add lines 1 through 15 (must equal line 33)	163,322,809.	15		179,674,755.		
Liabilities	17 Accounts payable and accrued expenses	31,224,649.	16		179,674,755.	
	18 Grants payable		17		38,021,767.	
	19 Deferred revenue		18			
	20 Tax-exempt bond liabilities	24,388,857.	19		25,073,278.	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		20			
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		21			
	23 Secured mortgages and notes payable to unrelated third parties	53,930,541.	22			
	24 Unsecured notes and loans payable to unrelated third parties		23		52,683,199.	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	287,752.	24			
	26 Total liabilities. Add lines 17 through 25	109,831,799.	25		5,061,767.	
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 27, 28, 32, and 33.		26		120,840,011.	
	27 Net assets without donor restrictions		27			
	28 Net assets with donor restrictions		28			
	Organizations that do not follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 29 through 33.					
	29 Capital stock or trust principal, or current funds	33,971,092.	29		35,480,179.	
	30 Paid-in or capital surplus, or land, building, or equipment fund	19,519,918.	30		23,354,565.	
	31 Retained earnings, endowment, accumulated income, or other funds	0.	31		0.	
	32 Total net assets or fund balances	53,491,010.	32		58,834,744.	
33 Total liabilities and net assets/fund balances	163,322,809.	33		179,674,755.		

Form **990** (2024)

Part XI Reconciliation 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	186,125,278.
2	Total expenses (must equal Part IX, column (A), line 25)	2	181,953,712.
3	Revenue less expenses. Subtract line 2 from line 1	3	4,171,566.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	53,491,010.
5	Net unrealized gains (losses) on investments	5	1,173,168.
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 on Schedule O)	9	-1,000.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	58,834,744.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	X
b Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input checked="" type="checkbox"/> Both consolidated and separate basis	2b	X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	2c	X
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? _____	3a	X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____	3b	X

Form 990 (2024)

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2024

Open to Public Inspection

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

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

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations 1
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
WEST VIRGINIA UNIV.	55-6000842	6	X		181,953,713.	
Total					181,953,713.	0.

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge ...						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources ...						
9 Net income from unrelated business activities, whether or not the business is regularly carried on ...						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f))	14	%
15 Public support percentage from 2023 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2024. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 33 1/3% support test - 2023. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2024. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2023 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2023 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2024. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2023. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>	X	
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		X
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		X
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		X
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		X
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		X
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		X
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		X
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		X
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		X
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		X
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		X
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		X
b A family member of a person described on line 11a above?		X
c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI .		X

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	X	

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
2 Activities Test. Answer lines 2a and 2b below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		
b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
3 Parent of Supported Organizations. Answer lines 3a and 3b below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI .		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		

WEST VIRGINIA UNIVERSITY
RESEARCH CORPORATION

Schedule A (Form 990) 2024

55-0665758 Page 6

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). See instructions.
All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Schedule A (Form 990) 2024

**WEST VIRGINIA UNIVERSITY
RESEARCH CORPORATION**

Schedule A (Form 990) 2024

55-0665758 Page 7

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	1
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4 Amounts paid to acquire exempt-use assets	4
5 Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6 Other distributions (describe in Part VI). See instructions.	6
7 Total annual distributions. Add lines 1 through 6.	7
8 Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9 Distributable amount for 2024 from Section C, line 6	9
10 Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1 Distributable amount for 2024 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2024 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2024			
a From 2019			
b From 2020			
c From 2021			
d From 2022			
e From 2023			
f Total of lines 3a through 3e			
g Applied to under distributions of prior years			
h Applied to 2024 distributable amount			
i Carryover from 2019 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2024 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2024 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2025. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2020			
b Excess from 2021			
c Excess from 2022			
d Excess from 2023			
e Excess from 2024			

Schedule A (Form 990) 2024

**Schedule B
(Form 990)**

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

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

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

Schedule B (Form 990) (Rev. 12-2024)

Name of organization WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION	Employer identification number 55-0665758
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<div style="background-color: black; height: 15px; width: 100%; margin-bottom: 5px;"></div> <div style="background-color: black; height: 15px; width: 100%; margin-bottom: 5px;"></div> <div style="background-color: black; height: 15px; width: 100%; margin-bottom: 5px;"></div>	\$ <u>14,577,996.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION	Employer identification number 55-0665758
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	

Name of organization WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION	Employer identification number 55-0665758
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ _____
 Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE C
(Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2024

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

For Organizations Exempt From Income Tax Under Section 501(c) and Section 527
Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes" on 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 I-B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and I-C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on 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" on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions), or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then:

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION	Employer identification number (EIN) 55-0665758
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

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

2 Political campaign activity expenditures \$ _____

3 Volunteer hours for political campaign activities _____

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

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

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

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

4a Was a correction made? Yes No

b If "Yes," describe in Part IV.

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

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

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

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

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

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

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

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

- A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)														
b Total lobbying expenditures to influence a legislative body (direct lobbying)														
c Total lobbying expenditures (add lines 1a and 1b)														
d Other exempt purpose expenditures														
e Total exempt purpose expenditures (add lines 1c and 1d)														
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">IF the amount on line 1e, column (a) or (b), is:</th> <th>THEN the lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	IF the amount on line 1e, column (a) or (b), is:	THEN the lobbying nontaxable amount is:	not over \$500,000	20% of the amount on line 1e.	over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	over \$17,000,000	\$1,000,000.		
IF the amount on line 1e, column (a) or (b), is:	THEN the lobbying nontaxable amount is:													
not over \$500,000	20% of the amount on line 1e.													
over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.													
over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.													
over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.													
over \$17,000,000	\$1,000,000.													
g Grassroots nontaxable amount (enter 25% of line 1f)														
h Subtract line 1g from line 1a. If zero or less, enter -0-														
i Subtract line 1f from line 1c. If zero or less, enter -0-														
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes	<input type="checkbox"/> No												

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(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))					
f Grassroots lobbying expenditures					

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		
c Media advertisements?		X	
d Mailings to members, legislators, or the public?	X		
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		55,856.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?		X	
j Total. Add lines 1c through 1i			55,856.
2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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

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

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

1 Dues, assessments, and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid):		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year?	4	
5 Taxable amount of lobbying and political expenditures. See instructions	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

PART II-B, LINE 1, LOBBYING ACTIVITIES:

LOBBYING ACTIVITIES CONSIST OF IDENTIFYING FEDERAL AND STATE FUNDED RESEARCH AND DEVELOPMENT PROGRAMS WHICH CAN BE PERFORMED BY RESEARCHERS AND STAFF UTILIZING THE LABORATORIES AND EQUIPMENT AVAILABLE TO THE ORGANIZATION. LOBBYING ACTIVITIES FOCUS UPON ENGINEERING, MEDICAL, AND ENERGY RELATED RESEARCH OPPORTUNITIES.

SCHEDULE D
(Form 990)

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

**Open to Public
Inspection**

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

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

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

Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

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

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included on line 2a	2c
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year _____

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year _____

8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

Yes No

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.

(i) Revenue included on Form 990, Part VIII, line 1 \$ _____

(ii) Assets included in Form 990, Part X \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 \$ _____

b Assets included in Form 990, Part X \$ _____

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) (Rev. 12-2024)

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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange program
 - e** Other _____
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

- 1a** Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|--|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment _____ %
 - b** Permanent endowment _____ %
 - c** Term endowment _____ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|---------------|----|
| (i) Unrelated organizations? | 3a(i) | |
| (ii) Related organizations? | 3a(ii) | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		4,535,339.		4,535,339.
b Buildings		86,077,303.	29,314,330.	56,762,973.
c Leasehold improvements				
d Equipment		2,711,522.	1,552,110.	1,159,412.
e Other		11,515,214.	3,704,002.	7,811,212.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				70,268,936.

Part VII Investments - Other Securities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))		

Part IX Other Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	

Part X Other Liabilities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DEFERRED GAIN ON REFUNDING	26,218.
(3) ACCRUED LIABILITIES	196,394.
(4) DEFERRED INFLOWS RELATED TO LEASES	416,790.
(5) DEFERRED INFLOWS RELATED TO LEASES - INTER-INSTITUTIONAL	1,492,106.
(6) LEASES PAYABLE - CURRENT PORTION	771,261.
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	5,061,767.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII...

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Total revenue reported as 186,125,278.

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Total expenses reported as 181,953,712.

Part XIII Supplemental Information

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

PART XI, LINE 2D - OTHER ADJUSTMENTS:

ROUNDING \$722

PART XII, LINE 2D - OTHER ADJUSTMENTS:

ROUNDING \$1288

**SCHEDULE F
(Form 990)**

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION	Employer identification number 55-0665758
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Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

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

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, 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 the region	(f) Total expenditures for and investments in the region
EUROPE	0	0	PROGRAM SERVICE	RESEARCH	18,573.
NORTH AMERICA	0	0	PROGRAM SERVICE	RESEARCH	29,779.
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICE	FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION	76,590.
EUROPE	0	0	PROGRAM SERVICE	FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION	182,581.
NORTH AMERICA	0	0	PROGRAM SERVICE	FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION	42,834.
SOUTH AMERICA	0	0	PROGRAM SERVICE	FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION	18,797.
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICE	FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION	8,376.
CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICE	FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION	20,210.
3 a Subtotal	0	0			397,740.
b Total from continuation sheets to Part I	0	0			1,815,767.
c Totals (add lines 3a and 3b)	0	0			2,213,507.

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

Schedule F (Form 990) (Rev. 12-2024)

WEST VIRGINIA UNIVERSITY
RESEARCH CORPORATION

Schedule F (Form 990)

55-0665758 Page 1

Part I Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3)

(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
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICE	FOREIGN TRAVEL RELATED TO RESEARCH/EDUCATION	5,821.
CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICE	OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION	58,684.
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICE	OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION	7,262.
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICE	OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION	142,402.
EUROPE	0	0	PROGRAM SERVICE	OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION	1,349,478.
NORTH AMERICA	0	0	PROGRAM SERVICE	OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION	177,676.
SOUTH AMERICA	0	0	PROGRAM SERVICE	OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION	9,000.
RUSSIA AND NEIGHBORING STATES	0	0	PROGRAM SERVICE	OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION	2,155.
SOUTH ASIA	0	0	PROGRAM SERVICES	OPERATING EXPENSES RELATED TO RESEARCH/EDUCATION	1,726.
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	RESEARCH	27,025.
Totals					

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on 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) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE	RESEARCH	18,573.	CHECK	0.		
		NORTH AMERICA	RESEARCH	29,779.	CHECK	0.		
		MIDDLE EAST AND NORTH AFRICA	RESEARCH	27,025.	CHECK	0.		
		EAST ASIA AND THE PACIFIC	RESEARCH	9,288.	CHECK	0.		

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

3 Enter total number of other organizations or entities

Part 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 the Instructions for Form 926)* Yes No

- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately 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 the Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes No

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

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

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

- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see the Instructions for Form 5713; don't file with Form 990)* Yes No

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.

PART I, LINE 2:

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.

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 PRIMARILY POSTED DIRECTLY TO THE STUDENT'S ACCOUNT OR PAID THROUGH ACCOUNTS PAYABLE. PAYMENTS POSTED TO THE STUDENT'S ACCOUNT ARE REVIEWED BY WVU STUDENT ACCOUNTS 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.

**SCHEDULE I
(Form 990)**

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

**Open to Public
Inspection**

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

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on 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.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
INTRACK RADAR TECHNOLOGIES INC 8610 EXPLORER DR STE 140 COLORADO SPRINGS, CO 80920	84-4253811		738,548.	0.	BOOK		RESEARCH
AERODYNE RESEARCH INC 45 MANNING ROAD BILLERICA, MA 01827	04-2471226	SECTION 115	282,130.	0.	BOOK		RESEARCH
BERKELEY MEDICAL CENTER 2500 HOSPITAL DRIVE MARTINSBURG, WV 25401	55-0383321	501(C)(3)	255,700.	0.	BOOK		RESEARCH
ARIZONA STATE UNIVERSITY BOX 873503 TEMPE, AZ 85287	86-0196696	SECTION 115	20,238.	0.	BOOK		RESEARCH
MCDOWELL COUNTY PUBLIC SERVICE DISTRICT - 21901 ROCKET BOYS DR - WELCH, WV 24801	55-0703078	SECTION 115	13,594.	0.	BOOK		PUBLIC SERVICE
CALHOUN COUNTY FAMILY RESOURCE NETWORK INC - PO BOX 620 - GRANTSVILLE, WV 26147	55-0775491	501(C)(3)	23,438.	0.	BOOK		RESEARCH

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 127.

3 Enter total number of other organizations listed in the line 1 table 24.

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

Schedule I (Form 990) (Rev. 12-2024)

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

WEST VIRGINIA UNIVERSITY
RESEARCH CORPORATION

Schedule I (Form 990)

55-0665758

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MERCER CO BD OF EDUCATION 1403 HONAKER AVE PRINCETON, WV 24740	55-6000358	SECTION 115	144,000.	0.	BOOK		RESEARCH
CABIN CREEK HEALTH SYSTEMS INC PO BOX 70 DAWES, WV 25054	55-0709223	501(C)(3)	632,882.	0.	BOOK		INSTRUCTION AND RESEARCH
CAMC HEALTH EDUCATION & RESEARCH INSTITUTE INC - PO BOX 1547 - CHARLESTON, WV 25304	55-0753754	501(C)(3)	611,385.	0.	BOOK		PUBLIC SERVICE AND RESEARCH
AYRES ASSOCIATES INC 3433 OAKWOOD HILLS PARKWAY EAU CLAIRE, WI 54701	39-0965082		14,832.	0.	BOOK		PUBLIC SERVICE
CAMDEN-ON-GAULEY MEDICAL CTR INC 10009 WEBSTER ROAD CAMDEN-ON-GAULEY, WV 26208	55-0592596	501(C)(3)	50,000.	0.	BOOK		RESEARCH
ELECTRIC POWER RESEARCH INSTITUTE INC - 3420 HILLVIEW AVENUE - PALO ALTO, CA 94304	23-7175375	501(C)(3)	272,120.	0.	BOOK		RESEARCH
RECONNECTING MCDOWELL INC 1610 WASHINGTON ST E STE 200 CHARLESTON, WV 25311	45-5298982	501(C)(3)	11,379.	0.	BOOK		PUBLIC SERVICE
EASTERN AREA HEALTH EDUCATION CENTER - 2500 FOUNDATION WAY - MARTINSBURG, WV 25401	35-2174239	501(C)(3)	93,313.	0.	BOOK		INSTRUCTION
REGENTS OF THE UNIVERSITY OF CALIFORNIA RIVERSIDE - 900 UNIVERSITY AVENUE - RIVERSIDE, CA 92521	95-6006142	SECTION 115	28,915.	0.	BOOK		RESEARCH

Schedule I (Form 990)

WEST VIRGINIA UNIVERSITY
RESEARCH CORPORATION

Schedule I (Form 990)

55-0665758

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FAYETTE CO HEALTH DEPT 5495 MAPLE LANE FAYETTEVILLE, WV 25840	55-6011279	SECTION 115	51,125.	0.	BOOK		RESEARCH
GRAFTON CITY HOSPITAL INC 1 HOSPITAL PLAZA GRAFTON, WV 26354	55-6000526	501(C)(3)	82,257.	0.	BOOK		RESEARCH
REGENTS UNIVERSITY OF CALIFORNIA LOS ANGELES - 7408 BOELTER HALL BOX 951600 - LAS ANGELES, CA 90095	95-6006143	SECTION 115	32,724.	0.	BOOK		RESEARCH
FLORIDA INSTITUTE OF TECHNOLOGY, INC - 150 W UNIVERSITY BLVD - MELBOURNE, FL 32901	59-6046500	501(C)(3)	421,027.	0.	BOOK		RESEARCH
GLENVILLE STATE COLLEGE RESEARCH CORP - 200 HIGH ST - GLENVILLE, WV 26351-1200	55-0713410	501(C)(3)	187,647.	0.	BOOK		INSTRUCTION, PUBLIC SERVICE & RESEARCH
BETHANY COLLEGE 31 E CAMPUS DRIVE BETHANY, WV 26032	55-0356985	501(C)(3)	12,800.	0.	BOOK		OTHER
COMMUNITY CONNECTIONS INC 215 S WALKER STREET PRINCETON, WV 24740	55-0740913	501(C)(3)	86,113.	0.	BOOK		RESEARCH
H QUEST VANGUARD INC 750 WILLIAM PITT WAY BLDG B11 PITTSBURGH, PA 15238	46-4604939		93,353.	0.	BOOK		RESEARCH
INDIANA UNIVERSITY 400 E 7TH ST ROOM 501 BLOOMINGTON, IN 47405	35-6001673	SECTION 115	23,593.	0.	BOOK		RESEARCH

Schedule I (Form 990)

WEST VIRGINIA UNIVERSITY
RESEARCH CORPORATION

Schedule I (Form 990)

55-0665758

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RHODE ISLAND HOSPITAL 593 EDDY STREET PROVIDENCE, RI 02903	05-0258954	501(C)(3)	343,283.	0.	BOOK		RESEARCH
CHILDREN'S HOSPITAL CORPORATION 300 LONGWOOD AVE BOSTON, MA 02115	04-2774441	501(C)(3)	24,845.	0.	BOOK		RESEARCH
LIBRARY OF VIRGINIA 800 E BROAD STREET RICHMOND, VA 23219-1905	54-6001813	SECTION 115	41,598.	0.	BOOK		RESEARCH
MALACHITE TECHNOLOGIES INC 2262 PALOU AVENUE SAN FRANCISCO, CA 94124	27-3227538		421,555.	0.	BOOK		RESEARCH
MARSHALL UNIV RESEARCH CORP ONE JOHN MARSHALL DRIVE HUNTINGTON, WV 25755	55-0683361	501(C)(3)	2,304,885.	0.	BOOK		PUBLIC SERVICE, RESEARCH, AND OTHER
MICHIGAN STATE UNIV 426 AUDITORIUM ROAD, ROOM 360 EAST LANSING, MI 48824	38-6005984	SECTION 115	87,309.	0.	BOOK		RESEARCH
MID OHIO VALLEY HEALTH DEPT 211 SIXTH STREET PARKERSBURG, WV 26101	55-0619203	SECTION 115	24,529.	0.	BOOK		PUBLIC SERVICE & RESEARCH
CHILDREN'S HOSPITAL OF ORANGE COUNTY - 1201 WEST LA VEST AVENUE - ORANGE, CA 92868	95-2321786	501(C)(3)	19,305.	0.	BOOK		RESEARCH
RUTGERS THE STATE UNIV OF NEW JERSEY - 33 KNIGHTSBRIDGE RD C281 - PISCATAWAY, NJ 08854	22-6001086	501(C)(3)	43,922.	0.	BOOK		RESEARCH

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NEW RIVER HEALTH ASSOCIATION INC PO BOX 337 SCARBRO, WV 25917-0337	55-0581968	501(C)(3)	70,000.	0.	BOOK		RESEARCH
NORTH CAROLINA STATE UNIV PO BOX 7605 RALEIGH, NC 27695	56-6000756	SECTION 115	261,588.	0.	BOOK		RESEARCH
COLORADO SCHOOL OF MINES PO BOX 735377 DALLAS, TX 75373	84-6000551	SECTION 115	7,128.	0.	BOOK		RESEARCH
NORTHWOOD HEALTH SYSTEMS INC PO BOX 6400 WHEELING, WV 26003	55-0540374	501(C)(3)	178,809.	0.	BOOK		RESEARCH
MAINEHEALTH 22 BRAMHALL STREET PORTLAND, ME 04102	01-0238552	501(C)(3)	188,661.	0.	BOOK		PUBLIC SERVICE AND RESEARCH
MILAN PUSKAR HEALTH RIGHT INC 341 SPRUCE STREET MORGANTOWN, WV 26507-1519	31-1118673	501(C)(3)	66,738.	0.	BOOK		RESEARCH
MINNIE HAMILTON HEALTH CARE CENTER INC - 186 HOSPITAL DRIVE - GRANTSVILLE, WV 26147	55-0629032	501(C)(3)	109,520.	0.	BOOK		PUBLIC SERVICE AND RESEARCH
RESEARCH FOUNDATION OF SUNY PO BOX 9 ALBANY, NY 12201-0009	14-1368361	501(C)(3)	46,979.	0.	BOOK		RESEARCH
TAMKO GROUP LLC 1718 DOGWOOD DR MARCO ISLAND, FL 34145	81-2352871		119,371.	0.	BOOK		RESEARCH

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CONCORD UNIV PO BOX 1000 ATHENS, WV 24712	55-6000761	SECTION 115	25,437.	0.	BOOK		RESEARCH
THE STRATAGEM GROUP LLC 3855 LEWISTON ST STE 250 AURORA, CO 80111	26-3933626		3,325,000.	0.	BOOK		RESEARCH
SHEPHERD UNIVERSITY PO BOX 5000 SHEPHERDSTOWN, WV 25443-5000	55-6000799	SECTION 115	27,000.	0.	BOOK		RESEARCH AND OTHER
THE GEORGE WASHINGTON UNIVERSITY 45155 RESEARCH PL 260 ASHBURN, VA 20147-4198	53-0196584	501(C)(3)	223,277.	0.	BOOK		RESEARCH
DOWNSTREAM STRATEGIES LLC 295 HIGH ST STE 3 MORGANTOWN, WV 26505-3408	37-1418095		7,023.	0.	BOOK		PUBLIC SERVICES
UNITED SUMMIT CENTER INC 6 HOSPITAL PLAZA CLARKSBURG, WV 26301-9316	55-0752788	501(C)(3)	50,000.	0.	BOOK		RESEARCH
EMORY UNIVERSITY 1599 CLIFTON ROAD THIRD FLOOR 3101 ATLANTA, GA 30322	58-0566256	501(C)(3)	14,679.	0.	BOOK		RESEARCH
FAIRMONT STATE UNIV 1201 LOCUST AVE FAIRMONT, WV 26554	55-6000778	SECTION 115	17,000.	0.	BOOK		RESEARCH
UNIV OF PITTSBURGH 116 ATWOOD STREET SUITE 201 PITTSBURGH, PA 15600	25-0965591	SECTION 115	82,481.	0.	BOOK		RESEARCH

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FRIENDS OF DECKERS CREEK INC PO BOX 877 DELLSLOW, WV 26531	55-0775859	501(C)(3)	7,010.	0.	BOOK		OTHER
FRIENDS OF THE CHEAT INC 1343 NORTH PRESTON HIGHWAY KINGWOOD, WV 26537-1442	55-0739158	501(C)(3)	45,922.	0.	BOOK		RESEARCH
UNIVERSITY OF ARKANSAS AT LITTLE ROCK - 2801 S UNIVERSITY AVENUE - LITTLE ROCK, AR 72204	71-0236904	SECTION 115	23,434.	0.	BOOK		RESEARCH
TMC TECHNOLOGIES OF WEST VIRGINIA CORP - 2050 WINNERS DR - FAIRMONT, WV 26554	27-1812321		105,844.	0.	BOOK		RESEARCH
UNIVERSITY OF NORTH DAKOTA PO BOX 8373 GRAND FORKS, ND 58202	45-6002491	SECTION 115	211,298.	0.	BOOK		PUBLIC SERVICE AND RESEARCH
UNIV OF CALIFORNIA DAVIS OLD DAVIS RD DAVIS, CA 95616	94-6036494	SECTION 115	196,694.	0.	BOOK		RESEARCH
UNIV OF GEORGIA RESEARCH FOUNDATION INC - 324 BUSINESS SRVCS 456 E BROAD ST - ATHENS, GA 30602	58-1353149	501(C)(3)	82,799.	0.	BOOK		RESEARCH
EUREKA SCIENTIFIC INC 2452 DELMER STOAKLAND, CA 94602	94-3160967		8,337.	0.	BOOK		RESEARCH
UCHICAGO ARGONNE LLC 5801 S ELLIS AVE CHICAGO, IL 60637	36-2177139	501(C)(3)	50,000.	0.	BOOK		RESEARCH

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UNIV OF MISSISSIPPI MEDICAL CENTER 2500 N STATE STREET JACKSON, MS 39216-4505	64-6008520	SECTION 115	160,022.	0.	BOOK		PUBLIC SERVICE AND RESEARCH
UNIV OF KY RESEARCH FOUNDATION 301 PETERSON SERVICE BLDG LEXINGTON, KY 40506	61-6033693	501(C)(3)	176,003.	0.	BOOK		PUBLIC SERVICE AND RESEARCH
UNIVERSITY OF OKLAHOMA 2750 VENTURE DR NORMAN, OK 73069	73-1377584	SECTION 115	95,750.	0.	BOOK		RESEARCH
UNIVERSITY OF GEORGIA 141 FOUR TOWERS BLDG 405 COLLEGE ST ATHENS, GA 30602	58-6001998	SECTION 115	6,720.	0.	BOOK		PUBLIC SERVICE AND RESEARCH
UT BATTELLE LLC 1 BETHEL VALLEY RD PO BOX 2008 MS64 OAK RIDGE, TN 37831-6437	62-1788235	501(C)(3)	315,636.	0.	BOOK		RESEARCH
WEST VIRGINIA STATE UNIVERSITY PO BOX 368 INSTITUTE, WV 25112-0368	55-6000839	SECTION 115	29,000.	0.	BOOK		RESEARCH & OTHER
UNIV OF NOTRE DAME 257 FITZPATRICK HALL OF ENGINEERING NOTRE DAME, IN 46556	35-0868188	501(C)(3)	546,820.	0.	BOOK		RESEARCH
WASHINGTON STATE UNIVERSITY PO BOX 641025 PULLMAN, WA 99164-1024	91-6001108	SECTION 115	105,309.	0.	BOOK		RESEARCH
UNIV OF TENNESSEE 201 ANDY HOLT TOWER KNOXVILLE, TN 37996-0100	62-6001636	SECTION 115	380,188.	0.	BOOK		PUBLIC SERVICE AND RESEARCH

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UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES - 4301 WEST MARKHAM STREET - LITTLE ROCK, AR 72205	71-6046242	SECTION 115	56,708.	0.	BOOK		RESEARCH
UNIV OF WASHINGTON 4333 BROOKLYN AVE NE PO BOX 359472 SEATTLE, WA 98195-9472	91-6001537	SECTION 115	17,623.	0.	BOOK		RESEARCH
GAMMA TECHNOLOGIES LLC 601 OAKMONT LANE STE 220 WESTMONT, IL 60559	36-3959691		290,317.	0.	BOOK		RESEARCH
WILLIAMSON HEALTH & WELLNESS CENTER INC - PO BOX 2080 - WILLIAMSON, WV 25661	45-2849701	501(C)(3)	157,541.	0.	BOOK		INSTRUCTION AND RESEARCH
UNIVERSITY OF HAWAII 2440 CAMPUS ROAD BOX 368 HONOLULU, HI 96822	99-6000354	SECTION 115	417,270.	0.	BOOK		RESEARCH
UNIVERSITY OF KANSAS CENTER FOR RESEARCH INC - 1450 JAYHAWK BLVD ROOM 245 - LAWRENCE, KS 66045-7568	48-0680117	501(C)(3)	21,007.	0.	BOOK		RESEARCH
GE HEALTHCARE TECHNOLOGY & INNOVATION CENTER - 1 RESEARCH CIRCLE BLDG K-1 507 - NISKAYUNA, NY 12309	39-1046671		34,876.	0.	BOOK		RESEARCH
UNIVERSITY OF NEW HAVEN INCORPORATED - 300 BOSTON POST ROAD - WEST HAVEN, CT 06516	06-0761704	501(C)(3)	12,001.	0.	BOOK		RESEARCH
WEST VIRGINIA FOOD AND FARM COALITION INC - 3820 MACCORKLE AVE SE - CHARLESTON, WV 25304	46-2706460	501(C)(3)	180,979.	0.	BOOK		PUBLIC SERVICE

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GE VERNOVA OPERATIONS LLC 58 CHARLES ST CAMBRIDGE, MA 02141	92-2646542		522,500.	0.	BOOK		RESEARCH
VIRGINIA POLYTECHNIC INST & STATE UNIV - 201 SOUTHGATE CTR - BLACKSBURG, VA 24061	54-6001805	SECTION 115	495,686.	0.	BOOK		PUBLIC SERVICE AND RESEARCH
GUARDIANS OF THE WEST FORK WATERSHED - 3450 BUCKHANNON PIKE - MOUNT CLARE, WV 26408	55-0784772	501(C)(3)	6,952.	0.	BOOK		RESEARCH
APPLIED RESEARCH FOUNDATION OF WEST VIRGINIA - 219 ROCK STREET - BLUEFIELD, WV 24701	84-2384597		10,000.	0.	BOOK		RESEARCH AND OTHER
WEST LIBERTY UNIVERSITY 208 UNIVERSITY DRIVE WEST LIBERTY, WV 26074-0295	55-6000822	SECTION 115	109,612.	0.	BOOK		RESEARCH AND OTHER
HICKORY NUT GAP MEATS LLC 57 SUGAR HOLLOW RD FAIRVIEW, NC 28730	47-2616320		5,524.	0.	BOOK		PUBLIC SERVICE
WORCESTER POLYTECHNIC INSTITUTE 100 INSTITUTE ROAD WORCESTER, MA 01609	04-2121659	501(C)(3)	48,398.	0.	BOOK		RESEARCH
XORAN TECHNOLOGIES LLC 5210 S STATE ROAD ANN ARBOR, MI 48108	90-1033421		28,993.	0.	BOOK		RESEARCH
BOISE STATE UNIVERSITY 1910 UNIVERSITY DRIVE BOISE, ID 83725	56-0641460	SECTION 115	166,107.	0.	BOOK		PUBLIC SERVICE, RESEARCH, AND INSTRUCTION

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WV SCHOOL OF OSTEOPATHIC MEDICINE 400 N LEE STREET LEWISBURG, WV 24901-1128	55-0561541	SECTION 115	362,051.	0.	BOOK		RESEARCH
WVSU RESEARCH & DEVELOPMENT CORP PO BOX 1000 ACEOP ADMIN BUILDING INSTITUTE, WV 25112	55-0708567	501(C)(3)	142,177.	0.	BOOK		PUBLIC SERVICE AND RESEARCH
WVU PARKERSBURG 300 CAMPUS DR PARKERSBURG, WV 26104	55-0523820	SECTION 115	105,821.	0.	BOOK		PUBLIC SERVICE
UNIVERSITY OF ARKANSAS SYSTEM TREASURER'S OFFICE PO BOX 1404 FAYETTEVILLE, AR 72702	71-6003252	SECTION 115	40,439.	0.	BOOK		RESEARCH
WEST VIRGINIA UNIVERSITY PO BOX 6201 MORGANTOWN, WV 26506	55-6000842	SECTION 115	7,455,756.	0.	BOOK		EXPENDITURES ON GRANTS AWARDED TO WVURC ON BEHALF OF WVU FOR ACQUISITION OF CAPITAL
APPALACHIAN COMMUNITY HEALTH CENTER - 725 YOKUM STREET - ELKINS, WV 26241	55-0483699	501(C)(3)	79,539.	0.	BOOK		RESEARCH
HIGH ROCKS EDUCATIONAL CORPORATION 195 THOMPSON ROAD HILLSBORO, WV 24946	55-0743755	501(C)(3)	38,098.	0.	BOOK		RESEARCH
CATHOLIC UNIVERSITY OF AMERICA 620 MICHIGAN AVE NE LEAHY 162 WASHINGTON, DC 20064	53-0196583	501(C)(3)	41,257.	0.	BOOK		RESEARCH
GENERAL ELECTRIC COMPANY 3000 N GRANDVIEW BLVD WAUKESHA, WI 53188	14-0689340		129,572.	0.	BOOK		RESEARCH

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CARNEGIE MELLON UNIV 5000 FORBES AVE PITTSBURGH, PA 15213	25-0969449	501(C)(3)	43,965.	0.	BOOK		RESEARCH
THE BOARD OF REGENTS OF THE UNIVERSITY OF NEBRASKA - 3835 HOLDREGE STREET - LINCOLN, NE 68583-0742	47-0049123	501(C)(3)	61,138.	0.	BOOK		PUBLIC SERVICE AND RESEARCH
KLEINFELDER INC PO BOX 51958 LOS ANGELES, CA 90051	94-1532513		13,282.	0.	BOOK		PUBLIC SERVICE
CENTER FOR RURAL HEALTH DEVELOPMENT INC - 75 CHASE DR - HURRICANE, WV 25526	55-0729764	501(C)(3)	120,096.	0.	BOOK		PUBLIC SERVICE AND RESEARCH
BATTELLE MEMORIAL INSTITUTE 505 KING AVENUE COLUMBUS, OH 43260	31-4379427	501(C)(3)	21,564.	0.	BOOK		RESEARCH
CLEMSON UNIV 238 POOLE AGRICULTURE CTR CLEMSON, SC 29634-0753	57-6000254	SECTION 115	231,861.	0.	BOOK		RESEARCH
BOARD OF REGENTS OF THE UNIVERSITY OF OKLAHOMA HEALTH SCIENCES CENTER - PO BOX 26901 RP865 STE 560 - OKLAHOMA CITY, OK 73126-0901	73-1563627	SECTION 115	314,271.	0.	BOOK		PUBLIC SERVICE AND RESEARCH
CASA FOR CHILDREN INC 1224 CHAPLINE STREET WHEELING, WV 26003	27-0906338	501(C)(3)	23,708.	0.	BOOK		RESEARCH
EAST TENNESSEE STATE UNIV 1276 GILBREATH DR JOHNSON CITY, TN 37614	62-6021046	SECTION 115	14,966.	0.	BOOK		RESEARCH

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LINCOLN COUNTY PRIMARY CARE CENTER INC - 7400 LYNN AVENUE - HAMLIN, WV 25523	55-0552212	501(C)(3)	106,500.	0.	BOOK		RESEARCH
CLARKSON UNIVERSITY PO BOX 5546 8 CLARKSON AVE POTSDAM, NY 13699-5546	15-0543659	501(C)(3)	23,496.	0.	BOOK		RESEARCH
L3 PROCESS DEVELOPMENT LLC 11568 BOTTOM CREEK RD BENT MOUNTAIN, VA 24059	92-2659111		5,488.	0.	BOOK		RESEARCH
NEXTECH MATERIALS LTD 404 ENTERPRISE DRIVE LEWIS CENTER, OH 43035	31-1441978		55,912.	0.	BOOK		RESEARCH
NORTH DAKOTA STATE UNIVERSITY PO BOX 6050 FARGO, ND 58108	45-6002439	SECTION 115	11,607.	0.	BOOK		RESEARCH
MOUNTAIN STATE OSTEOPATHIC POSTDOCTORAL TRAINING INSTITUTIONS INC - 400 LEE STREET NORTH - LEWISBURG, WV 24901	55-0763235	501(C)(3)	110,494.	0.	BOOK		INSTRUCTION
PENNSYLVANIA STATE UNIV 409 BUSINESS ADMIN BLDG UNIVERSITY PARK, PA 16802	24-6000376	SECTION 115	21,179.	0.	BOOK		RESEARCH
MASSACHUSETTS INSTITUTE OF TECHNOLOGY - 77 MASSACHUSETTS AVENUE - CAMBRIDGE, MA 02139	04-2103594	501(C)(3)	250,393.	0.	BOOK		RESEARCH
UNIVERSITY OF NORTH TEXAS HEALTH SCIENCE CENTER - 3500 CAMP BOWIE BLVD - FORT WORTH, TX 76107	75-6064033	501(C)(3)	87,875.	0.	BOOK		RESEARCH

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POTOMAC VALLEY HOSPITAL OF WV INC 100 PINE OAK LANE KEYSER, WV 26726	55-0420956	501(C)(3)	9,409.	0.	BOOK		RESEARCH
REGENTS OF THE UNIVERSITY OF CALIFORNIA - PO BOX 743739 - LOS ANGELES, CA 90074	94-6036494	SECTION 115	13,475.	0.	BOOK		RESEARCH
PRESTON MEMORIAL HOSPITAL CORP 150 MEMORIAL DRIVE KINGWOOD, WV 26537-1442	31-1097818	501(C)(3)	83,213.	0.	BOOK		RESEARCH
REGENTS OF THE UNIVERSITY OF COLORADO - 1800 GRANT ST STE 600 - DENVER, CO 80203	84-6000555	SECTION 115	87,959.	0.	BOOK		RESEARCH
RESEARCH TRIANGLE INSTITUTE PO BOX 12194 RESEARCH TRIANGLE PARK, NC 27709-2194	56-0686338	501(C)(3)	114,034.	0.	BOOK		RESEARCH
RITCHIE COUNTY PRIMARY CARE ASSOC INC - 135 SOUTH PENN AVENUE - HARRISVILLE, WV 26362	55-0737963	501(C)(3)	59,080.	0.	BOOK		RESEARCH
REGENTS UNIV OF CALIFORNIA 2150 SHATTUCK AVE STE 300 BERKELEY, CA 94704	94-6002123	SECTION 115	43,871.	0.	BOOK		RESEARCH
RURAL HEALTH ACCESS CORPORATION 386 AIRPORT ROAD CHAPMANVILLE, WV 25508	26-4389073	501(C)(3)	50,890.	0.	BOOK		PUBLIC SERVICE
TRINITY FAMILY HEALTH CARE LLC 1 SOUTH MARSHAM STREET ROMNEY, WV 26757	47-1985943		150,000.	0.	BOOK		RESEARCH

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SLIPPERY ROCK UNIV OF PENNSYLVANIA 104 OLD MAIN SLIPPERY ROCK, PA 16057	25-1513539	SECTION 115	19,727.	0.	BOOK		RESEARCH
SYNTERRA CORPORATION 148 RIVER ST, STE 220 GREENVILLE, SC 29601	57-0962660		21,595.	0.	BOOK		RESEARCH
THE REGENTS OF THE UNIVERSITY OF CALIFORNIA - 1608 FOURTH STREET SUITE 201 - BERKELEY, CA 94710-1103	94-6002123	SECTION 115	148,464.	0.	BOOK		RESEARCH
THE UNIVERSITY OF CENTRAL FLORIDA BOARD OF TRUSTEES - 12424 RESEARCH PARKWAY STE 300 - ORLANDO, FL 32826	59-2924021	SECTION 115	274,055.	0.	BOOK		RESEARCH
WESTED 730 HARRISON STREET SAN FRANCISCO, CA 94107	94-3233542		9,431.	0.	BOOK		RESEARCH
WV GEOLOGICAL & ECONOMIC SURVEY 1 MONT CHATEAU RD MORGANTOWN, WV 26508-8079	55-6000936	SECTION 115	31,202.	0.	BOOK		RESEARCH
SOUTH DAKOTA STATE UNIVERSITY BOX 2201 BROOKINGS, SD 57007	46-6000364	SECTION 115	12,000.	0.	BOOK		RESEARCH
TEXAS BIOMEDICAL RESEARCH INSTITUTE - PO BOX 760549 - SAN ANTONIO, TX 78245	74-1109630	501(C)(3)	61,940.	0.	BOOK		RESEARCH
THE MEDICAL COLLEGE OF WISCONSIN INC - 8701 WATERTOWN PLANK ROAD - MILWAUKEE, WI 53226	39-0806261	501(C)(3)	226,476.	0.	BOOK		RESEARCH

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHICO STATE ENTERPRISES 25 MAIN STREET 203 CHICO, CA 95929-5388	68-0386518	501(C)(3)	120,385.	0.	BOOK		RESEARCH
CONVERGENT SCIENCE INC 6400 ENTERPRISE LN MADISON, WI 53719	39-1924324		69,600.	0.	BOOK		RESEARCH
EVERETT MCKINLEY DIRKSEN ENDOWMENT FUND - 2815 BROADWAY - PEKIN, IL 61554	36-6132816	501(C)(3)	59,760.	0.	BOOK		RESEARCH
THE REGENTS OF THE UNIVERSITY OF MICHIGAN - 3003 S STATE ST - ANN ARBOR, MI 48109	38-6006309	SECTION 115	53,566.	0.	BOOK		RESEARCH
UNIVERSITY OF ARIZONA 1303 E UNIVERSITY BLVD BOX 5 TUCSON, AZ 85719	74-2652689	SECTION 115	17,503.	0.	BOOK		RESEARCH
THE UNIVERSITY OF NEBRASKA MEDICAL CENTER - 985045 NEBRASKA MEDICAL CENTER - OMAHA, NE 68198	47-0049123	SECTION 115	99,255.	0.	BOOK		RESEARCH
UNIVERSITY OF DELAWARE 30 LOVETT AVE NEWARK, DE 19716	51-6000297	SECTION 115	212,087.	0.	BOOK		PUBLIC SERVICE & RESEARCH
UNIVERSITY OF KANSAS MEDICAL CENTER RESEARCH INSTITUTE INC - 3901 RAINBOW BLVD MAILSTOP 1039 - KANSAS CITY, KS 66160	48-1108830	501(C)(3)	63,787.	0.	BOOK		RESEARCH
UNIVERSITY OF KENTUCKY RESEARCH FOUNDATION - 301 PETERSON SERVICE BUILDING - LEXINGTON, KY 40506	61-6033693	501(C)(3)	136,997.	0.	BOOK		PUBLIC SERVICE

Schedule I (Form 990)

WEST VIRGINIA UNIVERSITY
RESEARCH CORPORATION

Schedule I (Form 990)

55-0665758

Page 1

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF LOUISVILLE RESEARCH FOUNDATION INC - 2215 S BROOK STREET - LOUISVILLE, KY 40208	61-1029626	501(C)(3)	13,057.	0.	BOOK		RESEARCH
UNIVERSITY OF PUERTO RICO MEDICAL SCIENCES CAMPUS - PO BOX 365067 - SAN JUAN, PUERTO RICO, PUERTO RICO 00936	66-0433762	SECTION 115	249,406.	0.	BOOK		RESEARCH
UNIVERSITY OF SOUTH CAROLINA UNIV 101 1728 COLLEGE ST COLUMBIA, SC 29208	57-6001153	SECTION 115	58,039.	0.	BOOK		RESEARCH
UNIVERSITY OF VERMONT AND STATE AGRICULTURAL COLLEGE - 217 WATERMAN 85 S PROSPECT ST - BURLINGTON, VT 05405	03-0179440	SECTION 115	163,785.	0.	BOOK		RESEARCH
VIRGINIA STATE UNIVERSITY 1 HAYDEN DR PETERSBURG, VA 23806	54-6001811	SECTION 115	49,292.	0.	BOOK		PUBLIC SERVICE
WEBER STATE UNIV 1014 UNIVERSITY CIRCLE OGDEN, UT 84408	87-6000535	SECTION 115	29,289.	0.	BOOK		PUBLIC SERVICE
WESTBROOK HEALTH SERVICES INC 2121 7TH ST PARKERSBURG, WV 26101	55-0484662	501(C)(3)	44,914.	0.	BOOK		RESEARCH
WV WESLEYAN COLLEGE 59 COLLEGE AVE BUCKHANNON, WV 26201	55-0357056	501(C)(3)	15,850.	0.	BOOK		OTHER
UNIVERSITY OF WISCONSIN SYSTEM BOARD OF REGENTS PO BOX 500 MILWAUKEE, WI 53201	39-1805963	SECTION 115	66,140.	0.	BOOK		RESEARCH

Schedule I (Form 990)

WEST VIRGINIA UNIVERSITY

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
EDUCATIONAL GRANTS TO STUDENTS	0	2,999,180.	0.	BOOK	
EDUCATIONAL GRANTS TO INDIVIDUALS	0	566,970.	0.	BOOK	

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

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.

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 PRIMARILY POSTED DIRECTLY TO THE STUDENT'S ACCOUNT OR PAID THROUGH ACCOUNTS PAYABLE. PAYMENTS POSTED TO THE STUDENT'S ACCOUNT ARE REVIEWED BY WVU STUDENT ACCOUNTS 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

**SCHEDULE J
(Form 990)**

(Rev. December 2024)
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" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public
Inspection

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

Part I Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account <input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (such as maid, chauffeur, chef)		
b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	
3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. <input type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations <input type="checkbox"/> Written employment contract <input type="checkbox"/> Compensation survey or study <input type="checkbox"/> Approval by the board or compensation committee		
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:		
a Receive a severance payment or change-of-control payment?	4a	X
b Participate in or receive payment from a supplemental nonqualified retirement plan?	4b	X
c Participate in or receive payment from an equity-based compensation arrangement?	4c	X
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a The organization?	5a	X
b Any related organization?	5b	X
If "Yes" on line 5a or 5b, describe in Part III.		
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a The organization?	6a	X
b Any related organization?	6b	X
If "Yes" on line 6a or 6b, describe in Part III.		
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	7	X
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	X
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

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

Schedule J (Form 990) (Rev. 12-2024)

WEST VIRGINIA UNIVERSITY

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 on 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 aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) E. GORDON GEE DIRECTOR	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	765,366.	1,200,000.	49,987.	20,700.	10,314.	2,046,367.	0.
(2) CLAY MARSH EXECUTIVE DIRECTOR	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	923,263.	239,220.	32,928.	20,700.	7,481.	1,223,592.	0.
(3) PAULA CONGELIO DIRECTOR	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	357,152.	36,500.	30,500.	59,200.	360.	483,712.	0.
(4) MING LEI DIRECTOR	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	414,713.	0.	30,500.	20,700.	12,258.	478,171.	0.
(5) MARYANNE REED FORMER DIRECTOR	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	383,797.	0.	33,089.	25,210.	9,540.	451,636.	0.
(6) PAUL KREIDER DIRECTOR	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	392,567.	0.	118.	20,700.	18,685.	432,070.	0.
(7) EARL SCIME FORMER DIRECTOR	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	332,891.	48,349.	17,275.	22,536.	8,621.	429,672.	0.
(8) STEPHANIE TAYLOR DIRECTOR	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	318,017.	29,488.	1,346.	20,700.	25,977.	395,528.	0.
(9) BARBARA WEISS TREASURER	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	294,732.	48,038.	331.	20,700.	17,631.	381,432.	0.
(10) PEDRO J MAGO DIRECTOR	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	339,704.	0.	71.	20,700.	18,347.	378,822.	0.
(11) MAURA MCLAUGHLIN DIRECTOR	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	287,153.	0.	0.	17,730.	18,942.	323,825.	0.
(12) FRED KING EXECUTIVE DIRECTOR	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	287,329.	0.	0.	17,465.	11,538.	316,332.	0.
(13) J. ROBERT ALSOP FORMER EXECUTIVE DIRECTOR	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	286,509.	0.	6.	16,611.	6.	303,132.	0.
(14) SAMUEL TAYLOR GENERAL OPERATIONS MANAGER	(i)	173,379.	0.	1,323.	11,160.	44,907.	230,769.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(15) MATTHEW TENAN GENERAL & OPERATIONS MANAG	(i)	181,332.	0.	0.	11,520.	35,226.	228,078.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(16) DAVID KOSSLOW ASSOCIATE TREASURER	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	185,131.	0.	3,828.	12,115.	25,963.	227,037.	0.

WEST VIRGINIA UNIVERSITY

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 on 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 aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(17) KATIE STORES SECRETARY	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	210,960.	0.	0.	12,658.	0.	223,618.	0.
(18) SHELLEY WELCH GENERAL & OPERATIONS MANAG	(i)	182,628.	0.	0.	11,236.	27,269.	221,133.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(19) JOSEPH PEAL GENERAL & OPERATIONS MANAG	(i)	165,752.	0.	0.	10,500.	33,184.	209,436.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(20) ROSSI WILES OFFICER	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	159,524.	0.	8,529.	10,303.	11,436.	189,792.	0.
(21) MATTHEW ARMISTEAD COMPUTER & INFORMATION RESEARCH SCIE	(i)	175,191.	0.	0.	10,500.	1,705.	187,396.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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.

PART I, LINE 3:

CLAY MARSH AS THE CEO/EXECUTIVE DIRECTOR DURING FISCAL YEAR 2025, IS NOT PAID BY THE WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION (RC) BUT IS PAID BY WEST VIRGINIA UNIVERSITY (WVU), A RELATED ORGANIZATION. COMPENSATION IS DETERMINED BY WVU THROUGH THE USE OF SEVERAL FACTORS INCLUDING JOB ANALYSIS AND EVALUATION, THE ESSENTIAL DUTIES AND RESPONSIBILITIES OF THE POSITION, AND SALARY SURVEY DATA ON PAY PRACTICES. WVU PERIODICALLY REVIEWS THE SALARY ADMINISTRATION PROGRAM AND RESTRUCTURES IT AS NECESSARY. MARKET AND/OR COMPETENCY BASED ADJUSTMENTS MAY BE WARRANTED BASED ON EMPLOYMENT FUNCTIONS, AS DETERMINED BY A CLASSIFICATION REVIEW. IN ADDITION, EMPLOYEES MAY BE AWARDED MERIT-BASED PAY ADJUSTMENTS IN CONJUNCTION WITH SUPERIOR PERFORMANCE.

**SCHEDULE O
(Form 990)**

(Rev. December 2024)
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 990-EZ or to provide any additional information.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization	WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION	Employer identification number	55-0665758
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FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

IN 1985, THE WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION (RESEARCH CORPORATION) WAS CREATED IN ACCORDANCE WITH WEST VIRGINIA STATE LAW AND WITH THE EXPRESSED PURPOSE TO FOSTER AND SUPPORT RESEARCH AT WEST VIRGINIA UNIVERSITY (UNIVERSITY).

THE RESEARCH CORPORATION IS ORGANIZED EXCLUSIVELY FOR CHARITABLE, EDUCATIONAL, AND SCIENTIFIC PURPOSES, INCLUDING FOR SUCH PURPOSES:

- (1) TO FOSTER AND SUPPORT RESEARCH AT WEST VIRGINIA UNIVERSITY; AND
- (2) TO PROVIDE EVALUATION, DEVELOPMENT, PATENTING, MANAGEMENT, AND MARKETING SERVICES FOR INVENTIONS BY THE FACULTY, STAFF, AND STUDENTS OF WEST VIRGINIA UNIVERSITY.

RESEARCH IS AN INTEGRAL PART OF THE UNIVERSITY'S MISSION AND THE RESEARCH CORPORATION FACILITATES THIS MISSION THROUGH ITS ROLE AS A FISCAL AGENT FOR SPONSORED PROJECTS. THE RESEARCH CORPORATION ALSO USES ITS UNIQUE STATUS TO MAXIMIZE THE EFFECTIVENESS OF TECHNOLOGY TRANSFER IN ADDITION TO ITS ECONOMIC AND BUSINESS DEVELOPMENT FUNCTIONS. ONE IMPORTANT INDICATION OF THIS SUCCESS IS THE UNIVERSITY'S CLASSIFICATION AS AN R1, DOCTORAL UNIVERSITY - HIGHEST RESEARCH ACTIVITY, BY THE CARNEGIE FOUNDATION. CURRENTLY, THERE ARE 187 INSTITUTIONS RECOGNIZED AS AN R1 INSTITUTION AND 135 OF THEM ARE PUBLIC. WVU HAS MAINTAINED A CARNEGIE R1 STATUS SINCE 2016. SPONSORED AWARD EXPENDITURES CAME IN AT \$264 MILLION FOR FISCAL YEAR 2025, WITH \$132 MILLION COMING FROM FEDERAL AGENCIES (IN FISCAL YEAR 2024 THE NUMBERS WERE \$275 MILLION AND \$128 MILLION). AS A RESULT OF THIS GROWTH, THE EFFECTIVE FACILITIES AND ADMINISTRATIVE COSTS ("F&A") RECOVERED INCREASED FROM 25.6 TO 26.5. THE EFFECTIVE F&A RECOVERY RATE INCREASED FROM 18.7% TO 19.8%.

COMPARING FISCAL YEAR 2025 TO FISCAL YEAR 2024 FOR OUR PRIMARY FEDERAL RESEARCH SPONSORS:

DOE FUNDED EXPENDITURES	DECREASED FROM \$19.8 MILLION TO \$16.2 MILLION
HHS FUNDED EXPENDITURES	INCREASED FROM \$50.4 MILLION TO \$54.6 MILLION
USDA FUNDED EXPENDITURES	INCREASED FROM \$7.7 MILLION TO \$8 MILLION
NASA FUNDED EXPENDITURES	DECREASED FROM \$7.7 MILLION TO \$6.5 MILLION
NSF FUNDED EXPENDITURES	DECREASED FROM \$14.1 MILLION TO \$14 MILLION

INVESTMENTS IN IMPROVING THE COMPETITIVENESS OF THE FACULTY THROUGH THE IMPLEMENTATION OF PROGRAMS BY THE RESEARCH OFFICE IS CONTINUING TO YIELD A NOTICEABLE RETURN IN TERMS OF THE DOLLAR VALUE OF NEW AWARDS. THE MOST EFFECTIVE OF THESE INVESTMENTS REMAINS THE PROGRAM TO STIMULATE COMPETITIVE RESEARCH, PROVIDING SUPPORT TO ENSURE THAT RESUBMITTED PROPOSALS HAVE A SIGNIFICANTLY ENHANCED PROBABILITY OF SUCCESS; AND AN INTERNAL NATIONAL INSTITUTES HEALTH (NIH) STYLE STUDY SECTION AT OUR HEALTH SCIENCES CENTER (HSC), PROVIDING SCIENTIFIC REVIEW OF GRANT APPLICATIONS PRIOR TO EXTERNAL SUBMISSION TO INCREASE COMPETITIVENESS. THE UNIVERSITY'S FOCUS ON AREAS SUCH AS NEUROSCIENCE, CANCER, ENERGY AND SUSTAINABILITY, AND AEROSPACE IS YIELDING MANY OF

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

Schedule O (Form 990) (Rev. 12-2024)

LHA 432211 01-15-25

Name of the organization	WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION	Employer identification number	55-0665758
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THE INCREASES NOTED ABOVE. ADDITIONALLY, WE HAVE RECEIVED \$50 MILLION FROM THE STATE OF WEST VIRGINIA TO INVEST IN AND GROW OUR CANCER INSTITUTE'S RESEARCH CAPABILITIES. FINALLY, IT SHOULD ALSO BE NOTED THAT THE OUR F&A RECOVERY HAS GROWN BY OVER \$16 MILLION SINCE 2020.

WHILE THE UNIVERSITY AND THE RESEARCH CORPORATION FINDS ITSELF IN A VERY DYNAMIC FUNDING ENVIRONMENT, BOTH ARE DEPLOYING INNOVATIVE STRATEGIES TO EXPAND THE QUANTITY AND QUALITY OF FUNDING FOR THE RESEARCH ENTERPRISE FROM ALL SOURCES AND LOOKS FORWARD TO CONTINUED SUCCESS IN THE FUTURE.

FORM 990, PART V, LINE 2A

EFFECTIVE 10/31/2025 WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION (RC) NO LONGER MAINTAINS A SEPARATE PAYROLL FUNCTION NOR HAS EMPLOYEES WITH WAGES AND EARNINGS REPORTED UNDER THE RC FEDERAL EMPLOYER'S IDENTIFICATION NUMBER (FEIN) AFTER THIS DATE. AT THIS TIME, ALL RC BUSINESS FUNCTIONS REMAIN ON-GOING AND OPERATIONAL, INCLUDING THE RC CORE MISSION TO FOSTER AND SUPPORT RESEARCH AT WEST VIRGINIA UNIVERSITY (WVU) AND TO PROVIDE EVALUATION, DEVELOPMENT, PATENTING, MANAGEMENT, AND MARKETING SERVICES FOR INVENTIONS BY THE FACULTY, STAFF, AND STUDENTS OF WVU. THE CHANGE TO THE BUSINESS OPERATION WAS TO CONSOLIDATE THE RC AND WVU PAYROLL FUNCTIONS WITH RC EMPLOYEES BECOMING WVU EMPLOYEES MOVING FORWARD.

FORM 990, PART VI, SECTION A, LINE 2:

EFFECTIVE MAY 26, 2015, ALL WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION DIRECTORS ARE EMPLOYED BY WEST VIRGINIA UNIVERSITY.

FORM 990, PART VI, SECTION B, LINE 11B:

THE WEST VIRGINIA UNIVERSITY TAX SERVICES UNIT, THE WVU DIVISION OF FINANCE, THE WVURC TREASURER, AND THE WVURC ASSOCIATE 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.

FORM 990, PART VI, SECTION B, LINE 12C:

WEST VIRGINIA UNIVERSITY AND THE WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION (RC) MAINTAINS BOTH A CONFLICT OF INTEREST POLICY AND A WHISTLEBLOWER POLICY.

THE CONFLICT OF INTEREST POLICY REQUIRES ALL RESEARCH INVESTIGATORS TO SUBMIT A CONFLICT OF INTEREST IN RESEARCH DISCLOSURE ON, AT MINIMUM, AN ANNUAL BASIS. ALL INVESTIGATORS ARE REQUIRED TO UPDATE THEIR DISCLOSURE INFORMATION WITHIN THIRTY DAYS OF THE DEVELOPMENT OF A NEW SIGNIFICANT FINANCIAL INTEREST IN RESEARCH.

ADDITIONALLY EMPLOYEES WITHIN THE OFFICE OF TECH TRANSFER MUST ANNUALLY DISCLOSE SIGNIFICANT FINANCIAL INTERESTS FOR INSTITUTIONAL CONFLICTS OF INTEREST TO THE CONFLICT OF INTEREST OFFICE BY JULY 31 OF EACH YEAR.

FINALLY, ALL EMPLOYEES ARE REQUIRED TO DISCLOSE ALL OUTSIDE CONSULTING ARRANGEMENTS TO THE EMPLOYEE'S DEPARTMENT LEADER BY AUGUST 31 OF EACH YEAR.

FORM 990, PART VI, SECTION B, LINE 15:

EFFECTIVE MAY 26, 2015, ALL WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION (RC) DIRECTORS ARE EMPLOYED BY WEST VIRGINIA UNIVERSITY AND ARE COMPENSATED BY A RELATED ORGANIZATION, WEST VIRGINIA UNIVERSITY (WVU).

Name of the organization	WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION	Employer identification number	55-0665758
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COMPENSATION FOR EVERY EMPLOYEE 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. WVU PERIODICALLY REVIEWS THE SALARY ADMINISTRATION PROGRAM AND RESTRUCTURES 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.

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 WVURC'S AFFIRMATIVE ACTION PLAN, FINANCIAL STATEMENTS AND FORM 990-T ARE OPEN AND AVAILABLE FOR INSPECTION AT THE WVURC UPON REQUEST. THE IRS DETERMINATION LETTER AND FORM 990 ARE AVAILABLE ON WEST VIRGINIA UNIVERSITY'S TAX SERVICES WEBSITE.

FORM 990, PART VI, SECTION B, LINE 16 POLICIES

DURING THE FISCAL YEAR 2015 WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION BECAME A MEMBER INVESTOR IN THE WEST VIRGINIA GROWTH INVESTMENT LLC WHICH IS AN LLC ENTITY FILING AS A PARTNERSHIP FOR INCOME TAX PURPOSES. THE FOCUS OF THE WEST VIRGINIA GROWTH INVESTMENT LLC WILL BE TO INVEST IN SMALL BUSINESSES LOCATED WITHIN THE WEST VIRGINIA REGION THAT DEMONSTRATE THE POTENTIAL FOR GROWTH AND A SUITABLE RETURN.

FORM 990 PART VI SECTION A GOVERNING BOARD AND MANAGEMENT

EFFECTIVE WITH THE FISCAL YEAR 2024, THERE WERE CHANGES MADE TO THE STRUCTURE, COMPOSITION AND DUTIES OF THE WVU RESEARCH CORPORATION BOARD OF DIRECTORS.

THE VOTING MEMBERSHIP OF THE BOARD OF DIRECTORS NOW INCLUDES EIGHT VOTING MEMBERS AND FIVE NON-VOTING OFFICERS. THE EIGHT VOTING BOARD OF DIRECTOR MEMBERS INCLUDE THE FOLLOWING WEST VIRGINIA UNIVERSITY (WVU) REPRESENTATIVES: THE WVU PRESIDENT; THE WVU PROVOST; THE WVU VICE PRESIDENT AND CHIEF FINANCIAL OFFICER; THE WVU VICE PRESIDENT & GENERAL COUNSEL; THE WVU SENIOR ASSOCIATE VICE PRESIDENT, OFFICE OF RESEARCH & GRADUATE EDUCATION, VICE DEAN OF RESEARCH SCHOOL OF MEDICINE; THE WVU CHANCELLOR & EXECUTIVE DEAN FOR HEALTH SCIENCES; AND TWO WVU FACULTY MEMBERS AS APPOINTED BY THE WVU PRESIDENT. ALL BOARD DIRECTORS ARE APPOINTED BASED ON THEIR WEST VIRGINIA UNIVERSITY POSITION WITH EMPHASIS ON WVU POSITIONS WITHIN A COLLEGE OR AREA WITH A HIGH LEVEL OF EXTERNALLY FUNDED RESEARCH. THERE IS NO SET TERM AN INDIVIDUAL MAY SERVE AS A BOARD OF DIRECTOR MEMBER AS DIRECTORS ARE APPOINTED BASED ON THEIR EMPLOYMENT POSITION AT WVU WITH THE INTENTION THAT BOARD OF DIRECTOR MEMBERS WILL RETAIN THEIR BOARD MEMBERSHIP FOR THE DURATION OF THEIR EMPLOYMENT IN ONE OF THE ABOVE LISTED WVU POSITIONS. THERE ARE NO EXTERNAL BOARD DIRECTORS.

ADDITIONALLY, EFFECTIVE WITH THE FISCAL YEAR 2024 THE ROLE WITHIN THE BOARD OF DIRECTORS FOR THE WVU CHANCELLOR AND EXECUTIVE DEAN FOR HEALTH SCIENCES ALSO BECAME THE EXECUTIVE DIRECTOR FOR THE WVU RESEARCH

Name of the organization WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION	Employer identification number 55-0665758
CORPORATION. ALL NON-VOTING OFFICERS ARE ELECTED BY THE VOTING MEMBERS OF THE BOARD FOR A ONE YEAR TERM.	

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:
 ROUNDING (\$1,000) -1,000.

FORM 990, PART XII, LINE 2C OVERSIGHT CHANGES
 THERE HAS BEEN NO CHANGE FROM FISCAL YEAR 2024 TO FISCAL YEAR 2025 IN THE OVERSIGHT OF THE AUDIT, REVIEW, OR COMPILATION OF THE FINANCIAL STATEMENTS OR IN THE SELECTION PROCESS OF AN INDEPENDENT AUDITOR.

FORM 990 SCHEDULE R PART V 1D LOANS OR LOAN GUARANTEES TO OR FOR RELATED OR EFFECTIVE APRIL 1, 2022 (FISCAL YEAR 2022), THE WEST VIRGINIA UNIVERSITY INNOVATION CORPORATION (UIC), A RELATED ORGANIZATION (SEE SCHEDULE R) TO THE WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION (CORPORATION), UNDERWENT A RESTRUCTURING OF BUSINESS FUNCTIONS. WHILE UIC CONTINUES TO OPERATE UNDER ITS MISSION AND 501(C)(3) NON-PROFIT STATUS, THERE WAS A NEED FOR REORGANIZATION OF THE BUSINESS FUNCTIONS TO ENABLE CONTINUED OPERATIONS FROM A FINANCIAL PERSPECTIVE. AT THAT TIME THE BYLAWS WERE AMENDED AND RESTATED SUCH THAT WEST VIRGINIA UNITED HEALTH SYSTEM, INC. (WVUHS) AND WEST VIRGINIA UNIVERSITY (UNIVERSITY) HAVE EQUAL VOTING CONTROL IN UIC THROUGH APPOINTMENT OF 50% EACH OF THE UIC BOARD OF DIRECTORS.

ADDITIONALLY, AS PART OF THE REORGANIZATION, IN JUNE 2022 THE CORPORATION BOARD AUTHORIZED THE WRITE OFF OF LOANS PREVIOUSLY PROVIDED BY THE CORPORATION TO THE UIC IN THE AMOUNT OF \$4,684,753 INCLUDING PRINCIPAL AND INTEREST.

**SCHEDULE R
(Form 990)**

(Rev. January 2025)

Department of the Treasury
Internal Revenue Service

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.

OMB No. 1545-0047

**Open to Public
Inspection**

Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION	Employer identification number 55-0665758
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Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
STATE OF WEST VIRGINIA DBA WEST VIRGINIA UNIVERSITY - 55-6000842, PO BOX 6005, MORGANTOWN, WV 26506-6005	EDUCATION AND RESEARCH	WEST VIRGINIA			N/A		X
WEST VIRGINIA UNIVERSITY INNOVATION CORPORATION - 61-1764272, PO BOX 4439, MORGANTOWN, WV 26504	RESEARCH	WEST VIRGINIA	501(C)(3)	LINE 12B, II	STATE OF WV DBA WVU & WV UNITED HEALTH SYSTEM		X

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

Schedule R (Form 990) (Rev. 1-2025)

WEST VIRGINIA UNIVERSITY

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
F & P REALTY COMPANY - 55-0571302 PO BOX 6005, ONE WATERFRONT PLACE MORGANTOWN, WV 26506	BUILDING LESSOR	WV	WEST VIRGINIA UNIVERSITY RESEARCH	C CORP	30,000.	201,945.	100%	X	

SEE PART VII FOR CONTINUATIONS

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

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 organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)	X	
c Gift, grant, or capital contribution from related organization(s)	X	
d Loans or loan guarantees to or for related organization(s)	X	
e Loans or loan guarantees by related organization(s)	X	
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)	X	
j Lease of facilities, equipment, or other assets to related organization(s)	X	
k Lease of facilities, equipment, or other assets from related organization(s)	X	
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	X	
o Sharing of paid employees with related organization(s)	X	
p Reimbursement paid to related organization(s) for expenses	X	
q Reimbursement paid by related organization(s) for expenses	X	
r Other transfer of cash or property to related organization(s)	X	
s Other transfer of cash or property from related organization(s)	X	

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

PART IV, IDENTIFICATION OF RELATED ORGANIZATIONS TAXABLE AS CORP OR TRUST:

NAME OF RELATED ORGANIZATION:

F & P REALTY COMPANY

DIRECT CONTROLLING ENTITY: WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION

Form **8879-TE**

IRS E-file Signature Authorization for a Tax Exempt Entity

OMB No. 1545-0047

For calendar year 2024, or fiscal year beginning JUL 1, 2024, and ending JUN 30, 2025

2024

Department of the Treasury
Internal Revenue Service

Do not send to the IRS. Keep for your records.

Go to www.irs.gov/Form8879TE for the latest information.

Name of filer **WEST VIRGINIA UNIVERSITY
RESEARCH CORPORATION**

EIN or SSN
55-0665758

Name and title of officer or person subject to tax **BARBARA WEISS
TREASURER**

Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a Form 990 check here	<input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	186,125,278.
2a Form 990-EZ check here	<input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b
3a Form 1120-POL check here	<input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b
4a Form 990-PF check here	<input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part V, line 5)	4b
5a Form 8868 check here	<input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b
6a Form 990-T check here	<input type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4)	6b
7a Form 4720 check here	<input type="checkbox"/>	b Total tax (Form 4720, Part III, line 1)	7b
8a Form 5227 check here	<input type="checkbox"/>	b FMV of assets at end of tax year (Form 5227, Item D)	8b
9a Form 5330 check here	<input type="checkbox"/>	b Tax due (Form 5330, Part II, line 19)	9b
10a Form 8038-CP check here	<input type="checkbox"/>	b Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that I am an officer of the above entity or I am a person subject to tax with respect to (name of entity) _____, (EIN) _____ and that I have examined a copy of the 2024 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

I authorize _____ to enter my PIN Enter five numbers, but do not enter all zeros

as my signature on the tax year 2024 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2024 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax *Barbara Weiss*

Date 5/14/26

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

55117291861

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2024 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature _____ Date _____

ERO Must Retain This Form - See Instructions

Do Not Submit This Form to the IRS Unless Requested To Do So

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8879-TE** (2024)

LHA 402521 12-26-24