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**Return of Organization Exempt From Income Tax** 

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Rublic

	<u>A F</u>	or the	= 2008 calendar year, or tax year beginning $OCT = 1$ , $2008$ and end	ding S	<u>EP 30, 2</u>	<u>009</u>	
	Вс	heck if	Please use IRS		D Employer ic	lentifi	cation number
		Addre	ss label or milia IVD DIT TNOMI MILION	- 1			
		Name	type		4	2-1	457548
	F	Initial return		om/suite	E Telephone r		
		Termi	Specific 1 COO GOT DENT A GDENT DD TYPE		•		956-3696
		Jation ∏Amen	ded   4	<del>, ,  </del>			
	누	Jretum ∏Applic		ŀ	G Gross receipts \$		9,339,181.
	L	Jtiòn pendi	F Name and address of principal officer. THOMAS BRENNAN		H(a) Is this a gi		Yes X No
			SAME AS C ABOVE		for affiliate		
							cluded?YesNo
			empt status: LX 501(c) (3 ) ◀ (insert no.)				list. (see instructions)
			organization: X Corporation Trust Association Other		H(c) Group exe		
	Pa	irt I	Summary	I L TEAL O	1 101111411011. 19	<u> </u>	A State of legal domicile: IA
			Briefly describe the organization's mission or most significant activities: TO SUP	PORT	THE ADV	ANC	EMENT OF
	Governance	·	THE DISCIPLINE OF COMPUTATIONAL SCIENCE BY				
	'n	2	Check this box  if the organization discontinued its operations or disposed				
	) Ve		Number of voting members of the governing body (Part VI, line 1a)		2070 01 110	3	4
	Ğ		Number of independent voting members of the governing body (Part VI, line 1b)			4	3
	Activities &		Total number of employees (Part V, line 2a)			5	34
	/itie		Total number of volunteers (estimate if necessary)			6	0
	흃		Total gross unrelated business revenue from Part VIII, line 12, column (C)			7a	0.
	Ā		Net unrelated business taxable income from Form 990-T, line 34			7b	0.
			The distributed business taxable meeting from 1 only 500 1, fine 54	T	Prior Year	1,0	Current Year
	•	8	Contributions and grants (Part VIII, line 1h)		28,5	83.	Ourrent real
	Ĕ,			.	8,942,8		9,337,070.
	Revenue		Program service revenue (Part VIII, line 2g)		3,6		2,111.
	ä		Other revenue (Part VIII, column (A), lines 5, 4, and 7d)	-		12.	2,111.
			Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-	8,975,0	20	9,339,181.
			Grapts and similar amounts paid (Part IX, column (A), lines 1-3)		0,313,0	20.	9,339,101.
		14	Berefits pale 6 6 Member (Part X, column (A), line 4)	•		-	
	10		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	•	2,576,6	13	2,833,206.
	Expenses		Pro essonal jundraising fees (Pario) column (A), line 11e)	•	2,210,0	40.	2,033,200.
	per	loa h	Total fundraising expenses (Part Coplumn (D), line 25)			200	
	Ä	17	Out 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		5,883,9		6,388,228.
			Other expanses (Par IX, column IXI, Ines 11a-11d, 111-24i)  Total expanses (Def thes 13-17 (must equal Part IX, column (A), line 25)		8,460,6		9,221,434.
		19	Revenue less expenses. Subtract line 18 from line 12		514,4		117,747.
	es S		Teveride iess expenses. Subtract line to north line 12			- 1	
	Assets or d Balances	20	Total assets (Part X, line 16)	<u>                                   </u>	Seginning of Ye 2,427,0	61.	End of Year 2,568,041.
	ASS	21	Total liabilities (Part X, line 26)		1,796,6	-	1,821,141.
<i>æ</i> ,	Pund Fund		Net assets or fund balances Subtract line 21 from line 20	• -	630,3		746,900.
2010		it II	Signature Block	· -	030,3	<u>/ J • j</u>	140,300.
<b>(</b>		·~ . w	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and st	tatements, an	id to the best of my l	nowled	ge and belief, it is true, correct,
<b>€</b>			and complete Declaration of preparer (other than officer) is based on all information of which preparer has any k	knowledge			
	Sigr		I Monar Deman CFO		X	12	130/2014
JAI	Here		Signature of officer	•	Date	<del>. 0</del>	0-1200
-		-	THOMAS BRENNAN, CFO				
			Type or print name and title		<del></del>		<del></del>
影			Preparer's Date	Chec			er's identifying number
Z	Paid	. 1	signature / Mit C. Wan 12-22	-79   self-	loyed 🕨 🔲	(see ins	structions)
SCANNED		arer's	Firm's name (or / CI.T.F.TPON CIINDEDCON II.D.	_ , <sub>1</sub> omp	EIN ►		
Ø	Use	Unly	self-employed) 2700 WESTOWN PARKWAY #400		E11, P		
			WEST DES MOINES, IA 50266-1411		Phone no	▶ 5	15-222-4400
	Mav	the IF	RS discuss this return with the preparer shown above? (see instructions)			<u>ر ،</u>	X Yes No
	···			<del></del> -			163 [] 140

Păı	TIV Checklist of Required Schedules			
927 2 300	22.5% /		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			170
•	If "Yes," complete Schedule A	1	х	ĺ
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	-	_	
3	A Para Stand M. North Company and Company	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		X
4		-		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and	_		
_	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		<del> </del>
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice			
	on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	,		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 257			l
	If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	_X_	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was			1
	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	_X_	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the U.S?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b	_	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity			
	located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Х
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Х
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	_	Х
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	X	
	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K.			1
	If "No", go to question 25	24a		X_
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	_	<del></del>
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
•	any tax-exempt bonds?	24c		
а	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	240		
LUG	described as an electrical behavior of the second of Orbital by Contract to Co	25a		х
L	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a	ZJą		
ນ	· · · · · · · · · · · · · · · · · · ·	OE L		v
00	prior year? If "Yes," complete Schedule L, Part I	25b	<del></del>	X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	ا مم ا		v
0-	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial	ا _ ِ ا		
	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		X

Form **990** (2008)

### Part IV | Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee		- [	-
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an	7.5		.
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other	13.5	^=	
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		<u>X</u>
b	Have a family member who had a direct or indirect business relationship with the organization?	-		
	If "Yes," complete Schedule L, Part IV	28b		_X_
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional	İ		
	corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		_X_
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		_X_
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	ĺ	İ	
	contributions? If "Yes," complete Schedule M	30	ļ	_X_
31	Did the organization liquidate, terminate, or dissolve and cease operations?	-		
	If "Yes," complete Schedule N, Part I	31	Ĺ	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete		[	
	Schedule N, Part II	32		_X_
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		i	
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		<u>X</u>
34	Was the organization related to any tax-exempt or taxable entity?		Ì	
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		_X_
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		_X_
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		ļ	
	If "Yes," complete Schedule R, Part V, line 2	36		<u>X</u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	Ì		
	and that is treated as a partnership for federal income tax purposes? If "Yes, " complete Schedule R, Part VI	37	<u> </u>	X

Form 990 (2008)

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable garning			
	(gambling) winnings to prize winners?	1c		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 34			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country: ►			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and			
	Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			
	Tax Shelter Transaction?	5c		
	Did the organization solicit any contributions that were not tax deductible?	6a		X
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a		X
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b_		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		v
	to file Form 8282?	7c		X
a	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	79 7h		X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3)			
•	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have			
	excess business holdings at any time during the year?	8		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter: N/A			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter: N/A			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b			
		Form	990 (	2008)

Part VI. Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code)

<u>Sec</u>	tion A. Governing Body and Management			
			Yes	No_
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,	- 1		
	processes, or changes in Schedule O. See instructions.		ر د ر د	
1a	Enter the number of voting members of the governing body			أ، ج
b	Enter the number of voting members that are independent			[- ' ']
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other		<u> </u>	
	officer, director, trustee, or key employee?	2		<u>X</u>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	ł		
	of officers, directors or trustees, or key employees to a management company or other person?	3_		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5_		X
6	Does the organization have members or stockholders?	6_		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a		<u>X</u>
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	<u>7b</u>	- FE	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	15.		, a,
	by the following	تشئن	/ XP-1:	
а		8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9a	Does the organization have local chapters, branches, or affiliates?	<u>9a</u>		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with those of the organization?	9b	-	
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must			
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11	<u> </u>	<u> X</u>
Sec	tion B. Policies		Γ	i
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
ь	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise		.,	
	to conflicts?	12b	X	-
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		7,	
	ın Schedule O how this is done	12c	X	_
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	X	U-4-
15	Did the process for determining compensation of the following persons include a review and approval by independent	ه بر	130°	.
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision:	<u> </u>		3,5
	The organization's CEO, Executive Director, or top management official?	15a	<u> </u>	X
b	Other officers or key employees of the organization?	15b		X
	Describe the process in Schedule O (see instructions)		1. 1	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	<u> </u>		
	taxable entity during the year?	16a	- T.	X
þ	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation	. , , , (	a di	
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's	ننشا	1.4.	المتحد
_	exempt status with respect to such arrangements?	16b	L	<u> </u>
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	for		
	public inspection. Indicate how you make these available. Check all that apply			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	nd fina	ancial	
	statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person of	tion 🕽	_	
	THE KRELL INSTITUTE - 515-956-3696			
	1609 GOLDEN ASPEN DRIVE, SUITE 101, AMES, IA 50010			
83200	5 DR	Form	990	(2008)

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A)	(B)		(C)					(D)	(E)	(F)	
Name and Title	Average hours	Position (check all that					١٧١	Reportable compensation	Reportable compensation	Estimated amount of	
	per week	Individual trustee or director	Institutional trustee	Officer		Highest compensated E		from the organization (W-2/1099 MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations	
B G BECK											
MEMBER	0.50	X	<u> </u>		_	L		0.	0.	0.	
ROBERT HOWARD											
MEMBER	0.50	X	L.	L				0.	0.		
ALLAN BURMAN											
MEMBER	0.50	X	<u> </u>		L_			0.	0.	0.	
JAMES CORONES											
PRESIDENT/DIRECTOR	40.00	<u> </u>	lacksquare	X	_	_		307,730.	0.	31,870.	
THOMAS BRENNAN									_		
CFO	40.00		ļ	X	ļ	-		119,051.	0.	22,569.	
JOHN ZIEBARTH											
SR VICE PRESIDENT	40.00	<u> </u>	<u> </u>	├	X	<u> </u>		207,799.	0.	29,880.	
GARY JOHNSON	1000							005 500	•	06 300	
SR ASSOCIATE DIRECTOR	40.00	<u> </u>	$\vdash$	<u> </u>	-	X		207,720.	0.	26,308.	
NAZANIN IMANI	40.00	i				١,,		100 011	0	24 654	
TECHNOLOGY MANAGER	40.00	-	┢	<u> </u>	-	X		106,911.	0.	24,654	
MARY SCHON SR. SCIENTIST	40.00			ł		$ _{\mathbf{X}}$		113,527.	0.	17,222	
JAMES GALAROWICZ	40.00	+-	-	┢	$\vdash$	┢	-	113,321.	<u> </u>	11,222	
SENIOR COMPUTER SCIE	40.00					$ _{\mathbf{x}}$		141,997.	0.	23,370	
DONALD MAGHRAK	10.00		$\vdash$	†  -	┢	1	_	141,337.	<u> </u>	237373	
SR COMPUTER SCIENTIST	40.00				-	х	_	108,985.	0.	16,585.	

832007 12-18-08

42-1457548

Par	t VIII Section A. Officers, Directors, Tru	stees, Key E	mple	oyee	es, a	nd I	High	est	Compensated Employ	ees (continued)	
	(A)					C)			(D)	(E)	(F)
	Name and title	Average			Pos				Reportable	Reportable	Estimated
		hours per	(C	heck	(all	that	app	oly)	compensation from	compensation from related	amount of other
		week	Individual trustee or director						the	organizations	
			5	3	]		Highest compensated employee		organization	(W-2/1099-MIS	· 1
			truste	institutional trustee		2	ad mo	}	(W-2/1099-MISC)		organization and related
			Maga	triton	5	Key employes	loyee	È			organizations
			3	TE SE	Officer	ξe.	문등	호			
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			ł	1							
1b	Total		L	L	L		<u> </u>	1	1,313,720.		0. 192,458.
2	Total number of individuals (including those			ed n	nore	tha	n \$1	00.0			01, 102, 100.
	compensation from the organization	<u>,</u>			•				, 		. >8
											Yes No
3	Did the organization list any former officer,	director or tru	stee	, ke	у еп	nplo	yee,	or h	highest compensated er	nployee on	·
	line 1a? If "Yes," complete Schedule J for s										з Х
4	For any individual listed on line 1a, is the su										
_	and related organizations greater than \$15										4 X
5	Did any person listed on line 1a receive or a	-			rom	any	/ unr	elat	ted organization for serv	ices rendered to	5 X
Sec	the organization? If "Yes," complete Sched tion B. Independent Contractors	ule J for such	pers	OH		•			• • • • • • • • • • • • • • • • • • • •		131 14
1	Complete this table for your five highest co	mpensated in	dep	ende	ent c	onti	racto	ors t	that received more than	\$100,000 of comp	pensation from
	the organization. NONE					_					
	(A)								(B)		(C)
	Name and business	address							Description of s	services	Compensation
		·									· · · · · · · · · · · · · · · · · · ·
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									L <u></u>		Concession of the second of th
2	Total number of independent contractors (i		e ın	1) w	ho r	ecer	ved	mor	re than \$100,000 in com		
	from the organization								<del></del>	<u> </u>	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
											Form <b>990</b> (2008)

### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16		_		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	420 E20	61 601	272 011	
_	trustees, and key employees	438,528.	64,684.	373,844.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
7	persons described in section 4958(c)(3)(B)	1,802,356.	1,198,002.	604,354.	
7 2	Other salaries and wages Pension plan contributions (include section 401(k)	1,002,330	1,10,002.	004,004	
8	and section 403(b) employer contributions)	203,985.	118,197.	85,788.	
9	Other employee benefits	235,886.	127,212.	108,674.	
9 10	Payroll taxes	152,451.	91,483.	60,968.	
11	Fees for services (non-employees):		32,200	00,000	
	Management	45,048.		45,048.	
_	Legal	20,174.	11,247.	8,927.	
	Accounting	21,343.		21,343.	
	Lobbying			, ,	
	Professional fundraising services. See Part IV, line 17	•			
f	Investment management fees				
g	Other _	161,192.	161,192.		
12	Advertising and promotion				
13	Office expenses	226,763.	159,946.	66,817.	
14	Information technology	130,509.		130,509.	
15	Royalties				
16	Occupancy	185,160.		185,160.	
17	Travel	497,864.	431,922.	65,942.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	203,818.	195,307.	8,511.	··· · · · · · · · · · · · · · · · · ·
20	Interest	2,000.		2,000.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	4 855		4 805	
23	Insurance	4,795.		4,795.	
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	STIPENDS	2,625,462.	2,625,462.		
b	TUITION & FEES	1,929,166.	1,929,166.		
С	INDIRECT ALLOC-SERVER	0.	115,635.	-115,635.	
d	PRACTICUM STIPENDS	186,240.	186,240.		
е	INDIRECT ALLOC-SPACE	0.	64,129.	-64,129.	
f	All other expenses	148,694.	115,773.	32,921.	
25	Total functional expenses. Add lines 1 through 24f	9,221,434.	7,595,597.	1,625,837.	0
26	Joint Costs. Check here I If following				
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				Form <b>990</b> (2008

832010 12-18-08

Ра	π 🗡	Dalance Sheet	<del>_</del>	
			(A) Beginning of year	(B) End of year
	1	Cash · non-interest-bearing	1,538,338. 1	1,657,763
	2	Savings and temporary cash investments	2	
	3	Pledges and grants receivable, net	3	-
	4	Accounts receivable, net	877,275. 4	880,895
	5	Receivables from current and former officers, directors, trustees, key	31,72,33,4	000,033
		employees, or other related parties. Complete Part II of Schedule L	5	
	6	Receivables from other disqualified persons (as defined under section		
	ľ	4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete		
		Part II of Schedule L		
"	7	Notes and loans receivable, net	7	
Assets	8	Inventories for sale or use	8	
As	9	Prepaid expenses and deferred charges	11,448. 9	15,383
			11,440. 9	15,565
		Less: accumulated depreciation. Complete Part VI of Schedule D 10b	0 · 10c	
	44		<del></del>	
	11 12	Investments - publicly traded securities Investments - other securities. See Part IV, line 11	11	14,000
	13		12	14,000
		Investments - program-related. See Part IV, line 11	13	<del></del>
	14 15	Intangible assets	14	<del></del>
		Other assets. See Part IV, line 11	2,427,061.16	2,568,041
	16	Total assets. Add lines 1 through 15 (must equal line 34)	· · · · · · · · · · · · · · · · · · ·	1,088,313
	17	Accounts payable and accrued expenses	<del></del>	1,000,313
	18	Grants payable	981,473. 19	720 660
	19	Deferred revenue	<del></del>	729,669
	20	Tax-exempt bond liabilities	20	· · · · · · · · · · · · · · · · · · ·
ies	21	Escrow account liability. Complete Part IV of Schedule D	21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees,		
Lia		highest compensated employees, and disqualified persons. Complete Part II		•
	~	of Schedule L	22 071 00	2 150
	23	Secured mortgages and notes payable to unrelated third parties	22,971. 23	3,159
	24	Unsecured notes and loans payable	24	
	25	Other liabilities. Complete Part X of Schedule D	1,796,688.26	1,821,141
	26	Total liabilities. Add lines 17 through 25	1,796,688. 26	1,021,141
		Organizations that follow SFAS 117, check here   X and complete		
ces	0.7	lines 27 through 29, and lines 33 and 34.	[ E42 202   n-	650 010
_	27	Unrestricted net assets	542,383. 27 31,290. 28	658,019 32,181
Fund Balaı	28	Temporarily restricted net assets	FC 500	
pur	29	Permanently restricted net assets	56,700. 29	56,700
Ę		Organizations that do not follow SFAS 117, check here and		
SO		complete lines 30 through 34.		
set	30	Capital stock or trust principal, or current funds	30	-
Net Assets or	31	Paid-in or capital surplus, or land, building, or equipment fund	31	
Net	32	Retained earnings, endowment, accumulated income, or other funds	630,373.33	746 000
	33	Total net assets or fund balances		746,900
Da.	34 t XI	Total liabilities and net assets/fund balances	2,427,061.34	2,568,041
Fai	יאו	Financial Statements and Reporting		Yes   No
_	<b>^</b>	unting method used to prepare the Form 990: Cash X Accrual	7 04-	1.65 1.15
1		-	☐ Other	
2a		the organization's financial statements compiled or reviewed by an independent	accountant?	2a X
b		the organization's financial statements audited by an independent accountant? is to lines 2a or 2b, does the organization have a committee that assumes respondent.		2b X
С				
_		w, or compilation of its financial statements and selection of an independent acco	•	2c X
За		result of a federal award, was the organization required to undergo an audit or audit	aits as set forth in the Single Audit	1 1 1
		nd OMB Circular A-133?	•	3a X
		s," did the organization undergo the required audit or audits?		3b X
83201	1 12-18-	.na		Form <b>990</b> (2008

## SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

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

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

2008
Open to Public

Name of the organization

Employer identification number

r in the same	D		LL INSTITUTE					<del></del>	4.2	-145/548
Part I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	e this par	t.) (see ins	tructions)		
The organ	nization is not a	a private foundation I	because it is: (Please ch	eck only o	ne organiz	ation.)				
1 🖳	A church, co	nvention of churches	s, or association of chur	ches desc	ribed in se	ction 170	(b)(1)(A)(i)	).		
2 🖳	A school des	cribed in section 17	0(b)(1)(A)(ii). (Attach Sc	hedule E.)						
з 🖳	A hospital or	a cooperative hospit	tal service organization	described	in section	170(b)(1)	( <b>A)</b> (iii). (At	tach Sche	dule H.)	
4 📖	A medical res	search organization of	operated in conjunction	with a hos	pital descr	nbed in se	ction 170	(b)(1)(A)(iii	i). Enter th	ne hospital's name,
	city, and stat	e:								
5 🗀	An organizat	on operated for the	benefit of a college or u	niversity ov	wned or op	erated by	a governi	mental und	t descnbe	d in
	section 170	(b)(1)(A)(iv). (Comple	ete Part II)							
6 🔲	A federal, sta	ite, or local governm	ent or governmental uni	t described	d in sectio	n 170(b)(	1)(A)(v).			
7 X	An organizat	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ental unit c	or from the	general p	ublic described in
	section 170(	b)(1)(A)(vi). (Comple	te Part II)							
8 🔲	A community	trust described in s	ection 170(b)(1)(A)(vi).	(Complete	Part II)					
9 🔲	An organizat	on that normally rec	eives: (1) more than 33	1/3% of its	support fi	rom contr	ibutions, n	nembershij	p fees, an	d gross receipts from
	activities rela	ted to its exempt fur	nctions - subject to certa	ain excepti	ons, and (2	2) no more	e than 33 1	1/3% of its	support f	rom gross investment
	income and i	unrelated business ta	axable income (less sec	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	nization a	fter June 30, 1975
	See section	509(a)(2). (Complete	the Part III)							
10 🔲	An organizat	ion organized and op	perated exclusively to te	st for publ	ıc safety. S	See sectio	on 509(a)(4	4). (see ins	tructions)	
11 🗔	An organizat	ion organized and op	perated exclusively for the	ne benefit (	of, to perfo	orm the fu	nctions of,	, or to carry	y out the p	ourposes of one or
	more publicly	y supported organiza	ations described in secti	on 509(a)(	1) or section	on 509(a)(a	2). See <b>se</b> c	ction 509(a	a)(3). Che	ck the box that
	describes the	e type of supporting	organization and compl	ete lines 1	1e through	11h.				
	а 🔲 Туре	1 <b>b</b> 🗀	Type II (	з 🔙 Тур	e III - Func	tionally in	tegrated		d 🔛	Type III - Other
е 🗀	By checking	this box, I certify tha	it the organization is not	controlled	directly o	r indirectly	by one o	r more disc	qualified p	ersons other than
	foundation m	nanagers and other t	han one or more public <mark>l</mark>	y supporte	ed organiza	itions des	cribed ın s	ection 509	9(a)(1) or s	ection 509(a)(2).
f	If the organiz	ation received a writ	ten determination from	the IRS tha	at rt is a Ty	pe I, Type	II, or Type	e III		
	supporting o	rganization, check th	nis box							<i></i> . <i>.</i>
g	Since Augus	t 17, 2006, has the c	organization accepted ai	ny gift or c	ontribution	from any	of the foll	owing pers	sons?	
	(i) A perso	n who directly or ind	irectly controls, either a	lone or tog	ether with	persons o	described	in (ii) and (i	iii) below,	Yes No
	the gov	erning body of the st	upported organization?							11g(i)
	(ii) A family	member of a persor	n described in (i) above?	·						11g(ii)
	(iii) A 35%	controlled entity of a	person described in (i)	or (ii) above	e?					11g(iii)
h	Provide the f	ollowing information	about the organizations	the organ						
	-									
(i) Name	e of supported	(ii) EIN	(iii) Type of	(iv) Is the c	organization	(v) Did yo	u notify the			(vii) Amount of
	anization	(,	organization (described on lines 1-9		sted in your		tion in col.	organizatio	on in col. ; ed in the l	support
_			above or IRC section	governing	document?	(i) of you	r support?	(i) organiz U.S.	?	
			(see instructions))	Yes	No	Yes	No	Yes	No	
			_							
									1 T	
				<u> </u>						
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			L							
				E	Pa 50 34 3	المراجع المراجع المراجع		4000	2. 1 E	
Total		4	7. 15 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2.2	1 3 3 5 W		8,70	Charles A. O.	1.24 T	
	Privacy Act ar	nd Paperwork Redu	ction Act Notice, see t	he instruc	tions for f	orm 990.		Schedul	e A (Form	990 or 990-EZ) 2008

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support (c) 2006 (d) 2007 (e) 2008 (f) Total Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 1 Gifts, grants, contributions, and membership fees received. (Do not <u>28,5</u>83. 34,083. 2,400. 1,500. 1,600. include any "unusual grants.") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 2,400 1,500 ,600. 28.583 34,083. 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) 34,083. 6 Public Support. Subtract line 5 from line Section B. Total Support (c) 2006 (d) 2007 (e) 2008 (f) Total Calendar year (or fiscal year beginning in) (a) 2004 **(b)** 2005 1.500 1.600 28.583 34,083. 2,400. 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties 277 2,414. 3,612 6,386. 83. and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carned on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 30,667,91 13 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 84.33 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f) 14 15 99.94 15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f . . . . . . . . 16a 33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and  $\triangleright |X|$ stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions Schedule A (Form 990 or 990-EZ) 2008

	rt III   Support Schedule for (	Organizations	Described in	Section 509(a	)(2) (Complete only	ıf you checked the box	on line 9 of Part I.)			
Sec	ction A. Public Support				T	,				
Cale	endar year (or fiscal year beginning in)	(a) 2004	(ь) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total			
1	Gifts, grants, contributions, and									
	membership fees received. (Do not	:								
	include any "unusual grants ")									
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose									
3	Gross receipts from activities that are not an unrelated trade or bus-									
	iness under section 513	i		}						
4	Tax revenues levied for the organ-									
	ization's benefit and either paid to or expended on its behalf									
5	The value of services or facilities									
_	furnished by a governmental unit to									
	the organization without charge				[	[				
6	Total. Add lines 1 · 5	~								
	Amounts included on lines 1, 2, and					1				
	3 received from disqualified persons				1					
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									
С	Add lines 7a and 7b									
_8_	Public support (Subtract line 7c from line 6)	Side to action to		Marie Co. Sec.	Bally Torke					
Sec	ction B. Total Support									
Cale	endar year (or fiscal year beginning in)	(a) 2004	(ь) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total			
9	Amounts from line 6									
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources									
b	Unrelated business taxable income				}					
	(less section 511 taxes) from businesses acquired after June 30, 1975									
C	Add lines 10a and 10b									
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on									
12	Other income. Do not include gain or loss from the sale of capital									
13	assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12)		Sales Sales		The start of the second	<b>2 2 3 3 3 3 3 3 3 3 3 3</b>	<del></del> -			
	First five years. If the Form 990 is fo		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		The state of the same of the	11710 20 23 0 10 10 12 13 13 13	ntion.			
	check this box and stop here .	•		•			▶□			
Sec	ction C. Computation of Publ	ic Support Pe	rcentage		- · · · · · · · · · · · · · · · · · · ·		<u> </u>			
15	Public support percentage for 2008 (			column (ft)		15	%			
16	Public support percentage from 2007					16	%			
	ction D. Computation of Inve					<u></u>				
	Investment income percentage for 20					17	%			
18	Investment income percentage from	•				18	<u>%</u>			
	33 1/3% support tests - 2008. If the									
134	more than 33 1/3%, check this box a						▶□			
<b>.</b>		•	_				🗲 🗀			
u	b 33 1/3% support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization									
20	20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions									
<u></u>	Schedule A (Form 990 or 990-EZ) 2008									

## Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

2008
Open to Rublic

Name of the organization

THE KRELL INSTITUTE Employer identification number 42-1457548

Total number at end of year 2 Aggregate continuous to (during year) 3 Aggregate vanits from (during year) 4 Aggregate vanits from (during year) 5 Dot the verganization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's properly, subject to the organization's exclusive legal control? 5 Dot the verganization inform all grantees, donors, and donor advisors in writing that the assets held in donor advised funds are the organization's properly, subject to the organization's exclusive legal control? 6 Dot if the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for chantable purposes and not for the benefit of the donor or donors or other empermissible provate benefit?  Patrixiii - Conservation easements held by the organization (check all that apoply). Patrixiii - Conservation easements held by the organization (check all that apoply). Preservation of land for public use (e.g., recreation or pleasure) Preservation of open space 2 Complete interes 22-8 dil the organization held a qualified conservation entirely and the preservation of open space 2 Complete interes 22-8 dil the organization held a qualified conservation easements on a certified historial structure included in (a) 2 Complete interes 22-8 dil the organization held a qualified conservation easements on a certified historial structure included in (a) 2 Complete interes 22-8 dil the conservation easements on a certified historial structure included in (a) 2 Complete interes 22-8 dil the conservation easements on a certified historial structure included in (a) 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year 1 Public 24 dil Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year 1 Public 24 dil Number of conservation easements in holds? 3 Number of conservation easement	Pa	Organizations Maintaining Donor Advise	d Funds or Other Similar Fund	ls or A	ccounts. Complete if the
1 Total number at end of year 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) 4 Aggregate value at end of year 5 Dot the organizations property, subject to the organizations exclusive legal contro? 5 Dot the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organizations property, subject to the organizations exclusive legal contro? 6 Did the organization inform all grantees, donors, and donor advisors on writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor of other impermissible purposes benefit?    Purpose(s) of conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, live 7.   Purpose(s) of conservation easements bethe by the organization (check all that apply).   Preservation of fand for public use (e.g., recreation or pleasure)   Preservation of an historically important land area   Preservation of open space		organization answered "Yes" to Form 990, Part IV, line	e 6.		
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Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered "Yes" to Form 990, Part IV, line 8.  1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.  b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items  (i) Revenues included in Form 990, Part VIII, line 1  (ii) Assets included in Form 990, Part X  2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:  a Revenues included in Form 990, Part X  b \$  Assets included in Form 990, Part X  Complete if the organization answered "Yes" to Form 990, Part X  Complete if the organization elected, as permitted under SFAS 116 relating to these items:  a Revenues included in Form 990, Part X  Complete if the organization elected, as permitted under SFAS 116 relating to these items:  b \$  Assets included in Form 990, Part X  Complete if the organization elected, as permitted under SFAS 116 relating to these items:			illor o in la rola otatomo no triat doscribo	0 1.70 015	garnization a accounting to
Complete if the organization answered "Yes" to Form 990, Part IV, line 8.  1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.  b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items  (i) Revenues included in Form 990, Part VIII, line 1  (ii) Assets included in Form 990, Part X  2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:  a Revenues included in Form 990, Part VIII, line 1  b Assets included in Form 990, Part X  Let You work and balance sheet works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:  a Revenues included in Form 990, Part VIII, line 1  b Assets included in Form 990, Part X	Pä		f Art. Historical Treasures, or	Other	Similar Assets.
If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.  b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items  (i) Revenues included in Form 990, Part VIII, line 1  (ii) Assets included in Form 990, Part X  2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:  a Revenues included in Form 990, Part X   \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	<u> </u>				
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treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.  b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items  (i) Revenues included in Form 990, Part VIII, line 1  (ii) Assets included in Form 990, Part X  2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:  a Revenues included in Form 990, Part VIII, line 1  b Assets included in Form 990, Part X  Let Y  Assets included in Form 990, Part X  Let Y  Assets included in Form 990, Part X  Let Y  Assets included in Form 990, Part X	12	If the organization elected, as permitted under SEAS 116, no	of to report in its revenue statement and	balance	sheet works of art, historical
the footnote to its financial statements that describes these items.  b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items  (i) Revenues included in Form 990, Part VIII, line 1  (ii) Assets included in Form 990, Part X  2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:  a Revenues included in Form 990, Part VIII, line 1  b Assets included in Form 990, Part X			· ·		
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these items  (i) Revenues included in Form 990, Part VIII, line 1  (ii) Assets included in Form 990, Part X  2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:  a Revenues included in Form 990, Part VIII, line 1  b Assets included in Form 990, Part X	-	-	-		
(i) Revenues included in Form 990, Part VIII, line 1  (ii) Assets included in Form 990, Part X  2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:  a Revenues included in Form 990, Part VIII, line 1  b Assets included in Form 990, Part X			or research in remarks of pasies convi-	50, <b>p</b> .01.	acc the fellowing amounte rolating to
(ii) Assets included in Form 990, Part X					<b>▶</b> €
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:  a Revenues included in Form 990, Part VIII, line 1				••	\$
the following amounts required to be reported under SFAS 116 relating to these items:  a Revenues included in Form 990, Part VIII, line 1	_				provide
a Revenues included in Form 990, Part VIII, line 1  b Assets included in Form 990, Part X	2	•		iai yali i,	provide
b Assets included in Form 990, Part X	_	·	To relating to these items:		<b>L</b> ¢
	a	Assets included in Form CCC. Best V		·	. •
LHA For Privacy Act and Panerwork Reduction Act Notice see the Instructions for Form 990 Schedule D (Form 990) 2009	D	Assers included in Form 330, Part X		•	•
		For Privacy Act and Panerwork Reduction Act Notice and	e the Instructions for Form 990		Schedule D (Form 990) 2009

832051 12-23-08

Schedule D (Form 990) 2008

Total. (Column (b) should equal Form 990, Part X, col (B) line 25.)

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

12-23-0

	t XII Reconciliation of Change in Net Assets from Form 990 to Financial State	ements	42-1	.45/548 Page 4
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1		9,339,181.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		9,221,434.
3	Excess or (deficit) for the year Subtract line 2 from line 1	3		117,747.
3 4	Net unrealized gains (losses) on investments	4		
	Denoted agricultural and use of facilities	5		
5	Investment evenues	6		<del></del>
6		7		·
7	Prior period adjustments		·-·	-1,220.
8	Other (Describe in Part XIV)	8		-1,220.
9	Total adjustments (net). Add lines 4-8	9		
10 Pai	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	Return	116,527.
1	Total revenue, gains, and other support per audited financial statements	ide per i	101411	9,337,070.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	• • • • • •	1. TA 3. T	2,331,070.
_	Net unrealized gains on investments 2a		3.57	
a	Daniel annies and use of facilities		1: 1	
D		· · · · · · · · · · · · · · · · · · ·		
C	Recoveries of prior year grants		WEAT.	
d				0.
e	Add lines 2a through 2d	•	2e	9,337,070.
3	Subtract line 2e from line 1	•	3	9,337,070.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		1.5	
a	Investment expenses not included on Form 990, Part VIII, line 7b	0 111		
ь	Other (Describe in Part XIV) 4b	2,111	٦	0 111
С	Add lines 4a and 4b		4c	2,111.
5 1908	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	<del></del>	5	9,339,181.
	T XIII Reconciliation of Expenses per Audited Financial Statements With Expe	nses pe	Retur	
1	Total expenses and losses per audited financial statements		1	9,221,434.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		12	
а	Donated services and use of facilities		\$	
b	Prior year adjustments		4 1	
С	Losses reported on Form 990, Part IX, line 25 <u>2c</u>			
d	Other (Describe in Part XIV)			_
е	Add lines 2a through 2d		_2e	0.
3	Subtract line 2e from line 1		3	9,221,434.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	_		
b	Other (Describe in Part XIV) 4b		اثنا	
С	Add lines 4a and 4b		4c	0.
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	_ <del></del>	5	<u>9,221,434.</u>
'Pa	★XIV Supplemental Information			
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Pa	rt IV, lines	1b and 2	b; Part V, line 4; Part
X; Pa	rt XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.			
PAI	RT XI, LINE 8 - OTHER ADJUSTMENTS:			
NE'	ASSETS RELEASED FROM RESTRICTIONS: -1220.	<del></del>		<u> </u>
PAI	RT XII, LINE 4B - OTHER ADJUSTMENTS:			
INT	TEREST: 2111.			
		_		
	<del></del>			

#### SCHEDULE J' (Form 990)

# **Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

OMB No 1545-0047

İnspection

Öpen to Public

Department of the Treasury Internal Revenue Service Name of the organization

THE KRELL INSTITUTE

**Questions Regarding Compensation** 

**Employer identification number** 

42-1457548

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,	. 4.		[ <u>- {</u> ]
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.	1.20		ि अ
	First-class or charter travel	ا، إ	1	- 🧖
	Travel for companions Payments for business use of personal residence	13		1
	Tax indemnification and gross-up payments Health or social club dues or initiation fees	. 2		1. 2. 1
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)	3: 12		
		1 7		
b	If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision		<u> </u>	
	of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
		海源		. E. S
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	E.	
	CEO/Executive Director Check all that apply		Tigati Erasiya	12.53
	Compensation committee Written employment contract	3.7		
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
			Virini	
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a:	, v <sup>8</sup>		_ á
а	Receive a severance payment or change of control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	٠, ,	·	
		. :		0 -33
	Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation		e j	26
	contingent on the revenues of:			1.323
а	The organization?	5a		_X
b	Any related organization?	5b		X
	If "Yes," to line 5a or 5b, describe in Part III.	-	N	6.5
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:	النا	, ,	1.74
а	The organization?	6a		Х
þ	Any related organization?	6b		Х
	If "Yes" to line 6a or 6b, describe in Part III.	•		X
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		LX_
LHA	For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule J	(Form	990)	2008

832111 12-23-08

THE KRELL INSTITUTE

Schedule J (Form 990) 2008

Partill Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

		(B) Breakdown of V	(B) Breakdown of W-2 and/or 1099-MISC compensation	3C compensation	(C)	(Q)	(E)	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	Deferred compensation	Nontaxable benefits	Total of columns (B)(i)-(D)	Compensation reported in prior Form 990 or Form 990-EZ
	Ξ	307,730.	0	0	0	0	307,730.	0
JAMES CORONES	∷≘		0	0	0	0	0	0.
	€	207,799.	0	0	0	0.	207,799.	0.
JOHN ZIEBARTH	(ii)		0	0	0	0.	1 1	0.
	(1)	207,720.	0		0	0	207,720.	0
GARY JOHNSON	(ii)		0.	• 0	0	0.	0.	0
	(1)	141,997.	0.		• 0	0.	141,997.	0.
JAMES GALAROWICZ	(ii)		0.	• 0	0	0.	0	0.
	(1)							
	(II)							
	Θ							
	: 🖹		v.					
	Ξ							
	: (3)							
	€							
	(11)							
	(i)							
	(ii)							
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	(ii)							
	(i)							
	(1)							
	Ξ							
	<u> </u>							
				(			Schedul	Schedule J (Form 990) 2008

## SCHEDULE 0 '

(Form 990)

Department of the Treasury Internal Revenue Service

## Supplemental Information to Form 990

➤ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization

THE KRELL INSTITUTE

Employer identification number 42-1457548

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

COMPUTATIONAL SCIENCE GRADUATE FELLOWSHIP PROGRAM, THE HIGH PERFORMANCE

COMPUTER SCIENCE FELLOWSHIP PROGRAM, AND THE STOCKPILE STEWARDSHIP

SCIENCES FELLOWSHIP; AND BY PROVIDING SUPPORT SERVICES TO THE ISSUES IN

HIGH-END COMPUTING CONFERENCES PROJECT, THE COMPUTATIONAL LITERACY

PROJECT, DHS COMPUTATIONAL SCIENCE MEETINGS, DOE IPA PROJECTS, AND

SEVERAL SMALLER PROJECTS.

LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS FORM 990, PART III, ENERGY HEADOUARTER AND LABORATORY RESEARCH STAFF. DURING FY2009 16 STUDENTS WERE SELECTED TO RECEIVE FELLOWSHIPS BRINGING THE TOTAL NUMBER OF FELLOWS IN THE PROGRAM TO 65. FELLOWS WERE ENROLLED AT THIRTY-FOUR DIFFERENT RESEARCH UNIVERSITIES IN THE UNITED STATES. OF THE 14 FELLOWS WHO COMPLETED THE 4TH YEAR OF THEIR FELLOWSHIPS THIS YEAR. RECEIVED THEIR PHD DEGREES AND 4 REMAINED IN GRADUATE SCHOOL TO FOUR OF THE FELLOWS LEAVING THE COMPLETE THEIR DOCTORAL STUDIES. PROGRAM THIS YEAR IMMEDIATELY ACCEPTED EMPLOYMENT AT A DOE LABORATORY INCREASING THE NUMBER OF ALUMNI OF THE PROGRAM CURRENTLY EMPLOYED AT DOE LABORATORIES TO 40. TWENTY-FIVE FELLOWS COMPLETED THEIR TWELVE-WEEK RESEARCH PRACTICUM IN FY2009

THE OASCR COMMUNICATIONS PROJECT (OCP) IS A COLLABORATION BETWEEN

LAWRENCE LIVERMORE NATIONAL LABORATORY (LLNL) AND THE KRELL INSTITUTE,

A SUBCONTRACTOR TO LLNL. OCP DEVELOPS AND PROVIDES ACCESSIBLE, CONCISE

AND SCIENTIFICALLY ACCURATE PRESENTATIONS OF RESEARCH SUPPORTED BY THE

DOE OFFICE OF ADVANCED SCIENTIFIC COMPUTING (OASCR) AT DOE LABORATORIES

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

Schedule O (Form 990) 2008

#### SCHEDULE O"

(Form 990)

Department of the Treasury Internal Revenue Service

## Supplemental Information to Form 990

➤ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open-to Public
Inspection

Name of the organization

THE KRELL INSTITUTE

Employer identification number 42-1457548

AND UNIVERSITIES, PAST, PRESENT AND FUTURE. THESE RESULTS ARE SET IN THEIR SCIENTIFIC CONTEXT AND THAT OF BROADER OFFICE OF SCIENCE AND ARTICLES AND MULTIMEDIA PRODUCTIONS ARE DEPARTMENT OF ENERGY GOALS. DESIGNED TO REACH AUDIENCES WITH A WIDE VARIETY OF INTERESTS AND THESE DOCUMENTS PRODUCE A RESOURCE FOR OASCR TO BACKGROUNDS. COMMUNICATE EFFECTIVELY WITH ALL OF ITS STAKEHOLDERS AT THE APPROPRIATE TECHNICAL AND DETAIL LEVEL. OVER THE PAST YEAR, THIS PROJECT HAS PROVIDED COMMUNICATIONS RESOURCES TO OASCR THROUGH THE ASCR DISCOVERY UNIOUE VISITS FOR THE MOST RECENT WEB ANALYTICS TRACKING PERIOD (MARCH THROUGH NOVEMBER) APPROACHED 12,000 WITH A HIGH OF 2,471 IN ADDITION, THROUGH NOVEMBER 3, 2009, THE SITE PUBLISHED IN AUGUST. 25 MAJOR FEATURE STORIES, THREE SHORT FILMS, AND SEVEN NARRATIONS FOR A SCIENTIFIC VISUALIZATION VIDEO GALLERY

THE STEWARDSHIP SCIENCE GRADUATE FELLOWSHIP PROGRAM SELECTS HIGHLY QUALIFIED STUDENTS AND SUPPORTS THEIR RESEARCH AND ACADEMIC STUDY FOR UP TO FOUR YEARS OF THEIR PHD GRADUATE WORK IN A DISCIPLINE AND AREA THAT IS IMPORTANT TO THE UNITED STATES DEPARTMENT OF ENERGY'S NATIONAL NUCLEAR SECURITY ADMINISTRATION AND STEWARDSHIP SCIENCE. THE SSGF FELLOWS ARE EITHER U.S. CITIZENS OR PERMANENT RESIDENT ALIENS STEWARDSHIP SCIENCE INCLUDES AREAS OF STUDY RELATIVE TO HIGH ENERGY DENSITY PHYSICS, LOW ENERGY NUCLEAR SCIENCE AND MATERIALS UNDER EXTREME DURING FY2009 FIVE STUDENTS WERE SELECTED TO RECEIVE CONDITIONS. FELLOWSHIPS BRINGING THE TOTAL NUMBER OF FELLOWS IN THE PROGRAM TO ONE FELLOW COMPLETED HIS PHD DURING THIS PERIOD AND IS NOW A POST DOCTORAL STUDENT AT A RESEARCH UNIVERSITY. THE FELLOWS COMPLETE A LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule O (Form 990) 2008

#### SCHEDULE O '

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Information to Form 990**

➤ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public
Inspection

Name of the organization

THE KRELL INSTITUTE

Employer identification number 42-1457548

PROGRAM OF STUDY AT A UNITED STATES RESEARCH UNIVERSITY, SPEND AT LEAST
TWELVE CONSECUTIVE WEEKS AT A DEPARTMENT OF ENERGY NATIONAL DEFENSE
LABORATORY WORKING ON A RESEARCH PROJECT OF IMPORTANCE TO THE NATION
AND ATTEND AN ANNUAL SYMPOSIUM TO SHARE THEIR RESEARCH EXPERIENCE WITH
OTHER STUDENTS IN THE STEWARDSHIP SCIENCE GRADUATE FELLOWSHIP PROGRAM
AND WITH DEPARTMENT OF ENERGY HEADQUARTER AND LABORATORY RESEARCH
STAFF. FELLOWS WERE ENROLLED AT THRITEEN DIFFERENT RESEARCH
UNIVERSITIES IN THE UNITED STATES. THREE FELLOWS COMPLETED THEIR
TWELVE-WEEK RESEARCH PRACTICUM IN FY2009.
FORM 990, PART VI, SECTION A, LINE 10: FORM 990 IS REVIEWED BY ALL BOARD
MEMBERS PRIOR TO SUBMISSION TO THE INTERNAL REVENUE SERVICE.
FORM 990, PART VI, SECTION B, LINE 12C: CONFLICT OF INTEREST QUESTIONNAIRE
AND STATEMENT REQUIRED FROM EXTERNAL BOARD MEMBERS.
FORM 990, PART VI, SECTION C, LINE 19: DOCUMENTS ARE MADE AVAILABLE UPON
REQUEST. CONSIDERATION IS BEING GIVEN TO POSTING TO THE CORPORATE WEBSITE
AT SOME FUTURE DATE.