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#### Form **990-PF**

## **Return of Private Foundation**

or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

2009

OMB No 1545-0052

For	calend	ar year 2009, or tax	year beginning		, and ending		
G	heck a	ill that apply	Initial return	Initial return of a fo	ormer public charity	Final return	<u> </u>
			Amended return	Address chan	ge 🔲	Name change	
Use	the IF	Name of foundate	tion			A Employer identification	number
	abel						
Oth	erwis	· · · · · · · · · · · · · · · · · · ·	KIDS, INC.			20-5848484	
_	print	ŀ	(or P O box number if mail is not		Room/suite	B Telephone number	
	r type. Speci	# C 7 C C C C		INC, 12301 WI	LSHIRE 303	310-826-38	
	ruction	_   Gity or town, sta		2.5		C If exemption application is p	
		LOS ANGE				D 1. Foreign organizations	s, check here
H (	_	ype of organization		exempt private foundation		Foreign organizations me check here and attach co	omputation
			xempt charitable trust	Other taxable private found:		E If private foundation sta	tus was terminated
		ket value of all assets	·   —	iting method X Cash	Accrual	under section 507(b)(1	
	om P •\$	art II, col. (c), line 1		Other (specify) Iumn (d) must be on cash i	hacis I	F If the foundation is in a	
	<u> </u>	Analysis of Revenu				under section 507(b)(1	(d) Disbursements
	ert i	(The total of amounts in	columns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net	for chantable purposes (cash basis only)
	1 1	necessarily equal the ar Contributions, gifts, (		13,627.		N/A	(cash basis only)
		. — .	ndation is not required to attach Sch. B	13,027.		117 22	
	-	nterest on savings and t	•		111 1		
		cash investments Dividends and interes	et from coourities				
	1	Bross rents	er monn secundes				- Assilvania -
		JIUSS TELLS Net rental income or (los:	. <b>.</b>				
			· -				+++
Ē		Gross sales price for all	le of assets not on line 10				<b></b>
Revenue	- '	assets on line 6a Capital gain net income (	from Port IV June 2\		0.		
æ	i	vet snort-term capita					
	1 .		-				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		ncome modifications Gross sales less returns	•				<b></b>
	}	and allowances		<del></del>			
		ess Cost of goods sold Gross profit or (loss)					<u> </u>
	11	Other income?	EIVED		, , , , , , , , , , , , , , , , , , , ,		
	12	Total. And lines 1 th	Olloh-th-	13,627.	0.		
		Compensation of officers		0.	0.		0.
	14	Other employee salar					
		Pension plans, emplo					
rses	162	_egal fees QGD	SAI 115				***************************************
ens	h	Accounting fees					
Š	1	Other professional fe	es STMT 1	4,381.	0.		0.
ē	Ī	nterest					
aţį	į.	Taxes	STMT 2	60.	0.		0.
istr	1	Depreciation and dep					
ă.	ł .	Depreciation and dep Decupancy	1000011	-			
Adr	ľ	Fravel, conferences,	and meetings		····		<u> </u>
ě	ľ	Printing and publicat	-	<del></del>			<del></del>
Operating and Administrative Exper	l .	Other expenses	STMT 3	5,475.	0.		0.
Ĭ	t .	Total operating and				<u> </u>	† · · · · · · · · · · · · · · · · · · ·
)ere		expenses. Add lines		9,916.	0.		0.
Ö	1	Contributions, gifts, ç		7			
	1	Fotal expenses and					
	1	Add lines 24 and 25		9,916.	0.		0.
-	1	Subtract line 26 from	line 12				
	ł		expenses and disbursements	3,711.			
	ì		TIB (if negative, enter -0-)		0.		
	ţ	Adjusted net income				N/A	

923501 02-02-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions. Form 990-PF (2009)

ı	Þ۶	a	A	2
	г а	u	•	•

Par	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of y	/ear
raf	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	10,127.	13,838.	13,838.
2	Savings and temporary cash investments			
3	Accounts receivable			
	Less allowance for doubtful accounts			
4	Pledges receivable			
-	Less allowance for doubtful accounts ▶		j	
6	Receivables due from officers, directors, trustees, and other			
`	disqualified persons			
-	Other notes and loans receivable			······································
'	Less allowance for doubtful accounts			
, ,	Inventories for sale or use			<del> </del>
Assets	Prepaid expenses and deferred charges			·
رُ الْ	· · ·			
	la Investments - U.S. and state government obligations			
	b Investments - corporate stock			
	c Investments - corporate bonds	***************************************		
יון	Investments - land, buildings, and equipment basis		1	
	Less accumulated depreciation			· · · · · · · · · · · · · · · · · · ·
	! Investments - mortgage loans			<del></del>
13	_	<del></del>	······································	
14	Land, buildings, and equipment basis			
	Less accumulated depreciation	<u></u>		
15	o Other assets (describe ►)			
16	Total assets (to be completed by all filers)	10,127.	13,838.	13,838.
17	7 Accounts payable and accrued expenses			
18	Grants payable			
ဖ္တ 19	Deferred revenue			
Liabilities	Loans from officers, directors, trustees, and other disqualified persons			
[ 21	ranga kanangan ang			
בן ⊏	? Other liabilities (describe ▶)			
23	Total liabilities (add lines 17 through 22)	0.	0.	
—— <u> </u>	Foundations that follow SFAS 117, check here			
	and complete lines 24 through 26 and lines 30 and 31.			
8 2	Unrestricted			
25 and				
를 ()	· · ·			
20 20	·			
들	,			
Net Assets or Fund Balanc	and complete lines 27 through 31.	0.	0.	
St   27		0.	0.	
9S 28	· · · · · · · · · · · · · · · · · · ·		13,838.	
Ž 29		10,127.		
<b>୬</b>  30	Total net assets or fund balances	10,127.	13,838.	
		10.105	10 000	
3.	Total liabilities and net assets/fund balances	10,127.	13,838.	
Day	Analysis of Changes in Net Assets or Fund B	alances		
		.,	· · · · · · · · · · · · · · · · · · ·	
1 To	tal net assets or fund balances at beginning of year - Part II, column (a), line	30		10 105
(m	ust agree with end-of-year figure reported on prior year's return)		1	10,127.
<b>2</b> En	ter amount from Part I, line 27a		2	3,711.
3 Otl	ner increases not included in line 2 (itemize)		3	0.
4 Ad	d lines 1, 2, and 3		4	13,838.
<b>5</b> De	creases not included in line 2 (itemize)		5	0.
<b>6</b> _ To	tal net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	13,838.
			·· ·	Form <b>990-PF</b> (2009)

		S KIDS, INC.				<del> </del>		0-5848	3484	Page 3
Part IV Capital Gains	and Lo	osses for Tax on In	vestment	Income	1					
		ind(s) of property sold (e g or common stock, 200 shs			(b) H P - D -	ow acquired Purchase Donation	(c) Date (mo , d	acquired ay, yr )	( <b>d)</b> Dat (mo , da	
1a										
	NE									
C						-				
d		<del></del> -							•	
8					<del></del>					
(e) Gross sales price	(f)	Depreciation allowed (or allowable)	10.	st or other basis				ain or (loss) s (f) minus (	<b>)</b>	-
	<del>                                     </del>	<u> </u>	,	<u> </u>			. , ,	• • • • • • • • • • • • • • • • • • • •		
<u>a</u>	<del>                                     </del>	······································							_	
<u>b</u>	+									
<u>C</u>	<del> </del>		<del></del>							
<u>d</u>	<del></del>									
<u> </u>										
Complete only for assets show	ing gain in	column (h) and owned by	the foundation	on 12/31/69				ol (h) gain i		
(i) F M V as of 12/31/69		(j) Adjusted basis as of 12/31/69		cess of col (i) col (j), if any		col		not less than (from col. (f		
a										
b										
C						•				
d										
						· •				
8	1		l		$\overline{}$					
2 Capital gain net income or (net c	apital loss	) If gain, also enter ) If (loss), enter -0-	in Part I, line - in Part I, line	7 7	}	2				
3 Net short-term capital gain or (lo If gain, also enter in Part I, line 8			d (6)		٦					
If (loss), enter -0- in Part I, line 8	}	•	Dadasa	Tou on No.	<u> </u>	3		<del></del>		
		Section 4940(e) for					ome			
(For optional use by domestic prival	te foundati	ions subject to the section 4	1940(a) tax on	net investment ir	ncome	)				
If section 4940(d)(2) applies, leave	thic nart h	lank								
ii Section 4540(d)(2) applies, leave	tiliş part u	Idiik								
Was the foundation liable for the se-	ction 4942	tax on the distributable am	ount of any ye	ear in the base pe	riod?				Yes Yes	X No
If "Yes," the foundation does not qua	alify under	section 4940(e). Do not co	mplete this pa	irt						
1 Enter the appropriate amount in					ies					
(a)		(b)		<u> </u>	(c)				(d) ution ratio	
Base period years Calendar year (or tax year beginn	ing in)	Adjusted qualifying dis	tributions	Net value of no		table-use assets		Distrib (col (b) divi	ded by col	(c)) 00000
2008			0.		-	638	-			00000
2007			0.			030	<del>' •  </del>			30000
2006										
2005		1								
2004										
2 Total of line 1, column (d)							2		.0	00000
3 Average distribution ratio for the	5-vear ha	se neriod - divide the total i	on line 2 by 5	or by the number	r of vea	rs				
<del>*</del>	•	·	511 tillo 2 0 y 0 ,	or by the namber	1 01 you		3		. 0	00000
the foundation has been in exist	ence n les:	s tilali 5 years					-		•••	<del>5556</del>
									0	241
4 Enter the net value of noncharita	ble-use as	sets for 2009 from Part X,	line 5				4		9	,341.
										_
5 Multiply line 4 by line 3							5		_	0.
·										
6 Enter 1% of net investment inco	me /1% of	Part I. line 27b)					6			0.
										,
7 Add lines F and F							7			0.
7 Add lines 5 and 6								<del>                                     </del>		
	D	to a d								0.
8 Enter qualifying distributions fro	m Part VII	IIDA A					ı X	1		v

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If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

Х

X

3b

4a

4b

N/A

Form 4720, to determine if the foundation had excess business holdings in 2009)

had not been removed from jeopardy before the first day of the tax year beginning in 2009?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 990-PF (2009) CARTER'S KIDS, INC.	20-5	848484 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	ation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, ente	r "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	_	
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statis number of organizations and other beneficiaries served, conferences convened, research papers pro-	stical information such as the duced, etc	Expenses
1 N/A		
2		
3		
4		
Part IV. R. Common of Decrees Polated Investments		
Part IX-B   Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on	lines 1 and 2	Amount
1 N/A	1111100 1 0110 2	
2		
All other program-related investments. See instructions		

Total. Add lines 1 through 3

Part X Minimum Investment Return (All domestic foundations must complete this part. F	oreign foundations, see i	nstructions.)
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a Average monthly fair market value of securities	1a	0.
b Average of monthly cash balances	1b	9,483.
c Fair market value of all other assets	10	
d Total (add lines 1a, b, and c)	1d	9,483.
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation)   1e	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	9,483.
4 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	142.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	9,341.
6 Minimum investment return. Enter 5% of line 5	6	467.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for foreign organizations check here  and do not complete this part )	indations and certain	
1 Minimum investment return from Part X, line 6	1	467.
2a Tax on investment income for 2009 from Part VI, line 5		
b Income tax for 2009 (This does not include the tax from Part VI)		
c Add lines 2a and 2b	2c ]	0.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	467.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5	467.
6 Deduction from distributable amount (see instructions)	6	0.
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	467.
Part XII Qualifying Distributions (see instructions)	, ; <b>,</b>	
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	0.
b Program-related investments - total from Part IX-B	מו	0.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the		
a Suitability test (prior IRS approval required)	3a	
<b>b</b> Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	0.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
income Enter 1% of Part I, line 27b	5	0.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the	foundation qualifies for the	
4940/a) raduction of tax in those years	•	

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	( <b>d</b> ) 2009
1 Distributable amount for 2009 from Part XI,				467
line 7				467.
2 Undistributed income, if any, as of the end of 2009			109.	
a Enter amount for 2008 only			109.	
b Total for prior years 2007	, ,	32.		-
3 Excess distributions carryover, if any, to 2009		J2 •		HILL PHILLIPPING TO THE TOTAL STATE OF THE S
a From 2004				
b From 2005				
c From 2006				
d From 2007				
e From 2008				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from				
Part XII, line 4 ► \$ 0 .				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior	<del></del>			michilana mara ara di
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	11.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1		haaraa ee e	manadaa iiii sid ii aasa saa ca
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount		, ' '1'11111111111111111111111111111111		0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2009	0.		' II 'Inn-Imm	Ö.
(if an amount appears in column (d), the same amount must be shown in column (a) )				
6 Enter the net total of each column as indicated below.				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
<b>b</b> Prior years' undistributed income. Subtract				
line 4b from line 2b		32.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		32.		
e Undistributed income for 2008. Subtract line				
4a from line 2a Taxable amount - see instr			109 <u>.</u>	
f Undistributed income for 2009 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				467.
7 Amounts treated as distributions out of			·	
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2010				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009				
				Form <b>990-PF</b> (2009)

CARTER'S KIDS, INC.

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Part XV Supplementary Information Grants and Contributions Paid During		Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
NONE		<u> </u>		
		ì		
Total			<b>▶</b> 3a	_
Approved for future payment				
NONE				
Talal			<b>N</b> 01	
<b>Total</b> 311 02-02-10			<u>▶ 3b</u>	orm <b>990-PF</b> (20

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Form 990-PF (2009) CARTER'S KII				20-	5848484 Page 12
Part XVI-A Analysis of Income-Pr			<del></del>		
Enter gross amounts unless otherwise indicated	(a) Business	usiness income (b)	(C) Exclu-	(d)	(e) Related or exempt
1 Program service revenue	code	Amount	sion	Amount	function income
a			_		
b	l l				
d	1			-	
			<del> </del>		
g Fees and contracts from government agencies				-	<del></del>
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments	1				
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate					
a Debt-financed property					<u> </u>
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income	<u> </u>	-			
8 Gain or (loss) from sales of assets other					
than inventory	<del></del>		-		
9 Net income or (loss) from special events			<del>-   -   -</del>		
10 Gross profit or (loss) from sales of inventory					<del></del>
11 Other revenue			1		
3					
b					
c	1	· · · · · · · · · · · · · · · · · · ·			<del></del>
е					
12 Subtotal Add columns (b), (d), and (e)		(	0.	0.	0
13 Total. Add line 12, columns (b), (d), and (e)	<u> </u>			13	0
(See worksheet in line 13 instructions to verify calculation	ons )				
Part XVI-B Relationship of Activit		plishment of	Exempt F	urposes	
Line No. Explain below how each activity for which					nnlishment of
the foundation's exempt purposes (other				a importantly to the accom	
	· · · · · · · · · · · · · · · · · · ·	<u> </u>			
		<del></del>			
				<u></u> . <u></u> .	
		<del></del>			
			·		

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	art X		K S KIDS, II			040404		ge 13
	, alt X	Exempt Organ		s to and transactions an	d Relationships With Nonc	naritable	,	
1	Did th	<del></del>	<del></del>	following with any other organization	described in section 501(c) of		Yes	No
				ection 527, relating to political organiza				
		fers from the reporting found						ĺ
	(1) (	· · · · · · · · · · · · · · · · · · ·	•			1a(1)		Х
		Other assets				1a(2)	_	Х
ı		transactions				1-1-1		
	(1) \$	Sales of assets to a noncharita	ble exempt organization			1b(1)		Х
		urchases of assets from a no	• •	zation		1b(2)	_	Х
		Rental of facilities, equipment,				1b(3)	_	X
		Reimbursement arrangements				1b(4)		X
		oans or loan guarantees				1b(5)		X
		Performance of services or me	embership or fundraising s	olicitations		1b(6)		Х
(		ng of facilities, equipment, ma				10		Х
		•	=		ys show the fair market value of the god	ods, other ass	ets,	
				- · · · · · · · · · · · · · · · · · · ·	in any transaction or sharing arrangeme			
	colun	nn (d) the value of the goods,	other assets, or services re	eceived				
(a)	Line no	(b) Amount involved	(c) Name of nonc	haritable exempt organization	(d) Description of transfers, transactions	, and shanng an	angeme	nts
			<u> </u>	N/A				
				2777				
_								
28	s is the	foundation directly or indirec	tly affiliated with, or related	I to, one or more tax-exempt organizat	tions described			_
		tion 501(c) of the Code (othe	, ,,	er in section 527?		Yes	LX.	No
t	o If "Ye	s," complete the following sch						
		(a) Name of org	janization	(b) Type of organization	(c) Description of relat	ionship		
_		N/A						
						<del></del>		
_	l la daz s	- the state of the			to and to the best of my leasuinger and belief	E it is toris some		
				oing accompanying schedules and statement based on all information of which preparer ha	its, and to the best of my knowledge and belief as any knowledge	, it is true, corre	Ci,	
		114/						
9	▶ ₹	goature of officer or trustee		12/2/2010	PRESIDENT			
Sign Here	- E	·		Date ,	<u> </u>	reparer's identify	(Ing num	nber
ğ	ν <sub>&gt;</sub> >	Preparer's	يره الكناك	Dat	self-	-para a raomin	11411 و	. 2 3,
ภิ	Paid eparer se Onl	signature ×	MANAGEMENT,	INC.	1//5//O employed			
	Paid Preparer's Use Only	firm's name (or yours 山山 1230		BLVD., SUITE 303	EIN ►			
	<u>ت</u> ع		ANGELES, CA		Phone no (3	10) 82	6-3	800

#### Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2009

Name of the organizati	on	Employer identification number				
	CARTER'S KIDS, INC.	20-5848484				
Organization type (chec	k one).					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)( ) (enter number) organization					
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation					
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
•	on is covered by the <b>General Rule</b> or a <b>Special Rule.</b> (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special	al Rule. See instructions.				
General Rule						
	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (mplete Parts I and II.	(in money or property) from any one				
Special Rules						
509(a)(1) and 1	01(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the 70(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.					
aggregate cont	01(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one cributions of more than \$1,000 for use <i>exclusively</i> for religious, charitable, scientific, liter of cruelty to children or animals. Complete Parts I, II, and III.					
contributions for If this box is ch purpose Do no	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.					
but it must answer "No"	n that is not covered by the General Rule and/or the Special Rules does not file Sched on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).					
LHA For Privacy Act a for Form 990, 990	•	dule B (Form 990, 990-EZ, or 990-PF) (200				

Employer identification number

CARTER'S KIDS, INC.	CA	RTER	'S	KIDS	, INC
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20-5848484

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	SUN TRUST BANK	\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<del></del>		<b>\$</b>	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

FORM '990-PF C	OTHER PROFESSIONAL FEES		STATEMENT 1	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PROFESSIONAL- FEES	4,381.	- 0 .		0.
TO FORM 990-PF, PG 1, LN 16C	4,381.	0.		0.
FORM 990-PF	TAXES		STATEMENT 2	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
FTB IRS	50. 10.	0.		0.
TO FORM 990-PF, PG 1, LN 18	60.	0.		0.
FORM 990-PF OTHER EXPENSES		XPENSES	S	TATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ADVERTISING BANK FEES OTHER OPERATING EXPENSES	330. 9. 5,136.	0. 0. 0.		0. 0. 0.
TO FORM 990-PF, PG 1, LN 23	5,475.	0.		0.

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT	4
NAME OF CONTRIBUTOR	ADDRESS		
SUN TRUST BANK	, P.O. BOX 4418 ATLANTA, GA 30302		