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CIS2CY561D

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.

OMB No. 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions. Employer Identification number

Sh	er	man Cour	ity (Communit	y se	ervices,	Inc.				4-283	2553	_			
P	rt I	Reasor	n for P	ublic Char	ity Sta	atus (All organ	nizations m	nust compl	ete this pa	rt) See in	structions.					
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	Н	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)														
3	Н	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(III). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(III). Enter the hospital's name,														
4	Ц	A medical rese		ganization ope	rated in	conjunction w	ith a hospi	tal describ	ed in sect	170(b)	Ж1ЖАЖШ).	Enter the	hospit	.al's nar	ne,	
5	Π	•		ted for the ben	efit of a	college or univ	ersity owr	red or ope	rated by a	governme	ental unit d	escribed	ın secti	lon		
_		170(b)(1)(A)(lv	rganization operated for the benefit of a college or university owned or operated by a governmental unit described in section b)(1)(A)(Iv). (Complete Part II.)													
6 7	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public d											lio dos	oribod i	_		
•		section 170(b)(1)(A)(vi). (Complete Part II.)												JIDGU	**	
8	Ц	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)														
9	X	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.)														
	m		•													
10 11	Н	An organization	_	*		•	•	•			to carny o	ut the				
••	Ų	purposes of or	•	•		•		•		-	•		on			
		509(a)(3). Che			•	•										
		а Птуре і		ь ∏туре	: II	c ∏.	Type III-Fu	inctionally	integrated		d 🗍 1	ype III-O	ther			
By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified																
	_	persons other			gers and	d other than on	e or more	publicly su	pported c	organizatio	ns describ	ed in sec	tion			
		509(a)(1) or se		• • • •												
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.														
9	following persons?															
(I) A person who directly or indirectly co						controls, either alone or together with persons described in						1		Yes	No	
and (iii) below, the gov				governing bo	dy of the	supported or	ganization	nization?			· · · · · · · ·	11g(i)		Х		
(II) A family member of a person										2 2012 0 119				X		
(III) A 35% controlled entity of a perso				on desc	n described in (i) or (ii) above?					11g(III)						
h		Provide the foll	lowing Ir	nformation abo	ut the s	upported orga	nızation(s)		<u> </u>	-05	MALIT					
<i>/</i> /\			l .	an en	am -		(1)		1.6	CODE	(AI)	is the	(MIN	Amoun	• • •	
(f) Name of supported organization		• • •	(II) EIN	(II) EIN	(described on lines 1-9	1		(V) Did you notify the organization in col. (I)		organization in col. () (vii) Amount of support		101		
				above or IRC section	governing document?		of your support?		organized in the U.S.?			• •				
						(see Instructions))		Yes No		Yes No		Yes No				
							163	140	763	NO	165	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

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Schedule A (Form 990 or 990-EZ) 2009 Sherman County Community S 74-2832553 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2009 (a) 2005 (b) 2006 (c) 2007 (d) 2008 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 1685 3435 40724 2782 2043 50669 Tax revenues levied for the organization's benefit and either paid to or expended on ris behalf The value of services or facilities furnished by a governmental unit to the organization without charge 2782 2043 50669 Total. Add lines 1 through 3....... 1685 3435 40724 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) 50669 Public support. Subtract line 5 from line 4 Section B. Total Support (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Calendar year (or fiscal year beginning in) Amounts from line 4 1685 40724 2782 2043 50669 3435 Gross income from interest, dividends. payments received on securities loans. rents, royalties and income from similar sources 110 65 544 36 57 276 Net income from unrelated business activities, whether or not the business is 60041 235081 45493 13585 66561 49401 regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets 609 (Explain in Part IV.) 276 120.% 286903 11 Total support. Add lines 7 through 10 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage **17.6**6 % Public support percentage from 2008 Schedule A, Part II, line 14 42.50 15 33 1/3 % support test -- 2009, If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization 33 1/3 % support test -- 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this 17a 10%-facts-and-circumstances test -- 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test -- 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.

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Schedule A (Form 990 or 990-EZ) 2009

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SHERMAN COUNTY COMMUNITY SERVICES PO BOX 185 GOODLAND KS 67735



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DECLARATION

Under penalties of perjury, I declare that I have examined the return identified in this letter, including any accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. I understand that this declaration will become a permanent part of that return.

Ilan Anher 1-7-2012.
Signature of officer or trustee Date

Theorem
Title