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CISDJB8M63

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501 (c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service Attack
Name of the organization

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

| Employer Identification number

			roundacton								POT 10:			
Part I	Reason for	Pub	ic Charity Stat	us (All o	ganizations	must	compl	ete thi	s part	.) (see	instru	ctions)		
The orga	inization is not a	a prival	e foundation becau	ise it is: (Pl	lease check on	ly one o	rganızat	ion.)						
1 L	A church, com	vention	of churches or ass	ociation of	churches desc	ribed in	section	170(ъ)(IXAXI).					
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)													
3	A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.)													
4 [A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's													
	name, city, an													
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)													
6	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).													
7 [An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)													
8 🖳	A community trust described in section 170(b)(1)(A)(vi), (Complete Part II.)													
9 <u>X</u>														
10	An organizatio	n orga	nized and operated	exclusively	to test for pul	olic safet	y. See :	section '	509(a)(4). (see	instruction	ons)		
11														
	a Type I	,,,,,,	b Type II		<u>—</u>				ed		۵□	Type III-	Other	
e By checking this box. Legify that the organization is not controlled directly or indirectly by one or more disqualified, persons other														
1	than foundation 509(a)(2).	n man	agers and other tha	n one or m	ore publicly su	pported	organiza	nions de	scribed	in sect	on 509(a)(1) or sec	tion	
f	If the organiza check this box	tion re	ceived a written det	ermination	from the IRS t	hat is a	Type I, 1	ype II c	т Туре	III supp	orting org	anization,		
9	Since August	17, 200	6, has the organiza	ation accep	ted any gift or	contribu	ition fron	n any of	the fol	lowing p	ersons?			
													Yes	No
	(i) a person	who d	irectly or indirectly	controls, ei	ther alone or to	ogether v	with pers	ions des	scribed	in (ii) ar	nd (iii) br	11-0		
below, the governing body of the supported organization? (fi) a family member of a person described in (i) above?										• • • • • • • •	11g()	├—		
(ii) a family member of a person described in (i) above?										11g (ii)	-			
h			information about t						•• •••			11800	<u> </u>	
	1) Name of Supporter		GD EIN							-		AdD Amoun	4 of \$1-	
•	Organization	Organization			(EII) Type of organization (described on lines 1-9 above or URC section		(Iv) is the organization in col. (i) listed in your		(v) Did you notify the organization in col. (1) of		(vf) is the organization in col. (i) organized in the		(MI) Amount of Support	
				(see instructions))		governing		your support?		U.S.?		ı		
						Yes	No	Yes	No	Yes	No			
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				1										
Total				1										

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Sche Par	dule A (Form 990 or 990-EZ) 200 t II Support Schedule for	Organizations	Described in	Sections 170	ı O(b)(1)(A)(iv) a	84-1601705 nd 1 70(b)(1)(A)	Page 2 (vi)
Sec	(Complete only if you checke tion A. Public Support	d the box on line	5, 7, or 8 of Part	1.)			
	ndar year (or fiscal year nning in) >	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')						
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge						
4	Total Add lines 1-3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4			ł		l	
Sec	tion B. Total Support						
Cale begi	ndar year (or fiscal year ming in) >	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4				<u> </u>		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources						
9	Net income form unrelated business activities, whether or not the business is regularly carried on.						
10	Other income. Do not include gain or loss form the sale of capital assets (Explain in Part IV.).						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activi	ties, etc. (see ins	tructions)			12	
13	First five years. If the Form 990 is organization, check this box and	s for the organiza	tion's first, second	d, third, fourth, o	r fifth tax year as a	section 501(c)(3)	· · · · · · · · · · · · · · · · · · ·
	tion C. Computation of Pu	blic Support F	Percentage				
	Public support percentage for 20						<u> </u>
	Public support percentage for 200						
	33-1/3 support test - 2008. If the and stop here. The organization	qualifies as a pub	licly supported on	ganization	•••••	••••••	▶∐
b	33-1/3 support test - 2007, If the and stop here. The organization (organization did : qualifles as a publ	not check a box o licly supported on	n line 13, or 16a, ganization	, and line 15 is 33-	1/3% or more, che	ck this box
17a	10%-facts-and-circumstances te or more, and if the organization of the organization meets the facts	neers me tacts-al	JO-CIRCIIMSI XICES.	led theat this i	hay and stay have	Funisin in Dark N	how
	10%-facts-and-circumstances te or more, and if the organization reganization meets the Yacts-and	neets the Tacts-ar I-circumstances'	nd-circumstances test. The organiz	' test, check this t ation qualifies as	box and stop here a publicly support	. Explain in Part IV ed organization	how the
18 BAA	Private foundation. If the organiz	ation did not chec	k a box on line, 1	3, 16a, 16b, 17a,			
					9	shedule A /Form 90	#I AT USAN.E71. 2000

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support Calendar year (or fiscal yr beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 1 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.) 118, 379. 111, 024. 145, 926. 196, 796. 138, 638.	
Section A. Public Support Calendar year (or fiscal yr beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 1 Gifts, grants, contributions and membership tees received. Oo	
Calendar year (or fiscal yr beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 1 Gifts, grants, contributions and membership tees received. (Do	
1 Gifts, grants, contributions and membership fees received. (Do	
membership fees received. (Do	(f) Total
not include unusual grants.) 118,379. 111,024. 145,926. 196,796. 138,638.	710,763.
2 Gross receipts from admissions, merchandise sold	
or services performed, or facilities furnished in a activity	
that is related to the	
organization's tax-exempt 9,600. 35,644. 48,592.	02.026
purpose	93,836.
not an unrelated trade or business under section 513	0.
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalt	
its behalt	<u> </u>
facilities furnished by a governmental unit to the organization without charge	_
\	0.
6 Total. Add lines 1-5	804,599.
2, 3 received from disqualified persons	0.
b Amounts included on lines 2 and 3 received from other than	
disqualified persons that exceed the greater of 1% of	
the total of lines 9, 10c, 11,	
and 12 for the year or \$5,000 0. 0. 0. 0.	0.
c Add lines 7a and 7b	0.
8 Public support (Subtract line	
7c from line 6)	804,599.
	(f) Total
9 Amounts from line 6	804,599.
dividends, payments received on securities loans, rents.	
royalties and income form	
similar sources	4,865.
b Unrelated business taxable income (less section 511	
taxes) from businesses	
acquired after June 30, 1975	0.
c Add lines 10a and 10h 0. 0. 3. 0. 4,862.	4,865.
activities not included utline 10b,	
whether or not the business is regularly carried on	0.
12 Other income. Do not include	<u>-</u>
gain or loss from the sale of capital assets (Explain in	
Part IV.)	0.
13 Total support. (ed as 9, 10; 11, and 12)	809,464.
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here	▶ [
Section C. Computation of Public Support Percentage	
15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	99.4%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	0.0%
Section D. Computation of Investment Income Percentage	
17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)	0.6%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h.	0.0%
193 33-1/3 support tests — 2008. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	ine 17 is not
b 33-1/3 support tests = 2007. If the organization did not check a box on line 14 or 10a, and line 15 is many than 32 1/38.	and line 19
is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.	
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions	

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Schedule 4	A (Form 990 or 990-EZ) 2008	Computers for	Kids Foundation	84-1601705	Page 4
Part IV	Supplemental Informat	tion. Complete this	part to provide the	n 84-1601705 explanation required by Part II, line 10 additional information. (see instruction	0;
	Part II, line 17a or 17b;	or Part III, line 12	. Provide any other	additional information. (see instruction	ns)

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BAA	<del></del>	<del></del>	EEA0404L 10/07/08	Schedule A (Form 990 or 990-E	Z) 2008