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NNED SEP 2 8 2010

Form **990-EZ** 

# Short Form 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 1545-1150 2009

Open to Public Inspection

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form

Department of the Treasury Internal Revenue Service ▶ The organization may have to use a copy of this return to satisfy state reporting requirements For the 2009 calendar year, or tax year beginning Check if applicable Please Name of organization Employer identification number use IRS Address change label or COMMUNITY CLOSET, INC. 20-3477522 Name change print or Number and street (or P O box, if mail is not delivered to street address) Telephone number Room/suite Initial return type 406-222-4134 416 EAST PARK STREET Termination Specific Group Exemption City or town, state or country, and ZIP + 4 Amended return Instruc-LIVINGSTON MT 59047 Number Application pending tions G Accounting method X Cash Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ). Other (specify) Check ► X if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF) N/ACheck > Website: X 501(c) ( 3 ) ◀ (insert no ) 4947(a)(1) or 527 Tax-exempt status (check only one) --If the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000 A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return 245,061 Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I) Part I 321 Contributions, gifts, grants, and similar amounts received 2 Program service revenue including government fees and contracts 2 3 3 Membership dues and assessments 1,250 4 4 Investment income 5a Gross amount from sale of assets other than inventory Less cost or other basis and sales expenses 5b Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 5c Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here Gross revenue (not including \$ reported on line 1) Less direct expenses other than fundraising expenses Net income or (loss) from special events and activities (Subtract line 6b from line 6a) 6c С 239,490 Gross sales of inventory, less returns and allowances 7a 7a 106,995 Less cost of goods sold 132,495 Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) С 8 Other revenue (describe 138,066 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 9 9 STMT STMT 2 42,559 10 10 Grants and similar amounts paid (attach schedule) 11 11 Benefits paid to or for members 989 12 12 Salaries, other compensation, and employee benefits 2,106 Professional fees and other payments to independent contractors 13 13 015 47,766 14 Occupancy, rent, utilities, and maintenance 14 15 768 Printing, publications, postage, and shipping 15 Other expenses (describe ► SEE STATEMENT 3 140 16 16 17 131,328 17 Total expenses. Add lines 10 through 16 18 18 Excess or (deficit) for the year (Subtract line 17 from line 9) **Net Assets** 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with 19 87,177 end-of-year figure reported on prior year's return) 20 Other changes in net assets or fund balances (attach explanation) 20 915 Net assets or fund balances at end of year Combine lines 18 through 20 21 Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ Part II (A) Beginning of year (B) End of year (See the instructions for Part II) 92,531 83,685 22 22 Cash, savings, and investments 23 23 Land and buildings 3,331 5,510 24 Other assets (describe ► SEE STATEMENT 4 24 89,195 25 95,862 25 Total assets <u>1,9</u>47 2,018 26 26 Total liabilities (describe SEE STATEMENT 5 93,915 27 Net assets or fund balances (line 27 of column (B) must agree with line 21) 87,177

Form **990-EZ** (2009)

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

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Form 990-EZ (2009) COMMUNITY CLOSET	I, INC.	20	-3477522			Page 2
Part III Statement of Program Service	Accomplishments (S	See the instruct	tions for Part I	II.)	Exp	penses
What is the organization's primary exempt purpose?					(Required	for section
OPERATE A THRIFT STORE TO RAISE FUNDS FOR	R LOCAL CHARITIES				501(c)(3) a	nd 501(c)(4)
Describe what was achieved in carrying out the organizat	ion's exempt purposes. In a	a clear and concise			organizatio	ns and section
manner, describe the services provided, the number of pe	ersons benefited, or other r	elevant information	for	- 1	4947(a)(1)	trusts, optional
each program title					for others )	
28						
t						
				,		
(Grants \$ ) If this amount	includes foreign grants, ch	eck here	<u> </u>		28a	
29						
				_		
(Grants \$ ) If this amount	includes foreign grants, ch	eck here	<u> </u>	:	29a	
30						
	includes foreign grants, ch	eck here	<u> </u>	Щ:	30a	
, ,	STATEMENT 6					
(Grants \$ 42,559) If this amount		eck here	<u> </u>		31a	44,749
32 Total program service expenses (add lines 28a thro					32	44,749
Part IV List of Officers, Directors, Trustees, an	d Key Employees. List each	ch one even if not one (b) Title and average			ontributions to	r Part IV) (e) Expense
(a) Name and address		hours per week	(if not paid,	employe	e benefit plans &	account and
		devoted to position	enter -0- )	deferred	d compensation	other allowances
	INGSTON	EXECUTIVE DI	•			_
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	INGSTON	BOARD MEMBER	_			•
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Form **990-EZ** (2009)

_ P	irt v Other information (Note the statement requirements in the instructions for Part	<u> </u>		
			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		X
34	Were any changes made to the organizing or governing documents? If "Yes," attached a conformed copy of	33	<del> </del>	
J-4	the changes	34		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but <b>not</b> repo	<del></del>		
	on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T			
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section		1	
-	6033(e) notice, reporting, and proxy tax requirements?	35a		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets			
	during the year? If "Yes," complete applicable parts of Schedule N	36		Х
37a				
b	Did the organization file Form 1120-POL for this year?	37b	İ	Х
38a				
	any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a		Х
b	If "Yes," complete Schedule L, Part II and enter the total amount involved   38b			
39	Section 501(c)(7) organizations Enter			
а	Initiation fees and capital contributions included on line 9			
b	Gross receipts, included on line 9, for public use of club facilities 39b			
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under			
	section 4911 ▶ , section 4912 ▶ , section 4955 ▶			
b	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit			
	transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified			
	person in a prior year, and that the transaction has not been reported on any of the organization's prior			
	Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		X
С	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on			
	organization managers or disqualified persons during the year under sections 4912,			
	4955, and 4958 ▶			
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c			
	reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter			
	transaction? If "Yes," complete Form 8886-T	40e		X
41	List the states with which a copy of this return is filed ▶ NONE			
42a	The organization's books are in care of ▶  Teleph	one no		
	Located at ►	(iP + 4 ▶		
b	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		Yes	No
	account)?	42b		Х
	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.			
С	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c		Х
	If "Yes," enter the name of the foreign country			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here			
	and enter the amount of tax-exempt interest received or accrued during the tax year	▶ 43		
		<del></del>	Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of			
	Form 990-EZ	44	<u> </u>	X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If			
	"Yes," Form 990 must be completed instead of Form 990-EZ	45		X
		Form 9	90-EZ	(2009

& ASSOCIATES, CPA'S

59047-2605

SOUTH SECOND ST

Form 990-EZ (2009)

No

▶ 26-3886017

406-222-2467

Yes

P00387859

EIN

no 🕨

self.

07/30/10

Paid

Preparer's

Use Only

signature

Firm's name (or yours

if self-employed)

VALERIE HILLMAN

May the IRS discuss this return with the preparer shown above? See instructions

HILLMAN

LIVINGSTON

#### SCHEDULE A (Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

4947(a)(1) nonexempt charitable trust.

Open to Public

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

Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

COMMUNITY CLOSET, INC

Employer identification number 20 = 3477522

OMB No 1545-0047

			COMMONTIT CL	OSEI, INC.					20	<u> </u>	1344		
P	art I	Reas	on for Public Charity	Status (All organizations	must c	omplet	e this	part)S	See in	struct	ions		
The	orgai	nization is not	a private foundation becaus	e it is (For lines 1 through 11, o	check only	one box	)						
1		A church, coa	nvention of churches, or ass	ociation of churches described	ın section	170(b)(1	)(A)(i).						
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)												
3	$\sqcap$	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).											
4	Ħ		· ·	d in conjunction with a hospital of				)(1)(A)(ii	ı). Ente	r the ho	spital's name	<u>.</u>	
•		city, and state		a m conjunction min a moophar	2000,,202	0001.0		,, -,,, -,,,	.,			•	
5		*		of a college or university owned	or operate	ad by a g	overnme	ntal uni	descri	hed in			
J	Ш				or operate	su by a g	overmine	intal alli	. ucaciii	50a III			
		•	b)(1)(A)(ıv) (Complete Part	•	4 47	0/5//4//4	v						
6	37		•	overnmental unit described in s									
7	X	-	•	substantial part of its support fro	om a gove	ernmental	unit or 1	rom the	genera	il public			
			section 170(b)(1)(A)(vi). (Co	•									
8	Ц	-		70(b)(1)(A)(vi). (Complete Part									
9				<ol> <li>more than 33 1/3 % of its sup</li> </ol>							oss		
				npt functions—subject to certain									
		support from	gross investment income ar	nd unrelated business taxable in	come (les	s section	511 tax	) from b	usiness	ses			
		acquired by t	he organization after June 3	0, 1975 See section 509(a)(2).	. (Complet	te Part III	)						
10		An organizati	on organized and operated	exclusively to test for public safe	ety See s	ection 50	)9(a)(4).						
11		An organizati	on organized and operated	exclusively for the benefit of, to	perform th	ne functio	ns of, or	to carry	out the	•			
		purposes of o	one or more publicly support	ed organizations described in se	ection 509	a)(1) or	section	509(a)(2	) See	section			
		509(a)(3). Ch	eck the box that describes t	he type of supporting organizati	on and co	mplete lıı	nes 11e	through	11h				
		a Type	I b Type II	c Type III-Function	ally integra	ated	d	Тур	e IIIOt	her			
е		By checking t	this box, I certify that the org	anization is not controlled direc	tly or indir	ectly by c	ne or m	ore disq	ualified				
				and other than one or more pul							1		
			section 509(a)(2)	•		·							
f				rmination from the IRS that it is	a Type I.	Type II.	or Type	III suppo	ortina				
•		-	check this box		, , , , , , , , , , , , , , , , ,	.,,,,	,,,,	•					
~		-		tion accepted any gift or contrib	ution from	any of th	ne.						Ш
g		_	· · ·	non accepted any girt of contino	ulion non	i diliy or ti							
		following per		ontrols, either alone or together	with norse	ne docor	ibad ia (	\				Yes	No
		• • •	•	· · · · · · · · · · · · · · · · · · ·	with perso	nis desci	in bed iii (	''')			11g(ı)	103	
		• •		f the supported organization?								<del>                                     </del>	
		• •	member of a person describ	• •							11g(iı)		
		• •	• •	described in (i) or (ii) above?							11g(in	)[	
h				he supported organization(s)	T								
(1)		e of supported	(II) EIN	(III) Type of organization		rganization		ou notify	(vi) l organizat	s the	(VII) Am supp		
	org	anization		(described on lines 1–9 above or IRC section	ın col (i) lı: governing	document?		of your	(ı) organı	zed in the	3491	3011	
				(see instructions))				oort?		S?			
					Yes	No	Yes	No	Yes	No			
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For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

	COL					3411322	raye z
Pa	art II Support Schedule for O				1)(A)(iv) and 1	70(b)(1)(A)(vi)	
<u> </u>	(Complete only if you che	ecked the box o	on line 5, 7, or t	8 of Part I)			
	tion A. Public Support			( )	/ II 0000	( ) 2000	15 <del></del>
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	7,217	1,288	3,713	15,898	4,321	32,437
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	7,217	1,288	3,713	15,898	4,321	32,437
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						32,437
Sec	tion B. Total Support						
Ca	lendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	7,217	1,288	3,713	15,898	4,321	32,437
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2	286	2,227	2,075	1,250	5,840
9	Net income from unrelated business activities, whether or not the business is regularly carried on					0	
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				l		38,277
12	Gross receipts from related activities, etc	(see instructions)				12	824,692
13	First five years If the Form 990 is for the	organization's first,	second, third, four	th, or fifth tax year	as a section 501(	c)(3)	
	organization, check this box and stop her						<b></b>
Sec	tion C. Computation of Public St	apport Percent	age			<del></del>	
14	Public support percentage for 2009 (line 6	, column (f) dıvıded	by line 11, column	(f))		14	84 74 %
15	Public support percentage from 2008 Sch	edule A, Part II, line	14			15	85 96 <b>%</b>
16a	33 1/3 % support test—2009. If the organ	ization did not chec	k the box on line 1	3, and line 14 is 33	3 1/3 % or more, c	heck this box	
	and stop here. The organization qualifies	as a publicly suppo	rted organization				▶ <u>X</u>
b	33 1/3 % support test—2008. If the organ	ization did not chec	k a box on line 13	or 16a, and line 15	is 33 1/3 % or mo	ore, check this	
	box and stop here. The organization qual	fies as a publicly su	ipported organizati	on			<b>&gt;</b> _
17a	10%-facts-and-circumstances test—200	9. If the organizatio	n did not check a b	oox on line 13, 16a	, or 16b, and line 1	14 is 10% or	
	more, and if the organization meets the "fa	acts-and-circumstar	ices" test, check th	is box and stop he	e <b>re</b> . Explain in Par	t IV how the	
	organization meets the "facts-and-circums	tances" test. The or	rganization qualifie	s as a publicly sup	ported organizatio	n	▶ _
þ	10%-facts-and-circumstances test—200	8. If the organizatio	n did not check a b	oox on line 13, 16a	, 16b, or 17a, and	line 15 is 10% or	
	more, and if the organization meets the "fa	acts-and-circumstar	ices" test, check th	is box and stop he	ere. Explain in Par	t IV how the	_
	organization meets the "facts-and-circums		-				▶  _
40	Devicts foundation If the ergonization dis	l not abook a boy or	lino 12 16a 16h	17a or 17h abad	k this how and soo	instructions	<b>▶</b>

Schedule A (Form 990 or 990-EZ) 2009

33 1/3 % support tests—2008. 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

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

Schedule A (Form 990 or 990-EZ) 2009 COMMUNITY CLOSET, INC. 20-3477522

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 17a or 17b, and Part III, line 12 Provide any other additional information. See instructions

Schedule A (Form 990 or 990-EZ) 2009

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10714 COMMUNITY CLOSET, INC. 20-3477522 FYE: 12/31/2009

Federal Statements

		FMV Explanation						FMV Explanation		
d to		Book Value Explanation				d to		Book Value Explanation		
r Amounts Pai		Book Value				r Amounts Pai		Book Value		7
Srants and Simila		Noncash Contribution				Srants and Simila		Noncash Contribution		
EZ, Part I, Line 10 - Grants and Similar Amounts Paid to Individuals		Contribution	6,216		6,216	EZ, Part I, Line 10 - Grants and Similar Amounts Paid to Organizations	Class of Activity	Cash Contribution	8,128	8,128
Statement 1 - Form 990-EZ	Class of Activity	Description of Property				Statement 2 - Form 990-EZ		Description of Property		
Sta		Date of Gift				Sta	Name and Address	Date of Gift		
	Relationship to Organization			TOTAL			N		VARIOUS	TOTAL

10714 COMMUNITY CLOSET, INC.

20-3477522

FYE: 12/31/2009

**Federal Statements** 

## Statement 3 - Form 990-EZ, Part I, Line 16 - Other Expenses

`Description	Amount
EXPENSES	\$
ADVERTISING AND PROMOTION	10,337
OFFICE	5,906
TRAVEL	1,670
INSURANCE	16,227
TOTAL	\$ 34,140

## Statement 4 - Form 990-EZ, Part II, Line 24 - Other Assets

Description	seginning of Year	 End of Year
EMPLOYEE ADVANCE FIXED ASSETS LESS ACCUMULATED DEPRECIATION	\$ 424 19,532 14,446	\$ 435 19,532 16,636
	 5,510	 3,331

### Statement 5 - Form 990-EZ, Part II, Line 26 - Total Liabilities

Description	Beginning of Year	End of Year		
PAYROLL TAXES	\$\$	\$ 1,947		
	2,018	1,947		

7/30/2010 1:55 PM

10714 COMMUNITY CLOSET, INC. 7/30/2010 1:55 PM **Federal Statements** 20-3477522 FYE<sup>-</sup> 12/31/2009 Statement 6 - Form 990-EZ, Part III, Line 31 - Statement of Program Service Accomplishments . Description DONATIONS TO LOCAL CHARITIES

6

Form **4562** 

Name(s) shown on return

Department of the Treasury Internal Revenue Service

### **Depreciation and Amortization**

(Including Information on Listed Property)

► See separate instructions.

► Attach to your tax return.

OMB No 1545-0172 2009

ttachment 67

Identifying number

COMMUNITY CLOSET, INC 20-3477522 Business or activity to which this form relates INDIRECT DEPRECIATION Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 250,000 1 Maximum amount. See the instructions for a higher limit for certain businesses. 1 2 2 Total cost of section 179 property placed in service (see instructions) 800,000 3 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 4 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-4 5 5 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions (c) Elected cost (a) Description of property (b) Cost (business use only) 6 7 Listed property Enter the amount from line 29 8 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 9 Tentative deduction Enter the smaller of line 5 or line 8 10 10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property ) (See instr 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 15 Property subject to section 168(f)(1) election 15 882 16 Other depreciation (including ACRS) 16 Part III MACRS Depreciation (Do not include listed property ) (See instructions ) Section A 308 17 MACRS deductions for assets placed in service in tax years beginning before 2009 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2009 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property (business/investment use only-see instructions) (e) Convention (f) Method (g) Depreciation deduction placed in period service 19a 3-year property b 5-year property 7-year property d 10-year property e 15-year property 20-year property S/L 25-year property 25 yrs Residential rental 27 5 yrs S/L MM property 27 5 yrs MM S/L MM Nonresidential real 39 yrs S/L property MM Section C—Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12 yrs S/L b 12-year S/L 40-year 40 yrs Part IV Summary (See instructions ) Listed property Enter amount from line 28 21 22 Total Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 2,190 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs