Department of the Treasury
Internal Revenue Service

For the 2009 calendar year, or tax year beginning and ending

C Name of organization
KRAMDEN INSTITUTE, INC.
Doing Business As

D Employer identification number
74-3108814

E Telephone number
(919) 638-6200

F Name and address of principal officer:
CARRIE CLARK
P.O. BOX 13483, RTP, NC 27709

G Gross receipts
165,958.

H(a) Is this a group return for affiliates? 
[ ] Yes [ ] No

H(b) Are all affiliates included? [ ] Yes [ ] No

I Tax-exempt status: [ ] 501(c)(3) [ ] (insert no.) [ ] 4947(a)(1) or [ ] 527

J Website: WWW.KRAMDEN.ORG

K Form of organization: [ ] Corporation [ ] Trust [ ] Association [ ] Other

L Year of formation: 2003 [ ] State of legal domicile: NC

Part I Summary

1 Briefly describe the organization's mission or most significant activities: TO PROVIDE COMPUTERS TO LOW INCOME STUDENTS

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

3 Number of voting members of the governing body (Part VI, line 1a) 8

4 Number of independent voting members of the governing body (Part VI, line 1b) 8

5 Total number of employees (Part V, line 2a) 4

6 Total number of volunteers (estimate if necessary) 1750

7a Total gross unrelated business revenue from Part VIII, column (C), line 12 0.

7b Net unrelated business taxable income from Form 990-T, line 34 0.

8 Contributions and grants (Part VIII, line 1h) 123,696. 100,447.

9 Program service revenue (Part VIII, line 2g) 12,719. 65,511.

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 295.

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 136,710. 165,958.

12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 136,710. 165,958.

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 72,593. 87,121.

14 Benefits paid to or for members (Part IX, column (A), line 4) 4,676.

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 91,487. 100,436.

16 Professional fundraising fees (Part IX, column (A), line 11e) 164,080. 187,557.

17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) <27,370. <21,599.

18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) <27,370. <21,599.

19 Revenue less expenses. Subtract line 18 from line 12 33,571. 12,393.

20 Total assets (Part X, line 16) 1,162. 1,583.

21 Total liabilities (Part X, line 26) 32,409. 10,810.

Part II Signature Block

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

Sign Here

Signature of officer

CARRIE CLARK, DIRECTOR OF OPERATIONS

Type or print name and title

Date
5/10/10

Form 990 (2009)