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## Return of Organization Exempt From Income Tax

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

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

2009

Open to Public  
Inspection

<b>A</b> For the 2009 calendar year, or tax year beginning		, 2009, and ending	
<b>B</b> Check if applicable.		<b>C</b> Name of organization <b>CLOTHES LESS TRAVELED THRIFT SHOP, INC.</b>	
<input type="checkbox"/> Address change		D Employer identification number 58 : 2278190	
<input type="checkbox"/> Name change		E Telephone number ( 770 ) 486-8517	
<input type="checkbox"/> Initial return		F Gross receipts \$ 725,950	
<input type="checkbox"/> Terminated		G	
<input type="checkbox"/> Amended return		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<input type="checkbox"/> Application pending		H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No	
		If "No," attach a list. (see instructions)	
		H(c) Group exemption number ►	
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c) ( 3 ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		<b>J</b> Website: ► CLOTHESLESSSTRAVELED.ORG	
<b>K</b> Form of organization. <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ►		<b>L</b> Year of formation: 1997 <b>M</b> State of legal domicile. GA	

**Part I** Summary

<b>Activities &amp; Governance</b>	1 Briefly describe the organization's mission or most significant activities: <b>To sell donated clothing, housewares, and furniture at reasonable prices so that those less fortunate have the ability to purchase quality items at affordable prices. Offer vouchers for clothing through approved organizations for those in need. To support other local charitable organizations by awarding grants with all of our profits from operation.</b>	
	2 Check this box ► <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
	3 Number of voting members of the governing body (Part VI, line 1a) . . . . .	3 10
	4 Number of independent voting members of the governing body (Part VI, line 1b) . . . . .	4 9
	5 Total number of employees (Part V, line 2a) . . . . .	5 10
	6 Total number of volunteers (estimate if necessary) . . . . .	6 175
	7a Total gross unrelated business revenue from Part VIII, column (C), line 12. . . . .	7a 0
b Net unrelated business taxable income from Form 990-T, line 34. . . . .	7b 0	
<b>Revenue</b>	8 Contributions and grants (Part VIII, line 1h) . . . . .	Prior Year 950
	9 Program service revenue (Part VIII, line 2g) . . . . .	Current Year 719719
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . . .	4146
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . . .	1135
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) . . . . .	725950
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . . .	329368
	14 Benefits paid to or for members (Part IX, column (A), line 4) . . . . .	0
<b>Expenses</b>	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) . . . . .	181282
	16a Professional fundraising fees (Part IX, column (A), line 11e) . . . . .	0
	b Total fundraising expenses (Part IX, column (D), line 25) . . . . .	170689
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . . . . .	681339
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) . . . . .	44611
	19 Revenue less expenses. Subtract line 18 from line 12 . . . . .	
	20 Total assets (Part X, line 16) . . . . .	Beginning of Current Year 166074
21 Total liabilities (Part X, line 26) . . . . .	End of Year 212409	
22 Net assets or fund balances. Subtract line 21 from line 20 . . . . .	5884 7608	
	160190 204801	

**Part II** Signature Block

SCANNED JUL 12 2010

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

**Sign  
Here**► *Christine T. Baran*

05/14/10

Signature of officer

Date

► *CHRISTINE T. BARAN, TRGASURER*

Type or print name and title

<b>Paid Preparer's Use Only</b>	Preparer's signature ►	Date	Check if self-employed ► <input type="checkbox"/>	Preparer's identifying number (see instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4 ►	EIN ► :		
		Phone no ► ( )		

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

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

Cat. No. 11282Y

Form 990 (2009)

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**Part III Statement of Program Service Accomplishments**

1 Briefly describe the organization's mission:

**The mission of The Clothes Less Traveled Thrift Shop is to offer volunteer and community service opportunities, as well as to grant funds to support not-for-profit organizations throughout Fayette County and the surrounding region through the resale of donated household goods and clothing.**

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  No

If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: \_\_\_\_\_) (Expenses \$ 317368 including grants of \$ 317368) (Revenue \$ \_\_\_\_\_)

**Through collection and sale of donated clothing, furniture and household goods, we use approximately 50% of our gross income to support other 501c3 charities in their work. We maintain a low expense ratio through the use of 175 volunteer workers. In 2009 Clothes Less Traveled awarded Annual Grants to 12 charitable organizations totaling \$198,600. 26 other charitable organizations were awarded grants throughout the year on a quarterly granting cycle, totaling \$118,768.**

4b (Code: \_\_\_\_\_) (Expenses \$ 12000 including grants of \$ 12000) (Revenue \$ \_\_\_\_\_)

**A small portion of our profits are used to provide scholarships to local high school seniors who have demonstrated significant contributions to the community through volunteer service hours and who have also maintained high academic standards.**

4c (Code: \_\_\_\_\_) (Expenses \$ \_\_\_\_\_ including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_)

4d Other program services. (Describe in Schedule O.)  
(Expenses \$ \_\_\_\_\_ including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_)

4e Total program service expenses ► 329368

**Part IV Checklist of Required Schedules**

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1 ✓	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	2 ✓	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3 ✓	
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4 ✓	
5 <b>Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	
6 Did the organization maintain any donor advised funds or any similar funds or 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 ✓	
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 ✓	
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8 ✓	
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 ✓	
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10 ✓	
11 Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11 ✓	
• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.		
• Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.		
• Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.		
• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.		
• Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.		
• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.		
12 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12 ✓	
12A Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional.	12A ✓	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13 ✓	
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a ✓	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b ✓	
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 ✓	
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 ✓	
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17 ✓	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18 ✓	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19 ✓	
20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20 ✓	

## Part IV Checklist of Required Schedules (continued)

		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.	21	✓
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	✓
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	✓
24a	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 lines 24b through 24d and complete Schedule K. If "No," go to line 25.	24a	✓
a	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	✓
c	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	✓
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	✓
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	✓
b	Is the organization 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	25b	✓
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	✓
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27	✓
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	✓
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	✓
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	✓
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	✓
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	✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	✓
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	✓
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	✓
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	✓
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.	38	✓

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

		Yes	No
<b>1a</b>	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>1a</b> 2	
<b>1b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	<b>1b</b> 0	
<b>1c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
<b>2a</b>	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	<b>2a</b> 17	
<b>2b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)</i>		✓
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		✓
<b>3b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
<b>4a</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 account)?		✓
<b>b</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.		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		✓
<b>5b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		✓
<b>5c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
<b>6a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		✓
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		✓
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year	<b>7d</b> 2	
<b>e</b>	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		✓
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		✓
<b>g</b>	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
<b>h</b>	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		8
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the organization make any taxable distributions under section 4966?		
<b>b</b>	Did the organization make a distribution to a donor, donor advisor, or related person?		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12.	<b>10a</b>	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10b</b>	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>a</b>	Gross income from members or shareholders	<b>11a</b>	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	<b>11b</b>	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		12a
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	<b>12b</b>	

**Part VI Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

### Section A. Governing Body and Management

		Yes	No
1a	1a	10	
1b	1b	9	
2		✓	
3		✓	
4		✓	
5		✓	
6		✓	
7a		✓	
7b		✓	
8a		✓	
8b		✓	
9			✓

### Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a	10a	✓
b	10b	
11	11	✓
11A		
12a	12a	✓
b	12b	
c	12c	
13	13	✓
14	14	✓
15		
a	15a	
b	15b	✓
16a	16a	✓
b	16b	

### Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ► **Georgia**
- 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  Upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial 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: ► **Christine Baran, 104 Sawleaf Lane, Peachtree City, GA 30269 (770) 631-8548**

## **Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

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

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. 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. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees. See instructions for definition of "key employee."
- 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

Check this box if the organization did not compensate any current officer, director, or trustee.

Check this box if the organization did not compensate any current officer, director, or trustee.

**Part VII** **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)**

**1b Total**

**47,500.02**

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ► 0

	Yes	No
3		✓
4		✓
5		✓

**Section B- Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ► 0

## Part VIII Statement of Revenue

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a Federated campaigns . . . . .	1a				
	b Membership dues . . . . .	1b				
	c Fundraising events . . . . .	1c				
	d Related organizations . . . . .	1d				
	e Government grants (contributions) . . . . .	1e				
	f All other contributions, gifts, grants, and similar amounts not included above . . . . .	1f	950			
	g Noncash contributions included in lines 1a-1f: \$ . . . . .			950		
<b>h Total. Add lines 1a-1f</b> . . . . .						
Program Service Revenue	2a Sales Receipts . . . . .	Business Code 453310	719719	719719		
	b . . . . .					
	c . . . . .					
	d . . . . .					
	e . . . . .					
	f All other program service revenue . . . . .					
	g Total. Add lines 2a-2f . . . . .		719719			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) . . . . .		4146			
	4 Income from investment of tax-exempt bond proceeds . . . . .					
	5 Royalties . . . . .					
	6a Gross Rents . . . . .	(i) Real				
	b Less: rental expenses . . . . .	(ii) Personal				
	c Rental income or (loss) . . . . .					
	d Net rental income or (loss) . . . . .					
	7a Gross amount from sales of assets other than inventory . . . . .	(i) Securities				
	b Less: cost or other basis and sales expenses . . . . .	(ii) Other				
	c Gain or (loss) . . . . .					
	d Net gain or (loss) . . . . .					
	8a Gross income from fundraising events (not including \$ . . . . . of contributions reported on line 1c). See Part IV, line 18 . . . . .	a				
b Less: direct expenses . . . . .	b					
c Net income or (loss) from fundraising events . . . . .						
9a Gross income from gaming activities. See Part IV, line 19 . . . . .	a					
b Less: direct expenses . . . . .	b					
c Net income or (loss) from gaming activities . . . . .						
10a Gross sales of inventory, less returns and allowances . . . . .	a					
b Less: cost of goods sold . . . . .	b					
c Net income or (loss) from sales of inventory . . . . .						
Miscellaneous Revenue	Business Code					
11a Sales Tax rebate from State . . . . .	900099	1135				
b . . . . .						
c . . . . .						
d All other revenue . . . . .						
e Total. Add lines 11a-11d . . . . .		1135				
12 Total revenue. See instructions.		725950				

**Part IX Statement of Functional Expenses**

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(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	317368	317368		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	12000	12000		
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, trustees, and key employees	47500	47500		
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	121127	121127		
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	12655	12655		
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17	1707		1707	
f Investment management fees				
g Other	11170	11170		
12 Advertising and promotion	2176		2176	
13 Office expenses	11664	9661	2003	
14 Information technology	493		493	
15 Royalties				
16 Occupancy	126174	126174		
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	6987	5016	1971	
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.)				
a Volunteer Appreciation Dinner	10318		10318	
b				
c				
d				
e				
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	681339	662671	18668	
26 Joint costs. Check here ► <input type="checkbox"/> 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				

## Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash--non-interest-bearing	52333	1	75989
	2 Savings and temporary cash investments	113741	2	136419
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or <b>10a</b> other basis. Complete Part VI of Schedule D			
	b Less: accumulated depreciation <b>10b</b>		10c	
	11 Investments—publicly traded securities		11	
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
	16 Total assets. Add lines 1 through 15 (must equal line 34)	166074	16	212409
Liabilities	17 Accounts payable and accrued expenses	5884	17	7608
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	5884	26	7608
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets		27	
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds	52333	30	75989
	31 Paid-in or capital surplus, or land, building, or equipment fund	109735	31	96937
	32 Retained earnings, endowment, accumulated income, or other funds	4006	32	39483
	33 Total net assets or fund balances	166074	33	212409
	34 Total liabilities and net assets/fund balances	160180	34	204801

**Part XI Financial Statements and Reporting**

1 Accounting method used to prepare the Form 990:  Cash  Accrual  Other \_\_\_\_\_  
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.

2a Were the organization's financial statements compiled or reviewed by an independent accountant?  
 b Were the organization's financial statements audited by an independent accountant?  
 c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  
 d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  
 b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
2a		✓
2b		✓
2c		
3a		
3b		

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

## Public Charity Status and Public Support

OMB No 1545-0047

2009

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

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

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

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**Name of the organization**

**Employer identification number**

## CLOTHES LESS TRAVELED THRIFT SHOP, INC.

58 |

2278190

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

1  A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).

2  A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)

3  A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).

4  A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: \_\_\_\_\_

5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)

6  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).

7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)

8  A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)

9  An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)

10  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).

11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.

a  Type I      b  Type II      c  Type III-Functionally integrated      d  Type III-Other

e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

(ii) A family member of a person described in (i) above?

(iii) A 35% controlled entity of a person described in (i) or (ii) above?

h Provide the following information about the supported organization(s).

Yes	No
11g(i)	
11g(ii)	
11g(iii)	

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

Environ Biol Fish (2007) 79:101–108  
DOI 10.1007/s10641-007-9303-1

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**  
 (Complete only if you checked the box on line 9 of Part I.)

**Section A. Public Support**

Calendar year (or fiscal 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.") . . . . .	50	577	776	727	950	3080
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 . . . . .	133,587	278,091	442,707	555,223	719,719	2,129,327
3 Gross receipts from activities that are not an unrelated trade or business under section 513 . . . . .						
4 Tax revenues levied for the organization'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 <b>Total.</b> Add lines 1 through 5 . . . . .	<b>133,637</b>	<b>278,668</b>	<b>443,483</b>	<b>555,950</b>	<b>720,669</b>	<b>2,132,407</b>
7a Amounts included on lines 1, 2, and 3 received from disqualified persons . . . . .						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year . . . . .						
c Add lines 7a and 7b . . . . .						
8 <b>Public support</b> (Subtract line 7c from line 6) . . . . .						<b>2,132,407</b>

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6 . . . . .	133,637	278,668	443,483	555,950	720,669	2,132,407
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .	388	1,368	3,500	6,537	4,146	15,939
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . . .	388	1,368	3,500	6,537	4,146	15,939
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 carried on . . . . .						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . . . . .	226	464	764	960	1,135	3,549
13 <b>Total support.</b> (Add lines 9, 10c, 11, and 12.) . . . . .	<b>134,251</b>	<b>280,500</b>	<b>447,747</b>	<b>563,447</b>	<b>725,950</b>	<b>2,151,895</b>
14 <b>First five years.</b> 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 ► <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) . . . . .	15	99 %
16 Public support percentage from 2008 Schedule A, Part III, line 15 . . . . .	16	99 %

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) . . . . .	17	0.1 %
18 Investment income percentage from 2008 Schedule A, Part III, line 17 . . . . .	18	0.7 %
19a <b>33 1/3 % support tests—2009.</b> If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization ► <input checked="" type="checkbox"/>		
b <b>33 1/3 % support tests—2008.</b> 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 ► <input type="checkbox"/>		
20 <b>Private foundation.</b> If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► <input type="checkbox"/>		

**Part IV** **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

**Line 12 income represents a 3% rebate from the State of GA to vendors from the Sales Tax collected and paid to the State.**

**SCHEDULE I**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

**Grants and Other Assistance to Organizations,  
Governments, and Individuals In the United States**

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.  
► Attach to Form 990.

OMB No. 1545-0047  
**2009**

Open to Public  
Inspection

Name of the organization

**CLOTHES LESS TRAVELED THRIFT SHOP, INC.**

**Part I General Information on Grants and Assistance**

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Governments and Organizations In the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed. ► □

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
A Better Way Ministry 487 Christopher, Shreveport GA	86-1149558	501c3		15,600			Program Support
APPCC PO 82836, HAPEVILLE GA	58-1592562	501c3		23,000			Program Support
Breast Cancer Survivors Netw 21 Eastbrook, PTC GA	20-8061074	501c3		13,000			Classes, Memorabilia
Cambridge House 2687 Hwy 154, Newman GA	58-0482555	501c3		15,000			Program Support
Christian City 7345 Lester, Union City, GA	58-0917609	501c3		22,000			Challenger Program
Community Welcome House PO 1631	58-1917626	501c3		5,000			Children's Program
Fayette Care Clinic 128 Sumner Rd, Fayetteville GA	20-0314897	501c3		20,000			Program Support
Fayette Council Domestic Violence PO 854, Fayetteville GA	58-1826445	501c3		13,000			Shelter Repairs
Fayette Family YMCA 215 Hulier Rd., Fayetteville GA	58-0566253	501c3		26,000			Camp Scholarships
Fayette Samaritans PO 1071, Fayetteville, GA	58-1981257	501c3		13,000			General Support
Good Samaritan Trans. House PO 1805, Newman GA	58-2566568	501c3		8,000			General Support
Royal Family Kids Camp 290 Marion Blvd, Fayetteville GA	23-0380021	501c3		5,000			Camp Expenses
2 Enter total number of section 501(c)(3) and government organizations							18
3 Enter total number of other organizations							2

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

Cat. No. 50055P

Schedule I (Form 990) 2009

**Continuation Sheet for Schedule I (Form 990)**

Department of the Treasury  
Internal Revenue Service

**Name of the organization**

► Attach to Form 890 to list additional information for Schedule I (Form 890), Part II or Part III.

WMB No. 1545-0047

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Glossary - ANGLO-PI

CLOTHES LESS TRAVELED THRIFT SHOP INC.

## Part I Continuation of Grants and Other

**For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 890.**

Cat. No. 51026W

**III Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22.  
See Part IV and Schedule L-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Scholarships	5	12,000			

Part IV **Supplemental Information** Complete this part to provide the information required in Part I and any other additional information

**Part 1 Line 2: Site visits are conducted by our Board of Directors to any organization receiving more than \$5000 in Grant Awards in any given year. Grant Recipient**

Organizations are required to complete and return a **Grant Follow-Up Questionnaire** regarding their expenditure of our Grant Funds.

**Part 111: Scholarships are awarded to a select group of High School Seniors who have demonstrated outstanding contributions to the community through Volunteer**

Applicants are also required to contribute a minimum of 40 hours of Volunteer Service at our Thrift Shop as well as excellent academic achievement.

Scholarships are available to the college of the recipient.

University of GA 220 McInnes Blvd/under Academic Blvd Athens GA - \$1 000 Scholarship on behalf of Cameron Gallo 123 Maritime Way Beachtree City GA 30669

Auburn University 115 Quad Center Auburn AL 36849-5310 on behalf of Natalie Hauser Ann Stonehaven Dr Fayetteville, GA 30215

**Georgia Institute of Technology, 225 North Ave., Atlanta GA - \$2,000 Scholarship on behalf of Colin Wallon, 110 Kenton Place, Peachtree City, GA 30269**

Ave Maria University, 5050 Ave Maria Blvd., Ave Maria FL - \$4,000 Scholarship on behalf of Ethan Millukas, 114 Interlochen Dr., Peachtree City, GA 30269

**Georgia College and State University, Campus Box 30, Milledgeville, GA - \$1,000 Scholarship on behalf of Daniel Wallon, 110 Kenton Place, Peachtree City GA 30269**

**SCHEDULE M**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

**Noncash Contributions**

OMB No. 1545-0047

**2009**

Open To Public  
Inspection

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.  
► Attach to Form 990.

Name of the organization

**CLOTHES LESS TRAVELED THRIFT SHOP, INC.**

Employer identification number

**58 2278190**

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art—Works of art . . . . .				
2 Art—Historical treasures . . . . .				
3 Art—Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .	✓		See Part II	Sales Revenue
6 Cars and other vehicles . . . . .	✓		See Part II	Sales Revenue
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .				
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests . . . . .				
12 Securities—Miscellaneous . . . . .				
13 Qualified conservation contribution—Historic structures . . . . .				
14 Qualified conservation contribution—Other . . . . .				
15 Real estate—Residential . . . . .				
16 Real estate—Commercial . . . . .				
17 Real estate—Other . . . . .				
18 Collectibles . . . . .	✓	20	See Part II	Sales Revenue
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ► (.....)				
26 Other ► (.....)				
27 Other ► (.....)				
28 Other ► (.....)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . .

**29 3**

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . .  
b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? . . . . .

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . .  
b If "Yes," describe in Part II.

33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II.

	Yes	No
30a		✓
31	✓	
32a		✓

**Part II Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

**Part I, Line 4 & 5:** As a Thrift Shop, all donations we receive are processed and either put out for sale, used within the Shop (such as donated clothing racks or shelving units) or re-donated to other Charitable Organizations.

The revenue from the sale of all donations is listed as our Program Service Revenue on Form 990, Part VIII, Line 2a.

**Part I, Line 18:** We have in place a Policy that any donation of a collectible (such as rare or antique items, or a high-value item) is brought to the attention of the Shop Manager, who researches the value of the item, maintains a Log Book for High Value items, acquires the Donor's Contact Information, and contacts the Board Treasurer, who then issues a Form 8283 and Form 8282 when necessary. The revenue from the sale of all donations deemed "collectibles" is listed as part of our Program Service Revenue on Form 990, Part VIII, Line 2a.

**Part I, Line 29:** Three Form 8283's were sent out in 2009 for donations valued at \$500 or more for one item or one set.

**Part I, Line 31:** We have a written Policy that we do not accept Non-Standard contributions of any kind.

**SCHEDULE O  
(Form 990)**Department of the Treasury  
Internal Revenue Service**Supplemental Information to Form 990**Complete to provide information for responses to specific questions on  
Form 990 or to provide any additional information.

► Attach to Form 990.

OMB No 1545-0047

**2009**Open to Public  
Inspection

Name of the organization

**CLOTHES LESS TRAVELED THRIFT SHOP, INC.**

Employer identification number

**58 : 2278190****Part IV, Line 11: A copy of the Form 990 and all completed Schedules is made available in the Thrift Shop's business****Office for review by all Board members prior to filing. Board members are all notified via email of this and requested to  
go in and review the Tax Filing Forms and Schedules and make comments prior to filing. A copy of the Form 990 and  
all completed Schedules is also presented at the next meeting of the Board of Directors, for review and approval.****Part VI, Line 15b: The Executive Committee of the Board of Directors (President, Vice President, Secretary and Treasurer)****meet in private session to determine compensation and review Job Performance of the Shop Manager, who is our sole  
key employee. The President of the Board is the Shop Manager's reporting authority and the President conducts semi-  
annual Job Performance Reviews with the Shop Manager. The Vice President conducts yearly salary comparisons to  
ensure our Shop Manager's compensation is competitive with the local environment. The Executive Committee's  
recommendation regarding compensation is then presented to the independent members of the Board of Directors  
for discussion and approval.****Part VI, Line 19: The Board of Directors will produce, upon request from any organization or individual, a copy of our  
governing documents, Form 990s and/or Financial Reports. A current list of all the charitable organizations we support  
is maintained in the Shop by the cash registers, so that our customers can see the organizations they are supporting  
through their purchases from and donations to our Thrift Shop. Our monthly Volunteer Newsletter provides current  
information to all our volunteers regarding the Grants and Scholarships we award on a quarterly basis.****Part V, Line 7d and Schedule M, Part I, Line 29: Two Form 8282s were sent to the IRS for donations of one item or set  
valued at \$500 or more in 2009; however Three Form 8283s were completed for donors, as one donor requested a  
completed Form 8283 even though his donation was not valued over \$500.**