

科学技術研究調査 調査票の新旧対照表

| 変更内容   | 変更案  | 変更前 | 変更理由 |  |  |   |  |  |  |   |  |  |  |   |  |  |  |  |   |  |  |   |   |  |  |  |   |  |  |  |   |  |  |  |   |  |  |  |   |  |  |  |  |
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| <p>1 研究関係従業者の区分の変更</p> <p>対象：調査票甲（企業A、B共通）及び調査票乙（非営利団体・公的機関）</p> | <p>「主に研究に従事する者」を専従換算値「1」を意味する「専ら研究に従事する者」へ変更</p> <p>○調査票甲〔第3面〕【4】研究関係従業者数<br/>及び調査票乙〔第2面〕【7】研究関係従業者数</p> <table border="1" data-bbox="543 464 1279 636"> <tr> <td>研</td> <td></td> <td></td> <td></td> </tr> <tr> <td>究</td> <td></td> <td></td> <td></td> </tr> <tr> <td>者</td> <td></td> <td></td> <td></td> </tr> <tr> <td>①</td> <td></td> <td></td> <td></td> </tr> </table> <p>① 「研究者」とは、大学（短期大学を除く。）の課程を修了した者、又はこれと同等以上の専門的知識を有する者で、特定のテーマをもって研究を行っている者をいいます。<br/> <u>・「専ら研究に従事する者」とは、研究者のうち、研究関係業務に専ら従事する者をいいます。</u><br/>         ・「研究を兼務する者」とは、<u>研究者のうち、他の業務を兼務する者をいいます。</u></p>   | 研   |      |  |  | 究 |  |  |  | 者 |  |  |  | ① |  |  |  | <table border="1" data-bbox="1389 464 2125 636"> <tr> <td>研</td> <td></td> <td></td> <td></td> </tr> <tr> <td>究</td> <td></td> <td></td> <td></td> </tr> <tr> <td>者</td> <td></td> <td></td> <td></td> </tr> <tr> <td>①</td> <td></td> <td></td> <td></td> </tr> </table> <p>① 「研究者」とは、大学（短期大学を除く。）の課程を修了した者、又はこれと同等以上の専門的知識を有する者で、特定のテーマをもって研究を行っている者をいいます。<br/> <u>・「主に研究に従事する者」とは、業務のうち研究関係業務に従事した時間が主である者をいいます。</u><br/>         ・「研究を兼務する者」とは、<u>業務のうち研究関係業務に従事した時間が主でない者をいいます。</u></p> | 研 |  |  |   | 究 |  |  |  | 者 |  |  |  | ① |  |  |  | <p>平成24年1月20日付府統委第5号「諮問第42号の答申 科学技術研究調査の変更及び科学技術研究調査の指定の変更（名称の変更）について」（以下「前回答申」という。）における「今後の課題」を踏まえた変更。</p> <p>「主に研究に従事する者」は、研究に専従している者として把握してきたところであるが、専従者であることをより明確にするために、区分名を変更。</p> |  |  |  |   |  |  |  |  |
| 研  |  |     |      |  |  |   |  |  |  |   |  |  |  |   |  |  |  |  |   |  |  |   |   |  |  |  |   |  |  |  |   |  |  |  |   |  |  |  |   |  |  |  |  |
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| <p>2 研究関係従業者の区分の変更</p> <p>対象：調査票丙（大学等）</p>                       | <p>研究本務者の内訳である「医局員・その他の研究員」を2つの区分に分割</p> <p>○〔第2面〕【4】従業者数</p> <table border="1" data-bbox="543 968 1279 1329"> <tr> <td>研</td> <td></td> <td></td> <td></td> </tr> <tr> <td>本</td> <td></td> <td></td> <td></td> </tr> <tr> <td>究</td> <td></td> <td></td> <td></td> </tr> <tr> <td>者</td> <td></td> <td></td> <td></td> </tr> <tr> <td>①</td> <td></td> <td></td> <td></td> </tr> </table> <p>① 「研究者」とは、「教員」、「<u>医局員</u>」、「<u>その他の研究員</u>」、「大学院博士課程の在籍者」のいずれかに該当する者をいいます。<br/>         ・「教員」とは、教授、准教授、助教及び講師をいいます。<br/> <u>・「医局員」とは、「教員」及び「大学院博士課程の在籍者」以外の者で、医学部等に所属し、大学附属病院及び関連施設において診療、研究、教育に従事している医者をいいます。</u><br/>         ・「その他の研究員」とは、「<u>教員</u>」、「<u>医局員</u>」及び「<u>大学院博士課程の在籍者</u>」以外の者で、大学（短期大学を除く）の課程を修了した者又はこれと同等以上の専門的知識を有し、特定のテーマをもって研究を行っている者をいいます。<br/>         ・「兼務者」とは、外部に本務をもつ研究者をいいます。ただし、講義専門の非常勤職員は「研究以外の業務に従事する従業者」に含めてください。</p> | 研   |      |  |  | 本 |  |  |  | 究 |  |  |  | 者 |  |  |  | ①  |   |  |  | <table border="1" data-bbox="1389 968 2125 1266"> <tr> <td>研</td> <td></td> <td></td> <td></td> </tr> <tr> <td>本</td> <td></td> <td></td> <td></td> </tr> <tr> <td>究</td> <td></td> <td></td> <td></td> </tr> <tr> <td>者</td> <td></td> <td></td> <td></td> </tr> <tr> <td>①</td> <td></td> <td></td> <td></td> </tr> </table> <p>① 「研究者」とは、「教員」、「<u>医局員・その他の研究員</u>」、「大学院博士課程の在籍者」のいずれかに該当する者をいいます。<br/>         ・「教員」とは、教授、准教授、助教及び講師をいいます。<br/>         ・「その他の研究員」とは、<u>教員、医局員及び大学院博士課程の在籍者</u>以外の者で、大学（短期大学を除く）の課程を修了した者又はこれと同等以上の専門的知識を有し、特定のテーマをもって研究を行っている者をいいます。<br/>         ・「兼務者」とは、外部に本務をもつ研究者をいいます。ただし、講義専門の非常勤職員は「研究以外の業務に従事する従業者」に含めてください。</p> | 研 |  |  |  | 本 |  |  |  | 究 |  |  |  | 者   |  |  |  | ① |  |  |  | <p>「医局員・その他の研究員」に関する専従換算をより精緻に行うため、文部科学省において実施する「大学等におけるフルタイム換算データに関する調査」との整合性の観点から、「医局員」と「その他の研究員」に分割。</p> <p>項目を分割したことから、「医局員」に関する説明文を追加。<br/>         研究本務者の各区分との対応を明確にするため、「その他の研究員」の説明文を修正（教員等を「」（かぎ括弧）でくくる）。</p> |
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| 変更内容  | 変更案  | 変更前                  | 変更理由 |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |        |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |  |     |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |   |            |  |             |       |  |                      |     |     |                      |        |                      |       |                      |         |                      |       |                      |       |                      |            |  |             |       |  |                      |     |     |                      |       |                      |         |                      |       |                      |       |                      |  |
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| <p>3 採用・転入研究者数における女性研究者数の追加</p> <p>対象：調査票甲(企業A、B共通)、調査票乙(非営利団体・公的機関)及び調査票丙(大学等)</p> | <p>採用・転入研究者数において、新規採用研究者数及び転入研究者数(計)で「うち女性」を追加</p> <p>○調査票甲〔第4面〕【5】採用・転入研究者数</p> <table border="1" data-bbox="546 310 1216 766"> <thead> <tr> <th rowspan="2"></th> <th colspan="2">総 数</th> </tr> <tr> <th>万 千 百 十 一 人</th> <th>千 百 十 一 人</th> </tr> </thead> <tbody> <tr> <td>新規採用者数</td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>転入研究者数</td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>会 社</td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>  うち親子会社</td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>非営利団体</td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>公 的 機 関</td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>大 学 等</td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>そ の 他</td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> </tbody> </table> <p>○調査票乙〔第3面〕【8】採用・転入研究者数</p> <table border="1" data-bbox="546 919 1216 1323"> <thead> <tr> <th rowspan="2"></th> <th colspan="2">総 数</th> </tr> <tr> <th>万 千 百 十 一 人</th> <th>千 百 十 一 人</th> </tr> </thead> <tbody> <tr> <td>新規採用者数</td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>転入研究者数</td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>会 社</td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>非営利団体</td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>公 的 機 関</td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>大 学 等</td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>そ の 他</td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> </tbody> </table> |                      | 総 数  |  | 万 千 百 十 一 人 | 千 百 十 一 人 | 新規採用者数 | <input type="text"/> | <input type="text"/> | 転入研究者数 | <input type="text"/> | <input type="text"/> | 会 社 | <input type="text"/> | <input type="text"/> | うち親子会社 | <input type="text"/> | <input type="text"/> | 非営利団体 | <input type="text"/> | <input type="text"/> | 公 的 機 関 | <input type="text"/> | <input type="text"/> | 大 学 等 | <input type="text"/> | <input type="text"/> | そ の 他 | <input type="text"/> | <input type="text"/> |  | 総 数 |  | 万 千 百 十 一 人 | 千 百 十 一 人 | 新規採用者数 | <input type="text"/> | <input type="text"/> | 転入研究者数 | <input type="text"/> | <input type="text"/> | 会 社 | <input type="text"/> | <input type="text"/> | 非営利団体 | <input type="text"/> | <input type="text"/> | 公 的 機 関 | <input type="text"/> | <input type="text"/> | 大 学 等 | <input type="text"/> | <input type="text"/> | そ の 他 | <input type="text"/> | <input type="text"/> | <p>変更前</p> <table border="1" data-bbox="1439 310 1893 741"> <thead> <tr> <th colspan="2">採用・転入研究者合計</th> <th>万 千 百 十 一 人</th> </tr> </thead> <tbody> <tr> <td colspan="2">新規採用者</td> <td><input type="text"/></td> </tr> <tr> <td rowspan="6">転入者</td> <td>会 社</td> <td><input type="text"/></td> </tr> <tr> <td>  うち親子会社</td> <td><input type="text"/></td> </tr> <tr> <td>非営利団体</td> <td><input type="text"/></td> </tr> <tr> <td>公 的 機 関</td> <td><input type="text"/></td> </tr> <tr> <td>大 学 等</td> <td><input type="text"/></td> </tr> <tr> <td>そ の 他</td> <td><input type="text"/></td> </tr> </tbody> </table><br><table border="1" data-bbox="1460 919 1893 1318"> <thead> <tr> <th colspan="2">採用・転入研究者合計</th> <th>万 千 百 十 一 人</th> </tr> </thead> <tbody> <tr> <td colspan="2">新規採用者</td> <td><input type="text"/></td> </tr> <tr> <td rowspan="5">転入者</td> <td>会 社</td> <td><input type="text"/></td> </tr> <tr> <td>非営利団体</td> <td><input type="text"/></td> </tr> <tr> <td>公 的 機 関</td> <td><input type="text"/></td> </tr> <tr> <td>大 学 等</td> <td><input type="text"/></td> </tr> <tr> <td>そ の 他</td> <td><input type="text"/></td> </tr> </tbody> </table> | 採用・転入研究者合計 |  | 万 千 百 十 一 人 | 新規採用者 |  | <input type="text"/> | 転入者 | 会 社 | <input type="text"/> | うち親子会社 | <input type="text"/> | 非営利団体 | <input type="text"/> | 公 的 機 関 | <input type="text"/> | 大 学 等 | <input type="text"/> | そ の 他 | <input type="text"/> | 採用・転入研究者合計 |  | 万 千 百 十 一 人 | 新規採用者 |  | <input type="text"/> | 転入者 | 会 社 | <input type="text"/> | 非営利団体 | <input type="text"/> | 公 的 機 関 | <input type="text"/> | 大 学 等 | <input type="text"/> | そ の 他 | <input type="text"/> | <p>女性研究者の支援施策に資するため、新規採用、転入及び転出研究者数の内数として女性研究者を追加。</p> |
|   | 総 数  |                      |      |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |        |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |  |     |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |   |            |  |             |       |  |                      |     |     |                      |        |                      |       |                      |         |                      |       |                      |       |                      |            |  |             |       |  |                      |     |     |                      |       |                      |         |                      |       |                      |       |                      |  |
|   | 万 千 百 十 一 人  | 千 百 十 一 人            |      |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |        |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |  |     |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |   |            |  |             |       |  |                      |     |     |                      |        |                      |       |                      |         |                      |       |                      |       |                      |            |  |             |       |  |                      |     |     |                      |       |                      |         |                      |       |                      |       |                      |  |
| 新規採用者数  | <input type="text"/>   | <input type="text"/> |      |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |        |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |  |     |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |   |            |  |             |       |  |                      |     |     |                      |        |                      |       |                      |         |                      |       |                      |       |                      |            |  |             |       |  |                      |     |     |                      |       |                      |         |                      |       |                      |       |                      |  |
| 転入研究者数  | <input type="text"/>   | <input type="text"/> |      |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |        |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |  |     |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |   |            |  |             |       |  |                      |     |     |                      |        |                      |       |                      |         |                      |       |                      |       |                      |            |  |             |       |  |                      |     |     |                      |       |                      |         |                      |       |                      |       |                      |  |
| 会 社   | <input type="text"/>   | <input type="text"/> |      |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |        |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |  |     |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |   |            |  |             |       |  |                      |     |     |                      |        |                      |       |                      |         |                      |       |                      |       |                      |            |  |             |       |  |                      |     |     |                      |       |                      |         |                      |       |                      |       |                      |  |
| うち親子会社  | <input type="text"/>   | <input type="text"/> |      |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |        |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |  |     |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |   |            |  |             |       |  |                      |     |     |                      |        |                      |       |                      |         |                      |       |                      |       |                      |            |  |             |       |  |                      |     |     |                      |       |                      |         |                      |       |                      |       |                      |  |
| 非営利団体   | <input type="text"/>   | <input type="text"/> |      |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |        |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |  |     |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |   |            |  |             |       |  |                      |     |     |                      |        |                      |       |                      |         |                      |       |                      |       |                      |            |  |             |       |  |                      |     |     |                      |       |                      |         |                      |       |                      |       |                      |  |
| 公 的 機 関   | <input type="text"/>   | <input type="text"/> |      |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |        |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |  |     |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |   |            |  |             |       |  |                      |     |     |                      |        |                      |       |                      |         |                      |       |                      |       |                      |            |  |             |       |  |                      |     |     |                      |       |                      |         |                      |       |                      |       |                      |  |
| 大 学 等   | <input type="text"/>   | <input type="text"/> |      |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |        |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |  |     |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |   |            |  |             |       |  |                      |     |     |                      |        |                      |       |                      |         |                      |       |                      |       |                      |            |  |             |       |  |                      |     |     |                      |       |                      |         |                      |       |                      |       |                      |  |
| そ の 他   | <input type="text"/>   | <input type="text"/> |      |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |        |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |  |     |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |   |            |  |             |       |  |                      |     |     |                      |        |                      |       |                      |         |                      |       |                      |       |                      |            |  |             |       |  |                      |     |     |                      |       |                      |         |                      |       |                      |       |                      |  |
|   | 総 数  |                      |      |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |        |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |  |     |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |   |            |  |             |       |  |                      |     |     |                      |        |                      |       |                      |         |                      |       |                      |       |                      |            |  |             |       |  |                      |     |     |                      |       |                      |         |                      |       |                      |       |                      |  |
|   | 万 千 百 十 一 人  | 千 百 十 一 人            |      |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |        |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |  |     |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |   |            |  |             |       |  |                      |     |     |                      |        |                      |       |                      |         |                      |       |                      |       |                      |            |  |             |       |  |                      |     |     |                      |       |                      |         |                      |       |                      |       |                      |  |
| 新規採用者数  | <input type="text"/>   | <input type="text"/> |      |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |        |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |  |     |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |   |            |  |             |       |  |                      |     |     |                      |        |                      |       |                      |         |                      |       |                      |       |                      |            |  |             |       |  |                      |     |     |                      |       |                      |         |                      |       |                      |       |                      |  |
| 転入研究者数  | <input type="text"/>   | <input type="text"/> |      |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |        |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |  |     |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |   |            |  |             |       |  |                      |     |     |                      |        |                      |       |                      |         |                      |       |                      |       |                      |            |  |             |       |  |                      |     |     |                      |       |                      |         |                      |       |                      |       |                      |  |
| 会 社   | <input type="text"/>   | <input type="text"/> |      |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |        |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |  |     |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |   |            |  |             |       |  |                      |     |     |                      |        |                      |       |                      |         |                      |       |                      |       |                      |            |  |             |       |  |                      |     |     |                      |       |                      |         |                      |       |                      |       |                      |  |
| 非営利団体   | <input type="text"/>   | <input type="text"/> |      |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |        |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |  |     |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |   |            |  |             |       |  |                      |     |     |                      |        |                      |       |                      |         |                      |       |                      |       |                      |            |  |             |       |  |                      |     |     |                      |       |                      |         |                      |       |                      |       |                      |  |
| 公 的 機 関   | <input type="text"/>   | <input type="text"/> |      |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |        |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |  |     |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |   |            |  |             |       |  |                      |     |     |                      |        |                      |       |                      |         |                      |       |                      |       |                      |            |  |             |       |  |                      |     |     |                      |       |                      |         |                      |       |                      |       |                      |  |
| 大 学 等   | <input type="text"/>   | <input type="text"/> |      |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |        |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |  |     |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |   |            |  |             |       |  |                      |     |     |                      |        |                      |       |                      |         |                      |       |                      |       |                      |            |  |             |       |  |                      |     |     |                      |       |                      |         |                      |       |                      |       |                      |  |
| そ の 他   | <input type="text"/>   | <input type="text"/> |      |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |        |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |  |     |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |   |            |  |             |       |  |                      |     |     |                      |        |                      |       |                      |         |                      |       |                      |       |                      |            |  |             |       |  |                      |     |     |                      |       |                      |         |                      |       |                      |       |                      |  |
| 採用・転入研究者合計  |  | 万 千 百 十 一 人          |      |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |        |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |  |     |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |   |            |  |             |       |  |                      |     |     |                      |        |                      |       |                      |         |                      |       |                      |       |                      |            |  |             |       |  |                      |     |     |                      |       |                      |         |                      |       |                      |       |                      |  |
| 新規採用者   |  | <input type="text"/> |      |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |        |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |  |     |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |   |            |  |             |       |  |                      |     |     |                      |        |                      |       |                      |         |                      |       |                      |       |                      |            |  |             |       |  |                      |     |     |                      |       |                      |         |                      |       |                      |       |                      |  |
| 転入者   | 会 社  | <input type="text"/> |      |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |        |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |  |     |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |   |            |  |             |       |  |                      |     |     |                      |        |                      |       |                      |         |                      |       |                      |       |                      |            |  |             |       |  |                      |     |     |                      |       |                      |         |                      |       |                      |       |                      |  |
|   | うち親子会社   | <input type="text"/> |      |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |        |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |  |     |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |   |            |  |             |       |  |                      |     |     |                      |        |                      |       |                      |         |                      |       |                      |       |                      |            |  |             |       |  |                      |     |     |                      |       |                      |         |                      |       |                      |       |                      |  |
|   | 非営利団体  | <input type="text"/> |      |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |        |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |  |     |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |   |            |  |             |       |  |                      |     |     |                      |        |                      |       |                      |         |                      |       |                      |       |                      |            |  |             |       |  |                      |     |     |                      |       |                      |         |                      |       |                      |       |                      |  |
|   | 公 的 機 関  | <input type="text"/> |      |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |        |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |  |     |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |   |            |  |             |       |  |                      |     |     |                      |        |                      |       |                      |         |                      |       |                      |       |                      |            |  |             |       |  |                      |     |     |                      |       |                      |         |                      |       |                      |       |                      |  |
|   | 大 学 等  | <input type="text"/> |      |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |        |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |  |     |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |   |            |  |             |       |  |                      |     |     |                      |        |                      |       |                      |         |                      |       |                      |       |                      |            |  |             |       |  |                      |     |     |                      |       |                      |         |                      |       |                      |       |                      |  |
|   | そ の 他  | <input type="text"/> |      |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |        |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |  |     |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |   |            |  |             |       |  |                      |     |     |                      |        |                      |       |                      |         |                      |       |                      |       |                      |            |  |             |       |  |                      |     |     |                      |       |                      |         |                      |       |                      |       |                      |  |
| 採用・転入研究者合計  |  | 万 千 百 十 一 人          |      |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |        |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |  |     |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |   |            |  |             |       |  |                      |     |     |                      |        |                      |       |                      |         |                      |       |                      |       |                      |            |  |             |       |  |                      |     |     |                      |       |                      |         |                      |       |                      |       |                      |  |
| 新規採用者   |  | <input type="text"/> |      |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |        |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |  |     |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |   |            |  |             |       |  |                      |     |     |                      |        |                      |       |                      |         |                      |       |                      |       |                      |            |  |             |       |  |                      |     |     |                      |       |                      |         |                      |       |                      |       |                      |  |
| 転入者   | 会 社  | <input type="text"/> |      |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |        |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |  |     |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |   |            |  |             |       |  |                      |     |     |                      |        |                      |       |                      |         |                      |       |                      |       |                      |            |  |             |       |  |                      |     |     |                      |       |                      |         |                      |       |                      |       |                      |  |
|   | 非営利団体  | <input type="text"/> |      |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |        |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |  |     |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |   |            |  |             |       |  |                      |     |     |                      |        |                      |       |                      |         |                      |       |                      |       |                      |            |  |             |       |  |                      |     |     |                      |       |                      |         |                      |       |                      |       |                      |  |
|   | 公 的 機 関  | <input type="text"/> |      |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |        |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |  |     |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |   |            |  |             |       |  |                      |     |     |                      |        |                      |       |                      |         |                      |       |                      |       |                      |            |  |             |       |  |                      |     |     |                      |       |                      |         |                      |       |                      |       |                      |  |
|   | 大 学 等  | <input type="text"/> |      |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |        |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |  |     |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |   |            |  |             |       |  |                      |     |     |                      |        |                      |       |                      |         |                      |       |                      |       |                      |            |  |             |       |  |                      |     |     |                      |       |                      |         |                      |       |                      |       |                      |  |
|   | そ の 他  | <input type="text"/> |      |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |        |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |  |     |  |             |           |        |                      |                      |        |                      |                      |     |                      |                      |       |                      |                      |         |                      |                      |       |                      |                      |       |                      |                      |   |            |  |             |       |  |                      |     |     |                      |        |                      |       |                      |         |                      |       |                      |       |                      |            |  |             |       |  |                      |     |     |                      |       |                      |         |                      |       |                      |       |                      |  |



| 変更内容  | 変更案   | 変更前 | 変更理由 |    |    |    |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |   |    |    |    |    |   |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |  |
|---|---|-----|------|----|----|----|----|----|----|---|---|------|--|--|--|--|--|--|--|--|--|-------|--|--|--|--|--|--|--|--|--|-------------|--|--|--|--|--|--|--|--|--|---------|--|--|--|--|--|--|--|--|--|------------|--|--|--|--|--|--|--|--|--|------------|--|--|--|--|--|--|--|--|--|--------------------|--|--|--|--|--|--|--|--|--|-----------------|--|--|--|--|--|--|--|--|--|-------|--|--|--|--|--|--|--|--|--|---------|--|--|--|--|--|--|--|--|--|---------------|--|--|--|--|--|--|--|--|--|---|----|----|----|----|---|----|----|----|---|---|------|--|--|--|--|--|--|--|--|--|-------|--|--|--|--|--|--|--|--|--|-------------|--|--|--|--|--|--|--|--|--|---------|--|--|--|--|--|--|--|--|--|------------|--|--|--|--|--|--|--|--|--|------------|--|--|--|--|--|--|--|--|--|-------|--|--|--|--|--|--|--|--|--|---------|--|--|--|--|--|--|--|--|--|---------------|--|--|--|--|--|--|--|--|--|--|
| <p>5 社内(内部)使用研究費における無形固定資産の購入費の追加</p> <p>対象:調査票甲(企業A、B共通)、調査票乙(非営利団体・公的機関)及び調査票丙(大学等)</p> | <p>社内(内部)使用研究費の内訳に「無形固定資産の購入費」及び「うちソフトウェア」を追加</p> <p>○調査票甲〔第5面〕【8】社内使用研究費</p> <table border="1" data-bbox="587 331 1261 1098"> <thead> <tr> <th>総額</th> <th>千億</th> <th>百億</th> <th>十億</th> <th>億</th> <th>千万</th> <th>百万</th> <th>十万</th> <th>万</th> <th>円</th> </tr> </thead> <tbody> <tr><td>人件費①</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>原材料費②</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>有形固定資産の購入費③</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>  土地・建物など</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>  機械・器具・装置など</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>  その他の有形固定資産</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td><b>無形固定資産の購入費④</b></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>  <b>うちソフトウェア</b></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>リース料⑤</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>その他の経費⑥</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>有形固定資産の減価償却費⑦</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </tbody> </table> <p>③ 「有形固定資産の購入費」とは、研究に必要なすべての有形固定資産の<b>購入費</b>をいいます。</p> <ul style="list-style-type: none"> <li>土地・建物などー土地、建物(附属設備を含む。)構築物、船舶、航空機</li> <li>機械・器具・装置などー耐用年数1年以上でかつ取得価額が10万円以上の機械、装置、車両、その他の運搬具、工具、器具及び備品</li> <li>その他の有形固定資産ー建設仮勘定、<b>固定資産として扱われる動植物</b></li> </ul> <p>④ <b>「無形固定資産の購入費」とは、研究に必要なすべての無形固定資産の購入費をいいます。</b></p> <ul style="list-style-type: none"> <li><b>うちソフトウェアー1年以上にわたって使用される取得価額が10万円以上のソフトウェア</b></li> </ul> | 総額  | 千億   | 百億 | 十億 | 億  | 千万 | 百万 | 十万 | 万 | 円 | 人件費① |  |  |  |  |  |  |  |  |  | 原材料費② |  |  |  |  |  |  |  |  |  | 有形固定資産の購入費③ |  |  |  |  |  |  |  |  |  | 土地・建物など |  |  |  |  |  |  |  |  |  | 機械・器具・装置など |  |  |  |  |  |  |  |  |  | その他の有形固定資産 |  |  |  |  |  |  |  |  |  | <b>無形固定資産の購入費④</b> |  |  |  |  |  |  |  |  |  | <b>うちソフトウェア</b> |  |  |  |  |  |  |  |  |  | リース料⑤ |  |  |  |  |  |  |  |  |  | その他の経費⑥ |  |  |  |  |  |  |  |  |  | 有形固定資産の減価償却費⑦ |  |  |  |  |  |  |  |  |  | <table border="1" data-bbox="1433 331 2107 972"> <thead> <tr> <th>総額</th> <th>千億</th> <th>百億</th> <th>十億</th> <th>億</th> <th>千万</th> <th>百万</th> <th>十万</th> <th>万</th> <th>円</th> </tr> </thead> <tbody> <tr><td>人件費①</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>原材料費②</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>有形固定資産の購入費③</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>  土地・建物など</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>  機械・器具・装置など</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>  その他の有形固定資産</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>リース料④</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>その他の経費⑤</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>有形固定資産の減価償却費⑥</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </tbody> </table> <p>③ 「有形固定資産の購入費」とは、研究に必要なすべての有形固定資産をいいます。</p> <ul style="list-style-type: none"> <li>土地・建物などー土地、建物(附属設備を含む。)構築物、船舶、航空機</li> <li>機械・器具・装置などー耐用年数1年以上でかつ取得価額が10万円以上の機械、装置、車両、その他の運搬具、工具、器具及び備品</li> <li>その他の有形固定資産ー建設仮勘定<b>など</b></li> </ul> | 総額 | 千億 | 百億 | 十億 | 億 | 千万 | 百万 | 十万 | 万 | 円 | 人件費① |  |  |  |  |  |  |  |  |  | 原材料費② |  |  |  |  |  |  |  |  |  | 有形固定資産の購入費③ |  |  |  |  |  |  |  |  |  | 土地・建物など |  |  |  |  |  |  |  |  |  | 機械・器具・装置など |  |  |  |  |  |  |  |  |  | その他の有形固定資産 |  |  |  |  |  |  |  |  |  | リース料④ |  |  |  |  |  |  |  |  |  | その他の経費⑤ |  |  |  |  |  |  |  |  |  | 有形固定資産の減価償却費⑥ |  |  |  |  |  |  |  |  |  | <p>フラスカチ・マニュアルとの整合(※)及び国民経済計算における研究開発の固定資本形成の計上に資するため、これまで「その他の経費」に含まれていた「無形固定資産の購入費」を独立した区分として追加。</p> <p>※ フラスカチ・マニュアルでは、研究開発における資本的支出の内訳として「土地及び建物」、「計器及び装置」及び「コンピュータ・ソフトウェア」を挙げている。</p> <p>より正確な記入を促すため、「有形固定資産の購入費」及び「その他の有形固定資産」に関する説明文を修正。</p> <p>「無形固定資産の購入費」を区分に追加したことから、説明文を追加。</p> |
| 総額  | 千億  | 百億  | 十億   | 億  | 千万 | 百万 | 十万 | 万  | 円  |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |   |    |    |    |    |   |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |  |
| 人件費①  |   |     |      |    |    |    |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |   |    |    |    |    |   |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |  |
| 原材料費②   |   |     |      |    |    |    |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |   |    |    |    |    |   |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |  |
| 有形固定資産の購入費③   |   |     |      |    |    |    |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |   |    |    |    |    |   |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |  |
| 土地・建物など   |   |     |      |    |    |    |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |   |    |    |    |    |   |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |  |
| 機械・器具・装置など  |   |     |      |    |    |    |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |   |    |    |    |    |   |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |  |
| その他の有形固定資産  |   |     |      |    |    |    |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |   |    |    |    |    |   |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |  |
| <b>無形固定資産の購入費④</b>  |   |     |      |    |    |    |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |   |    |    |    |    |   |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |  |
| <b>うちソフトウェア</b>   |   |     |      |    |    |    |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |   |    |    |    |    |   |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |  |
| リース料⑤   |   |     |      |    |    |    |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |   |    |    |    |    |   |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |  |
| その他の経費⑥   |   |     |      |    |    |    |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |   |    |    |    |    |   |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |  |
| 有形固定資産の減価償却費⑦   |   |     |      |    |    |    |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |   |    |    |    |    |   |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |  |
| 総額  | 千億  | 百億  | 十億   | 億  | 千万 | 百万 | 十万 | 万  | 円  |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |   |    |    |    |    |   |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |  |
| 人件費①  |   |     |      |    |    |    |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |   |    |    |    |    |   |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |  |
| 原材料費②   |   |     |      |    |    |    |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |   |    |    |    |    |   |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |  |
| 有形固定資産の購入費③   |   |     |      |    |    |    |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |   |    |    |    |    |   |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |  |
| 土地・建物など   |   |     |      |    |    |    |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |   |    |    |    |    |   |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |  |
| 機械・器具・装置など  |   |     |      |    |    |    |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |   |    |    |    |    |   |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |  |
| その他の有形固定資産  |   |     |      |    |    |    |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |   |    |    |    |    |   |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |  |
| リース料④   |   |     |      |    |    |    |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |   |    |    |    |    |   |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |  |
| その他の経費⑤   |   |     |      |    |    |    |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |   |    |    |    |    |   |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |  |
| 有形固定資産の減価償却費⑥   |   |     |      |    |    |    |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |   |    |    |    |    |   |    |    |    |   |   |      |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |             |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |  |

| 変更内容                                 | 変更案   | 変更前 | 変更理由 |     |     |     |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                                      |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |     |     |     |     |   |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |
|--------------------------------------|---|-----|------|-----|-----|-----|-----|-----|-----|---|---|--|--|--|--|--|--|--|--|--|--|------------|--|--|--|--|--|--|--|--|--|--------------|--|--|--|--|--|--|--|--|--|-----------------------------|--|--|--|--|--|--|--|--|--|---------------|--|--|--|--|--|--|--|--|--|------------------------|--|--|--|--|--|--|--|--|--|------------------------|--|--|--|--|--|--|--|--|--|--------------------------------------|--|--|--|--|--|--|--|--|--|------------------------|--|--|--|--|--|--|--|--|--|--------------|--|--|--|--|--|--|--|--|--|------------------|--|--|--|--|--|--|--|--|--|---|-----|-----|-----|-----|---|-----|-----|-----|---|---|--|--|--|--|--|--|--|--|--|--|------------|--|--|--|--|--|--|--|--|--|--------------|--|--|--|--|--|--|--|--|--|-----------------------------|--|--|--|--|--|--|--|--|--|---------------|--|--|--|--|--|--|--|--|--|------------------------|--|--|--|--|--|--|--|--|--|------------------------|--|--|--|--|--|--|--|--|--|--------------|--|--|--|--|--|--|--|--|--|------------------|--|--|--|--|--|--|--|--|--|---|
|                                      | <p>○調査票乙〔第4面〕【11】内部使用研究費<br/>及び調査票丙〔第5面〕【9】内部使用研究費</p> <table border="1" data-bbox="560 268 1222 966"> <thead> <tr> <th>総 額</th> <th>千 億</th> <th>百 億</th> <th>十 億</th> <th>億</th> <th>千 万</th> <th>百 万</th> <th>十 万</th> <th>万</th> <th>円</th> </tr> </thead> <tbody> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>人 件 費<br/>①</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>原 材 料 費<br/>②</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>有 形 固 定 資 産 の<br/>購 入 費<br/>③</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>  土 地 ・ 建 物 な ど</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>  機 械 ・ 器 具 ・ 装 置<br/>  な ど</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>  そ の 他 の 有 形<br/>  固 定 資 産</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td><b>無 形 固 定 資 産 の<br/>購 入 費<br/>④</b></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>  <b>う ち ソ フ ト ウ ェ ア</b></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>リ ー ス 料<br/>⑤</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>そ の 他 の 経 費<br/>⑥</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </tbody> </table> <p>③ 「有形固定資産の購入費」とは、研究に必要なすべての有形固定資産の<b>購入費</b>をいいます。<br/> ・ 土地・建物などー土地、建物(附属設備を含む。)構築物、船舶、航空機<br/> ・ 機械・器具・装置などー耐用年数1年以上でかつ取得価額が10万円以上の機械、装置、車両、その他の運搬具、工具、器具及び備品<br/> ・ その他の有形固定資産ー建設仮勘定、<b>固定資産として扱われる動植物</b></p> <p>④ <b>「無形固定資産の購入費」とは、研究に必要なすべての無形固定資産の購入費をいいます。</b><br/> ・ <b>うちソフトウェアー1年以上にわたって使用される取得価額が10万円以上のソフトウェア</b></p> | 総 額 | 千 億  | 百 億 | 十 億 | 億   | 千 万 | 百 万 | 十 万 | 万 | 円 |  |  |  |  |  |  |  |  |  |  | 人 件 費<br>① |  |  |  |  |  |  |  |  |  | 原 材 料 費<br>② |  |  |  |  |  |  |  |  |  | 有 形 固 定 資 産 の<br>購 入 費<br>③ |  |  |  |  |  |  |  |  |  | 土 地 ・ 建 物 な ど |  |  |  |  |  |  |  |  |  | 機 械 ・ 器 具 ・ 装 置<br>な ど |  |  |  |  |  |  |  |  |  | そ の 他 の 有 形<br>固 定 資 産 |  |  |  |  |  |  |  |  |  | <b>無 形 固 定 資 産 の<br/>購 入 費<br/>④</b> |  |  |  |  |  |  |  |  |  | <b>う ち ソ フ ト ウ ェ ア</b> |  |  |  |  |  |  |  |  |  | リ ー ス 料<br>⑤ |  |  |  |  |  |  |  |  |  | そ の 他 の 経 費<br>⑥ |  |  |  |  |  |  |  |  |  | <table border="1" data-bbox="1448 268 2110 840"> <thead> <tr> <th>総 額</th> <th>千 億</th> <th>百 億</th> <th>十 億</th> <th>億</th> <th>千 万</th> <th>百 万</th> <th>十 万</th> <th>万</th> <th>円</th> </tr> </thead> <tbody> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>人 件 費<br/>①</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>原 材 料 費<br/>②</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>有 形 固 定 資 産 の<br/>購 入 費<br/>③</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>  土 地 ・ 建 物 な ど</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>  機 械 ・ 器 具 ・ 装 置<br/>  な ど</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>  そ の 他 の 有 形<br/>  固 定 資 産</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>リ ー ス 料<br/>④</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>そ の 他 の 経 費<br/>⑤</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </tbody> </table> <p>③ 「有形固定資産の購入費」とは、研究に必要なすべての有形固定資産をいいます。<br/> ・ 土地・建物などー土地、建物(附属設備を含む。)構築物、船舶、航空機<br/> ・ 機械・器具・装置などー耐用年数1年以上でかつ取得価額が10万円以上の機械、装置、車両、その他の運搬具、工具、器具及び備品<br/> ・ その他の有形固定資産ー建設仮勘定<b>など</b></p> | 総 額 | 千 億 | 百 億 | 十 億 | 億 | 千 万 | 百 万 | 十 万 | 万 | 円 |  |  |  |  |  |  |  |  |  |  | 人 件 費<br>① |  |  |  |  |  |  |  |  |  | 原 材 料 費<br>② |  |  |  |  |  |  |  |  |  | 有 形 固 定 資 産 の<br>購 入 費<br>③ |  |  |  |  |  |  |  |  |  | 土 地 ・ 建 物 な ど |  |  |  |  |  |  |  |  |  | 機 械 ・ 器 具 ・ 装 置<br>な ど |  |  |  |  |  |  |  |  |  | そ の 他 の 有 形<br>固 定 資 産 |  |  |  |  |  |  |  |  |  | リ ー ス 料<br>④ |  |  |  |  |  |  |  |  |  | そ の 他 の 経 費<br>⑤ |  |  |  |  |  |  |  |  |  | <p>より正確な記入を促すため、「有形固定資産の購入費」及び「その他の有形固定資産」に関する説明文を修正。</p> <p>「無形固定資産の購入費」を区分に追加したことから、説明文を追加。</p> |
| 総 額                                  | 千 億   | 百 億 | 十 億  | 億   | 千 万 | 百 万 | 十 万 | 万   | 円   |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                                      |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |     |     |     |     |   |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |
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| 人 件 費<br>①                           |   |     |      |     |     |     |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                                      |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |     |     |     |     |   |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |
| 原 材 料 費<br>②                         |   |     |      |     |     |     |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                                      |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |     |     |     |     |   |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |
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| 土 地 ・ 建 物 な ど                        |   |     |      |     |     |     |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                                      |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |     |     |     |     |   |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |
| 機 械 ・ 器 具 ・ 装 置<br>な ど               |   |     |      |     |     |     |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                                      |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |     |     |     |     |   |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |
| そ の 他 の 有 形<br>固 定 資 産               |   |     |      |     |     |     |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                                      |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |     |     |     |     |   |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |
| <b>無 形 固 定 資 産 の<br/>購 入 費<br/>④</b> |   |     |      |     |     |     |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                                      |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |     |     |     |     |   |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |
| <b>う ち ソ フ ト ウ ェ ア</b>               |   |     |      |     |     |     |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                                      |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |     |     |     |     |   |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |
| リ ー ス 料<br>⑤                         |   |     |      |     |     |     |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                                      |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |     |     |     |     |   |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |
| そ の 他 の 経 費<br>⑥                     |   |     |      |     |     |     |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                                      |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |     |     |     |     |   |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |
| 総 額                                  | 千 億   | 百 億 | 十 億  | 億   | 千 万 | 百 万 | 十 万 | 万   | 円   |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                                      |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |     |     |     |     |   |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |
|                                      |   |     |      |     |     |     |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                                      |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |     |     |     |     |   |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |
| 人 件 費<br>①                           |   |     |      |     |     |     |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                                      |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |     |     |     |     |   |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |
| 原 材 料 費<br>②                         |   |     |      |     |     |     |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                                      |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |     |     |     |     |   |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |
| 有 形 固 定 資 産 の<br>購 入 費<br>③          |   |     |      |     |     |     |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                                      |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |     |     |     |     |   |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |
| 土 地 ・ 建 物 な ど                        |   |     |      |     |     |     |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                                      |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |     |     |     |     |   |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |
| 機 械 ・ 器 具 ・ 装 置<br>な ど               |   |     |      |     |     |     |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                                      |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |     |     |     |     |   |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |
| そ の 他 の 有 形<br>固 定 資 産               |   |     |      |     |     |     |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                                      |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |     |     |     |     |   |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |
| リ ー ス 料<br>④                         |   |     |      |     |     |     |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                                      |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |     |     |     |     |   |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |
| そ の 他 の 経 費<br>⑤                     |   |     |      |     |     |     |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                                      |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |     |     |     |     |   |     |     |     |   |   |  |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                             |  |  |  |  |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |                        |  |  |  |  |  |  |  |  |  |              |  |  |  |  |  |  |  |  |  |                  |  |  |  |  |  |  |  |  |  |   |

| 変更内容  | 変更案   | 変更前     | 変更理由 |       |   |   |              |   |              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |        |     |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |              |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| <p>6 社外(外部)から受け入れた研究費の内訳区分の変更</p> <p>対象:調査票甲(企業A、B共通)、調査票乙(非営利団体・公的機関)及び調査票丙(大学等)</p> | <p>「外国」を「会社」、「大学」及び「その他」の3区分に詳細化し、「公的機関」の内訳区分について、「国・公営の研究機関」と「研究所等」を「国・公営、独立行政法人等の研究機関」に、「(国・地方公共団体の)」「その他」と「公庫等」を「公営企業・公庫等」へ統合。</p> <p>○調査票甲〔第7面(企業Bは第6面)〕【12(同10)】社外から受け入れた研究費</p> <table border="1" data-bbox="587 430 1285 1165"> <thead> <tr> <th rowspan="2"></th> <th rowspan="2">総 額</th> <th colspan="5">受 入 額</th> <th colspan="5">うち社内で使用した研究費</th> </tr> <tr> <th>千</th><th>百</th><th>十</th><th>千</th><th>百</th><th>十</th><th>千</th><th>百</th><th>十</th><th>千</th><th>百</th><th>十</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td rowspan="6">公<br/>的<br/>機<br/>関</td> <td>国</td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td>地方公共団体</td> 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学 |  |  |  |  |  |  |  |  |  |  |  |  | 非 営 利 団 体 |  |  |  |  |  |  |  |  |  |  |  |  | 外 国 |  |  |  |  |  |  |  |  |  |  |  |  | <p>前回答申における「今後の課題」を踏まえ、フラスカチ・マニュアルとの整合及び政策上、産学連携に関する評価指標を得る観点から「外国」区分を詳細化。</p> <p>あわせて、マニュアルよりも詳細な区分となっている「公的機関」の一部の区分を統合。</p> |
|   | 総 額   |         |      | 受 入 額 |   |   |              |   | うち社内で使用した研究費 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |        |     |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |              |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   |   | 千       | 百    | 十     | 千 | 百 | 十            | 千 | 百            | 十 | 千 | 百 | 十 |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |        |     |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |              |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   |   |         |      |       |   |   |              |   |              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |        |     |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |              |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 公<br>的<br>機<br>関  | 国   |         |      |       |   |   |              |   |              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |        |     |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |              |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   | 地方公共団体  |         |      |       |   |   |              |   |              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |        |     |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |              |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   | 国・公立大学  |         |      |       |   |   |              |   |              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |        |     |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |              |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   | 国・公営、独立行政法人等の研究機関   |         |      |       |   |   |              |   |              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |        |     |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |              |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   | 公営企業・公庫等  |         |      |       |   |   |              |   |              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |        |     |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |              |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   | そ の 他   |         |      |       |   |   |              |   |              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |        |     |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |              |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 会 社   |   |         |      |       |   |   |              |   |              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |        |     |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |              |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 私 立 大 学   |   |         |      |       |   |   |              |   |              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |        |     |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |              |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 非 営 利 団 体   |   |         |      |       |   |   |              |   |              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |        |     |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |              |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 外<br>国  | 会 社   |         |      |       |   |   |              |   |              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |        |     |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |              |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   | 大 学   |         |      |       |   |   |              |   |              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |        |     |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |              |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   | そ の 他   |         |      |       |   |   |              |   |              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |        |     |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |              |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   | 総 額   | 受 入 額   |      |       |   |   | うち社内で使用した研究費 |   |              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |        |     |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |              |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   |   | 千       | 百    | 十     | 千 | 百 | 十            | 千 | 百            | 十 | 千 | 百 | 十 |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |        |     |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |              |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   |   |         |      |       |   |   |              |   |              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |        |     |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |              |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 公<br>的<br>機<br>関  | 国   |         |      |       |   |   |              |   |              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |        |     |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |              |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   | 地方公共団体  |         |      |       |   |   |              |   |              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |        |     |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |              |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   | 国・公立大学  |         |      |       |   |   |              |   |              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |        |     |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |              |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   | 国・公営の研究機関   |         |      |       |   |   |              |   |              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |        |     |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |              |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   | そ の 他   |         |      |       |   |   |              |   |              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |        |     |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |              |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   | 特<br>殊<br>法<br>人<br>・<br>独<br>立<br>行<br>政<br>法<br>人   | 研 究 所 等 |      |       |   |   |              |   |              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |        |     |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |              |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   | 公 庫 等   |         |      |       |   |   |              |   |              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |        |     |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |              |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   | そ の 他   |         |      |       |   |   |              |   |              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |        |     |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |              |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 会 社   |   |         |      |       |   |   |              |   |              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |        |     |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |              |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 私 立 大 学   |   |         |      |       |   |   |              |   |              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |        |     |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |              |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 非 営 利 団 体   |   |         |      |       |   |   |              |   |              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |        |     |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |              |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 外 国   |   |         |      |       |   |   |              |   |              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |        |     |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |              |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |                  |   |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |

| 変更内容             | 変更案   | 変更前     | 変更理由 |       |   |   |   |   |             |   |             |   |   |   |   |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |  |  |             |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|                  | <p>○調査票乙〔第6面〕【14】外部から受け入れた研究費<br/>及び調査票丙〔第7面〕【12】外部から受け入れた研究費</p> <table border="1" data-bbox="587 289 1285 1018"> <thead> <tr> <th rowspan="2"></th> <th rowspan="2">総 額</th> <th colspan="7">受 入 額</th> <th colspan="7">うち内部で使用了研究費</th> </tr> <tr> <th>千</th><th>百</th><th>十</th><th>千</th><th>百</th><th>十</th><th>万</th> <th>千</th><th>百</th><th>十</th><th>千</th><th>百</th><th>十</th><th>万</th> </tr> </thead> <tbody> <tr> <td rowspan="7">公<br/>的<br/>機<br/>関</td> <td>国</td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td>地方公共団体</td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td>国・公立大学</td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td>国・公営、独立行政法人等の研究機関</td> 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外<br>国 | 私 立 大 学 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 非 営 利 団 体 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 会 社 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 大 学 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | そ の 他 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | <table border="1" data-bbox="1433 289 2131 1018"> <thead> <tr> <th rowspan="2"></th> <th rowspan="2">総 額</th> <th colspan="7">受 入 額</th> <th colspan="7">うち内部で使用了研究費</th> </tr> <tr> <th>千</th><th>百</th><th>十</th><th>千</th><th>百</th><th>十</th><th>万</th> <th>千</th><th>百</th><th>十</th><th>千</th><th>百</th><th>十</th><th>万</th> </tr> </thead> <tbody> <tr> <td rowspan="7">公<br/>的<br/>機<br/>関</td> <td>国</td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td>地方公共団体</td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td>国・公立大学</td> 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|  |  |  |  |  |  | 会 社 | そ の 他 |  |  |  |  |  |  |  |  |  |  |  |  |  | 外<br>国 | 私 立 大 学 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 非 営 利 団 体 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 外 国 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                  | 総 額   |         |      | 受 入 額 |   |   |   |   |             |   | うち内部で使用了研究費 |   |   |   |   |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |  |  |             |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                  |   | 千       | 百    | 十     | 千 | 百 | 十 | 万 | 千           | 百 | 十           | 千 | 百 | 十 | 万 |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |  |  |             |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 公<br>的<br>機<br>関 | 国   |         |      |       |   |   |   |   |             |   |             |   |   |   |   |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |  |  |             |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|                  | 国・公立大学  |         |      |       |   |   |   |   |             |   |             |   |   |   |   |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |  |  |             |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                  | 国・公営、独立行政法人等の研究機関   |         |      |       |   |   |   |   |             |   |             |   |   |   |   |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |  |  |             |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                  | 公営企業・公庫等  |         |      |       |   |   |   |   |             |   |             |   |   |   |   |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |  |  |             |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                  | そ の 他   |         |      |       |   |   |   |   |             |   |             |   |   |   |   |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |  |  |             |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                  | 会 社   |         |      |       |   |   |   |   |             |   |             |   |   |   |   |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |  |  |             |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 外<br>国           | 私 立 大 学   |         |      |       |   |   |   |   |             |   |             |   |   |   |   |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |  |  |             |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                  | 非 営 利 団 体   |         |      |       |   |   |   |   |             |   |             |   |   |   |   |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |  |  |             |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                  | 会 社   |         |      |       |   |   |   |   |             |   |             |   |   |   |   |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |  |  |             |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                  | 大 学   |         |      |       |   |   |   |   |             |   |             |   |   |   |   |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |  |  |             |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                  | そ の 他   |         |      |       |   |   |   |   |             |   |             |   |   |   |   |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |  |  |             |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                  | 総 額   | 受 入 額   |      |       |   |   |   |   | うち内部で使用了研究費 |   |             |   |   |   |   |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |  |  |             |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                  |   | 千       | 百    | 十     | 千 | 百 | 十 | 万 | 千           | 百 | 十           | 千 | 百 | 十 | 万 |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |  |  |             |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 公<br>的<br>機<br>関 | 国   |         |      |       |   |   |   |   |             |   |             |   |   |   |   |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |  |  |             |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                  | 地方公共団体  |         |      |       |   |   |   |   |             |   |             |   |   |   |   |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |  |  |             |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                  | 国・公立大学  |         |      |       |   |   |   |   |             |   |             |   |   |   |   |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |  |  |             |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                  | 国・公営の研究機関   |         |      |       |   |   |   |   |             |   |             |   |   |   |   |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |  |  |             |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                  | そ の 他   |         |      |       |   |   |   |   |             |   |             |   |   |   |   |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |  |  |             |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                  | 特<br>殊<br>法<br>人・<br>独<br>立<br>行<br>政<br>法<br>人   | 研 究 所 等 |      |       |   |   |   |   |             |   |             |   |   |   |   |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |  |  |             |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                  | 公 庫 等   |         |      |       |   |   |   |   |             |   |             |   |   |   |   |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |  |  |             |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 会 社              | そ の 他   |         |      |       |   |   |   |   |             |   |             |   |   |   |   |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |  |  |             |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 外<br>国           | 私 立 大 学   |         |      |       |   |   |   |   |             |   |             |   |   |   |   |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |  |  |             |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                  | 非 営 利 団 体   |         |      |       |   |   |   |   |             |   |             |   |   |   |   |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |  |  |             |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                  | 外 国   |         |      |       |   |   |   |   |             |   |             |   |   |   |   |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |     |       |  |  |  |  |  |  |             |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |         |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |        |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |



| 変更内容  | 変更案  | 変更前   | 変更理由   |                |              |          |               |                               |                               |   |                 |                                  |                 |              |          |           |               |                               |                               |                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| <p>7 社外(外部)へ支出した研究費の内訳区分の変更</p> <p>対象:調査票甲(企業A、B共通)、調査票乙(非営利団体・公的機関)及び調査票丙(大学等)</p> | <p>「外国」を「会社」、「大学」及び「その他」の3区分に詳細化し、「公的機関」の内訳区分について、「国・公営の研究機関」と「研究所等」を「国・公営、独立行政法人等の研究機関」に、「(国・地方公共団体の)「その他」と「公庫等」を「公営企業・公庫等」へ統合。</p> <p>○調査票甲〔第8面(企業Bは第7面)〕【13(同11)】社外へ支出した研究費、調査票乙〔第7面〕【15】外部へ支出した研究費及び調査票丙〔第8面〕【13】外部へ支出した研究費</p> <table border="1" data-bbox="549 525 1246 1155"> <thead> <tr> <th rowspan="2">総 額</th> <th colspan="10">支 出 額</th> <th colspan="10">うち自己資金から支出した研究費</th> </tr> <tr> <th>千</th><th>百</th><th>十</th><th>千</th><th>百</th><th>十</th><th>千</th><th>百</th><th>十</th><th>万</th><th>円</th> <th>千</th><th>百</th><th>十</th><th>千</th><th>百</th><th>十</th><th>千</th><th>百</th><th>十</th><th>万</th><th>円</th> </tr> </thead> <tbody> <tr> <td>公 共 的 機 関</td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td>国・公立大学</td> 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           | うち自己資金から支出した研究費 |              |          |           |               |                               |                               |                               |   |   | 千 | 百 | 十 | 千 | 百 | 十 | 千 | 百 | 十 | 万 | 円 | 千 | 百 | 十 | 千 | 百 | 十 | 千 | 百 | 十 | 万 | 円 | 公 共 的 機 関 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 国・公立大学 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 国・公営、独立行政法人等の研究機関 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 公営企業・公庫等 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | そ の 他 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 会 社 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 私 立 大 学 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 非 営 利 団 体 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 外 国 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 会 社 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 私 立 大 学 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 非 営 利 団 体 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 外 国 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | <table border="1" data-bbox="1439 525 2136 1155"> <thead> <tr> <th rowspan="2">総 額</th> <th colspan="10">支 出 額</th> <th colspan="10">うち自己資金から支出した研究費</th> </tr> <tr> <th>千</th><th>百</th><th>十</th><th>千</th><th>百</th><th>十</th><th>千</th><th>百</th><th>十</th><th>万</th><th>円</th> <th>千</th><th>百</th><th>十</th><th>千</th><th>百</th><th>十</th><th>千</th><th>百</th><th>十</th><th>万</th><th>円</th> </tr> </thead> <tbody> <tr> <td>公 共 的 機 関</td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td>国・公立大学</td> 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| 総 額   | 支 出 額  |   |  |                |              |          |               |                               |                               |   | うち自己資金から支出した研究費 |                                  |                 |              |          |           |               |                               |                               |                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   | 千  | 百   | 十  | 千              | 百            | 十        | 千             | 百                             | 十                             | 万   | 円               | 千                                | 百               | 十            | 千        | 百         | 十             | 千                             | 百                             | 十                             | 万   | 円 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 公 共 的 機 関   |  |   |  |                |              |          |               |                               |                               |   |                 |                                  |                 |              |          |           |               |                               |                               |                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 国・公立大学  |  |   |  |                |              |          |               |                               |                               |   |                 |                                  |                 |              |          |           |               |                               |                               |                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 国・公営、独立行政法人等の研究機関   |  |   |  |                |              |          |               |                               |                               |   |                 |                                  |                 |              |          |           |               |                               |                               |                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 公営企業・公庫等  |  |   |  |                |              |          |               |                               |                               |   |                 |                                  |                 |              |          |           |               |                               |                               |                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| そ の 他   |  |   |  |                |              |          |               |                               |                               |   |                 |                                  |                 |              |          |           |               |                               |                               |                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 会 社   |  |   |  |                |              |          |               |                               |                               |   |                 |                                  |                 |              |          |           |               |                               |                               |                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 私 立 大 学   |  |   |  |                |              |          |               |                               |                               |   |                 |                                  |                 |              |          |           |               |                               |                               |                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 非 営 利 団 体   |  |   |  |                |              |          |               |                               |                               |   |                 |                                  |                 |              |          |           |               |                               |                               |                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 外 国   |  |   |  |                |              |          |               |                               |                               |   |                 |                                  |                 |              |          |           |               |                               |                               |                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 会 社   |  |   |  |                |              |          |               |                               |                               |   |                 |                                  |                 |              |          |           |               |                               |                               |                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 私 立 大 学   |  |   |  |                |              |          |               |                               |                               |   |                 |                                  |                 |              |          |           |               |                               |                               |                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 非 営 利 団 体   |  |   |  |                |              |          |               |                               |                               |   |                 |                                  |                 |              |          |           |               |                               |                               |                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 外 国   |  |   |  |                |              |          |               |                               |                               |   |                 |                                  |                 |              |          |           |               |                               |                               |                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 総 額   | 支 出 額  |   |  |                |              |          |               |                               |                               |   | うち自己資金から支出した研究費 |                                  |                 |              |          |           |               |                               |                               |                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   | 千  | 百   | 十  | 千              | 百            | 十        | 千             | 百                             | 十                             | 万   | 円               | 千                                | 百               | 十            | 千        | 百         | 十             | 千                             | 百                             | 十                             | 万   | 円 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 公 共 的 機 関   |  |   |  |                |              |          |               |                               |                               |   |                 |                                  |                 |              |          |           |               |                               |                               |                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 国・公立大学  |  |   |  |                |              |          |               |                               |                               |   |                 |                                  |                 |              |          |           |               |                               |                               |                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 国・公営の研究機関   |  |   |  |                |              |          |               |                               |                               |   |                 |                                  |                 |              |          |           |               |                               |                               |                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| そ の 他   |  |   |  |                |              |          |               |                               |                               |   |                 |                                  |                 |              |          |           |               |                               |                               |                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 特 殊 法 人・独 立 行 政 法 人   |  |   |  |                |              |          |               |                               |                               |   |                 |                                  |                 |              |          |           |               |                               |                               |                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 研 究 所 等   |  |   |  |                |              |          |               |                               |                               |   |                 |                                  |                 |              |          |           |               |                               |                               |                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 公 庫 等   |  |   |  |                |              |          |               |                               |                               |   |                 |                                  |                 |              |          |           |               |                               |                               |                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| そ の 他   |  |   |  |                |              |          |               |                               |                               |   |                 |                                  |                 |              |          |           |               |                               |                               |                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 会 社   |  |   |  |                |              |          |               |                               |                               |   |                 |                                  |                 |              |          |           |               |                               |                               |                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 私 立 大 学   |  |   |  |                |              |          |               |                               |                               |   |                 |                                  |                 |              |          |           |               |                               |                               |                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 非 営 利 団 体   |  |   |  |                |              |          |               |                               |                               |   |                 |                                  |                 |              |          |           |               |                               |                               |                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 外 国   |  |   |  |                |              |          |               |                               |                               |   |                 |                                  |                 |              |          |           |               |                               |                               |                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <p>8 営業利益高の削除</p> <p>対象:調査票甲(企業A、B共通)</p>   | <p>企業の現況として把握している各種項目のうち「営業利益高」を削除。</p> <p>○調査票甲〔第1面〕【1】企業の現況</p> <table border="1" data-bbox="549 1386 1291 1554"> <tr> <td>企業の事業の種類(年度)</td> <td>生産品名又は営業種目を売上実績の多いものから順に記入してください</td> </tr> <tr> <td>従業員総数(3月31日現在)</td> <td>資本金(3月31日現在)</td> <td>総売上高(年度)</td> </tr> <tr> <td>十 万 千 百 十 一 人</td> <td>十 兆 兆 千 億 百 億 十 億 億 千 万 百 万 円</td> <td>十 兆 兆 千 億 百 億 十 億 億 千 万 百 万 円</td> </tr> </table>   | 企業の事業の種類(年度)  | 生産品名又は営業種目を売上実績の多いものから順に記入してください                       | 従業員総数(3月31日現在) | 資本金(3月31日現在) | 総売上高(年度) | 十 万 千 百 十 一 人 | 十 兆 兆 千 億 百 億 十 億 億 千 万 百 万 円 | 十 兆 兆 千 億 百 億 十 億 億 千 万 百 万 円 | <table border="1" data-bbox="1380 1386 2107 1617"> <tr> <td>企業の事業の種類(年度)</td> <td>生産品名又は営業種目を売上実績の多いものから順に記入してください</td> </tr> <tr> <td>従業員総数(3月31日現在)</td> <td>資本金(3月31日現在)</td> <td>総売上高(年度)</td> <td>営業利益高(年度)</td> </tr> <tr> <td>十 万 千 百 十 一 人</td> <td>十 兆 兆 千 億 百 億 十 億 億 千 万 百 万 円</td> <td>十 兆 兆 千 億 百 億 十 億 億 千 万 百 万 円</td> <td>十 兆 兆 千 億 百 億 十 億 億 千 万 百 万 円</td> </tr> </table> | 企業の事業の種類(年度)    | 生産品名又は営業種目を売上実績の多いものから順に記入してください | 従業員総数(3月31日現在)  | 資本金(3月31日現在) | 総売上高(年度) | 営業利益高(年度) | 十 万 千 百 十 一 人 | 十 兆 兆 千 億 百 億 十 億 億 千 万 百 万 円 | 十 兆 兆 千 億 百 億 十 億 億 千 万 百 万 円 | 十 兆 兆 千 億 百 億 十 億 億 千 万 百 万 円 | <p>企業にとって忌避感の強い調査項目であること、営業利益高を削除しても政策上の特段の支障は確認されなかったこと、本調査で把握しなくとも、他の企業関連統計の調査票情報等の利活用によって分析が可能であることから、記入者負担の軽減に資するため、営業利益高を削除。</p> |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 企業の事業の種類(年度)  | 生産品名又は営業種目を売上実績の多いものから順に記入してください   |   |  |                |              |          |               |                               |                               |   |                 |                                  |                 |              |          |           |               |                               |                               |                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 従業員総数(3月31日現在)  | 資本金(3月31日現在)   | 総売上高(年度)  |  |                |              |          |               |                               |                               |   |                 |                                  |                 |              |          |           |               |                               |                               |                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 十 万 千 百 十 一 人   | 十 兆 兆 千 億 百 億 十 億 億 千 万 百 万 円  | 十 兆 兆 千 億 百 億 十 億 億 千 万 百 万 円   |  |                |              |          |               |                               |                               |   |                 |                                  |                 |              |          |           |               |                               |                               |                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 企業の事業の種類(年度)  | 生産品名又は営業種目を売上実績の多いものから順に記入してください   |   |  |                |              |          |               |                               |                               |   |                 |                                  |                 |              |          |           |               |                               |                               |                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 従業員総数(3月31日現在)  | 資本金(3月31日現在)   | 総売上高(年度)  | 営業利益高(年度)  |                |              |          |               |                               |                               |   |                 |                                  |                 |              |          |           |               |                               |                               |                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 十 万 千 百 十 一 人   | 十 兆 兆 千 億 百 億 十 億 億 千 万 百 万 円  | 十 兆 兆 千 億 百 億 十 億 億 千 万 百 万 円   | 十 兆 兆 千 億 百 億 十 億 億 千 万 百 万 円                          |                |              |          |               |                               |                               |   |                 |                                  |                 |              |          |           |               |                               |                               |                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <p>9 調査票記入上の注意事項の追加</p> <p>対象:調査票甲(企業A、B共通)</p>                                     | <p>○ 記入の際は「調査票記入上の注意」を参照してください。</p> <p>○ <b>この調査は法人を単位に行っています。このため、連結決算を行っている法人であっても、法人単体分を記入してください。</b></p> <p>○ 研究実施の有無にかかわらず1面から3面の「[3]研究実施の有無」まで記入し、研究を実施している場合(社外へ研究費を支出している場合を含む。)には、更に3面の「[4]研究関係従業者数(3月31日現在)」から8面まで記入してください。※</p> <p>○ 従業者関係事項は3月31日現在、財務関係事項は3月31日又はこの直近の決算日からさかのぼる1年間分を記入してください。</p> <p>○ 記入した調査票は、お手数ながら7月15日までに郵送により提出してください。</p> <p>※企業Bの場合は、第7面まで</p>   | <p>○ 記入の際は「調査票記入上の注意」を参照してください。</p> <p>○ 研究実施の有無にかかわらず1面から3面の「[3]研究実施の有無」まで記入し、研究を実施している場合(社外へ研究費を支出している場合を含む。)には、更に3面の「[4]研究関係従業者数(3月31日現在)」から8面まで記入してください。※</p> <p>○ 従業者関係事項は3月31日現在、財務関係事項は3月31日又はこの直近の決算日からさかのぼる1年間分を記入してください。</p> <p>○ 記入した調査票は、お手数ながら7月15日までに郵送により提出してください。</p> <p>※企業Bの場合は、第7面まで</p> | <p>連結決算の値を記入してくる企業があることから、法人単体での記入を促すため、調査票上に明記する。</p> |                |              |          |               |                               |                               |   |                 |                                  |                 |              |          |           |               |                               |                               |                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |       |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |