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Form 990

Department of the Treasury Internal Revenue Service

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)

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

OMB No 1545-0047

2010

Open to Public Inspection

A	For the	e 2010 calend	dar year, or tax year beginning , 2010, and ending				,		
В	Check if	applicable	C Name of organization Clothes To Kids, Inc.		D Employ	er Ident	ification Numbe	r	
	Add	dress change	Doing Business As		14-	1849	798		
	Nar	me change	Number and street (or P O box if mail is not delivered to street addr) Room/sui	te	E Telepho				
	1 1	at return	1059 - N. Hercules Avenue		172	7) 4	41-5050		
	1 1	minated	City, town or country State ZIP code + 4		(12	11 3	11 3030		
	1 1	ended return	Clearwater FL 33765	1.	G C		\$ 1,118,6	6 0	
	` 	olication pending		(a) Is this a					
	[_] Apr	Discation pending		(b) Are all a			H'	'es 'es	X No
	Taylor	warmat atatus	Fatti nanks 1039 N Hercules Ave Cleatwater FL 33703		ttach a list		tructions) 🗀 '	62	
<u> </u>		xempt status							
<u>,,</u>				(c) Group ex			-		
K		of organization	X Corporation Trust Association Other ► L Year of Formation	n 2002	M s	State of le	egal domicile	FL	
Pa	art I	Summai							
			be the organization's mission or most significant activities The missi					_ <u>I</u> 1	uc.
e	-	<u>is to pr</u>	ovide new and quality used clothing to low-inc	ome_s	chool	_age	<u>d</u>		
Activities & Governance] -	cullaren	in Pinellas County, free of charge.						
/err						 -			
6			x I if the organization discontinued its operations or disposed of more	than 25%	of its ne				
ಶ			ting members of the governing body (Part VI, line 1a) dependent voting members of the governing body (Part VI, line 1b)				14 14		
9			of individuals employed in calendar year 2010 (Part V, line 2a)						
Ξ			of volunteers (estimate if necessary)			$\overline{}$	9 145		
Act	l		d business revenue from Part VIII, column (C), line 12			7a	143		0.
	l		business taxable income from Form 990-T, line 34			7b			
				Dri	or Year	' ' '	Current	· Va	
	8 (Contributions	and grants (Part VIII, line 1h)		118,3	143			731.
Ë	1		ice revenue (Part VIII, line 2g)		110/0	,13.		, , ,	731.
Revenue			come (Part VIII, column (A), lines 3, 4, and 70)		6.1	59.		5.	541.
æ	11 (Other revenue	e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10 Ranguis VED	<u> </u>		572.			388.
	12	Total revenue	- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1.	1,130,174.		1,118,6		
		_		/	100/1	· · · · · · · · · · · · · · · · · · ·			000.
	14 E	Renefits naid	to or for members (Part IX, column (A) time 4) UC 14 2011						
	15	Salaries othe	r compensation, employee honofits (Part IX, column (A), lines 5, 10)	179,083.			2.3		127
ø	10 -	Daianes, one	to compensation, employee benefits (1 art 12, containing (a), littles 5-107-2					0,	<u>137.</u>
ĵ.	Iba F	Professional f	to or for members (Part IX, column (A), lines 13) 14 2011 (compensation, employee benefits (Part IX, column (A), lines 5-10) (compensation, employee benefits (Part IX, column (A), lines 110 GDEN, UT						
Expenses	b∃	Total fundrais	ing expenses (Part IX, column (D), line 25) ► 106,031.						
ш	17 (Other expense	es (Part IX, column (A), lines 11a-11d, 11f-24f)		803,3	53.	1,03	19,	<u>1</u> 71.
	18 7	Total expense	s Add lines 13-17 (must equal Part IX, column (A), line 25)		982,4	36.	1,27	5,	308.
	19 F	Revenue less	expenses Subtract line 18 from line 12		147,7	38.	-15	66,	648.
8 8				Beginning	of Curren	t Year	End of	Yea	r
alan e	20 7	Fotal assets (Part X, line 16)		658,4				575.
Not Assets Fund Balanc	21 7	Fotal liabilities	s (Part X, line 26)		6,2				999.
25	22 1	Net assets or	fund balances Subtract line 21 from line 20		652,2	24.	40	15.	576.
Pa	rt II	Signatur		-	002,2	<u> </u>		<u> </u>	<u> </u>
		 		e hest of m	knowledo	e and he	lief it is true co	rract	
com	plete De	claration of prepa	eclars that I have examined this eturn, including accompanying schedules and statements, and to the other than officer) is based or all information of which preparer has any knowledge	.0 0051 07 111	/ Kiromicugi	1.1	1101, 1013 1100, 00	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	. and
			1000 VMCC		0/5	711			
Sig	ın	Signatur	e of officer	Date	1 5	/			
He		•	Patti Hanks, executive Di	roc-	tor	•			
		Type or	print name and title		, ,				
		Print/Type p	reparer's name Preparer's signature Date		`haatı	1. 1	PTIN		
D-	: A		Fontana Epontona 9/23		heck	」"			
Pa			Folitaria College 1 dic	/ \	elf employe	ea [_	
	eparer e Only								
US	e Om	Firm's addre		F	irm's EIN	<u> </u>			
_			Clearwater FL 33761	F	hone no				
May	the IR	S discuss thi	s return with the preparer shown above? (see instructions)				X Yes		No

ВАА	TEEA0102 10/06/10		-	Forr	n 990	(2010)
(Expenses \$ 4e Total program service expenses ▶	including grants of \$) (Revenue \$ 1,089,277.)	
4d Other program services (Describe in S						
		· – – – –				
				- - -		
		 -				
						- -
4c (Code) (Expenses \$	including grants of \$) (Revenue	\$)
				- - -		
						
4b (Code) (Expenses S	including grants of \$) (Revenue	s)
					-	
					- - -	
reduced lunch in the 20	010/2011 school year).					
County eligible to short	y, there are at least 51,830 children in a control of at CTK (number of children receiving from	cee or Fruelly	<u>as</u>			
wardrobes. The total co	ost for CTK to provide one wardrobe to a					
In 2010, Clothes To Kic	ds (CTK) distributed a total of 11,891					
4a (Code) (Expenses \$	1,089,277. including grants of \$ 0.)(Revenue	\$			0.)
expenses, and revenue, if any, for each	ch program service reported			,		
and 501(c)(4) organizations and section	ments for each of the organization's three largest program services on 4947(a)(1) trusts are required to report the amount of grants and	by expens diallocation	es Se is to ot	ction 5 hers, t	501(c) the tot	(3) al
If 'Yes,' describe these changes on Sc						
	i, or make significant changes in how it conducts, any program ser	vices?	П	Yes	X	No
Form 990 or 990-EZ? If 'Yes,' describe these new services of	on Schedule O			Yes	X	No
-	gnificant program services during the year which were not listed on	the prior			€	
		·				
children in Pinellas Co	quality used clothing to low-income schoo ounty, free of charge.	<u>i⊥ ageα</u>			- - -	
The mission of Clothes		· -			. _ -	
1 Briefly describe the organization's mis	·					
	a response to any question in this Part III					
Part III Statement of Program S	ervice Accomplishments	14-18	3497	98	-	Page Z

Form 990 (2010) Clothes To Kids, Inc. 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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2		Х
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_		х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? 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		х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		_X_
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If 'Yes,' complete Schedule D, Part IV</i>	9		X
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	Х	
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable			
ā	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	х	
ŀ	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	11 b		X
(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	11 c		<u>X</u>
	d 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	11 d	Х	
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	<u> X</u>	
	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 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		X
12 a	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a	х	
	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		_X_
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		<u>X</u>
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
	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, Parts I and IV	14b		<u>X</u>
	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, Parts II and IV	15		<u> </u>
	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, Parts III and IV	16		X
	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 (see instructions)	17		X
	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		<u> </u>
	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		<u>X</u>
	aDid the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		<u> X</u>
t t	olf 'Yes' to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20 b		

Form 990 (2010) Clothes To Kids, Inc.

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 17 If 'Yes,' complete Schedule I, Parts I and II	21		Х
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		Х
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? <i>If 'Yes,' complete Schedule J</i>	23		Х
24 a	a 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, and 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		Х
b	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		
25 a	a 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		х
t	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		х
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		Х
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		X
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)			
а	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	_X	
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		<u>X</u>
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		<u>X</u>
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		X
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		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		Х
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2 Yes X No			
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		<u> </u>
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		X
	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	х	
3AA		Form	990 C	2010)

<u>. a</u>	Check if Schedule O contains a response to any question in this Part V			Г
			Yes	No
1 a	a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1			
ŀ	Enter the number of Forms W-2G included in line 1a Enter -0 if not applicable 1b 0			
•	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	х	
2	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 9			
Ł	of fat least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)		•••	
3 a	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
	If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3b		
4 a	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)? If 'Yes,' enter the name of the foreign country.	4a		Х
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5 <i>a</i>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
(c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5с		
6 a	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?	6a	-	х
t	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		_	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х
t	olf 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file			
	Form 8282?	7c		X
	If 'Yes,' indicate the number of Forms 8282 filed during the year 7d	_		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<u>X</u>
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
r	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. 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		Х
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter		l	
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter	- 1		
	Gross income from members or shareholders	İ		
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	olf 'Yes,' enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.		ŀ	
а	is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u>X</u>
b	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b		

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. Check if Schedule O contains a response to any question in this Part VI Х Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year 1al14 **b** Enter the number of voting members included in line 1a, above, who are independent 1b 14 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee? 2 Х Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3 Х Did the organization make any significant changes to its governing documents 4 Х since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X Does the organization have members or stockholders? 6 Х 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7 a X b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8a Х **b** Each committee with authority to act on behalf of the governing body? 8Ь Х Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O 9 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes Νo 10a Does the organization have local chapters, branches, or affiliates? 10a Х b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b 11 a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? Х 11 a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13 12a Х b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Х c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 12c Х 13 Does the organization have a written whistleblower policy? 13 Х 14 Does the organization have a written document retention and destruction policy? 14 Χ Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official Х 15a **b** Other officers of key employees of the organization Х 15b If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a Х b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed > Florida Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website Another's website X Upon request 19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public State the name, physical address, and telephone number of the person who possesses the books and records of the organization ______1059 N Hercules Ave Clearwater FL 33765 (727) 441-5050

Form	990	(2010)	Clothes	TΟ	Kide	Tnc
FUMI	220	(2010	CIOCHES	ΙU	VTG2.	THE.

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

Check if Schedule O contains a response to any question in this Part VII

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
- 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, if any 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 compensated employees, and former such persons

(A)	(B)			•	C)			(D)	(E)	(F)
Name and title	Average hours		ition (that app	ly)	Reportable compensation from	Reportable compensation from	Estimated
	per week (describe hours for related organiza- tions in Schedule O)	advidi et frustee or director	institutional kustee	Offi ea	Key employee	Higt est coin-e-isated employee	rolvne)	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(1) Nelda Gant		-	T							
Board Member	1.00	х				ļ		0.	0.	0.
(2) Lauri Lee										
Board Member	1.00	X						0.1	0.	0.
(3) Carol Cook		_								
Board Member	1.00	x						0.	0.	0.
(4) Gary Bauler										
Board Member	1.00	x						0.	0.	0.
(5) Lisa Brody										
Board Member	1.00	x						0.	0.	0.
(6) Noelle Gavaghan	1									
Board Member	1.00	x						0.	0.	0.
(7) John Leanes										<u>-</u> `
Board Member	1.00	X						0.	0.	0.
(8) Lynne McCaskill	-									
Board Member	1.00	x						0.	0.	0.
(9) Howard Miller										
Board Member	1.00	Х						0.	0.	0.
(10) Natarsha Nesbitt										
Board Member	1.00	Х						0.	0.	0.
(11) Mashonda Smith										
Board Member	1.00	х						0.	0.	0.
(12) Cheryl Abernathy				,,						
President	2.00	X	\vdash	Х				0.	0.	0.
(13) Len Leighton	- 1 1 00	,,		.,						
Vice President	1.00	X	H	Х				0.	0.	0.
(14) David Alvarez	- 1 200									•
Treasurer	1.00	X	-	Х				0.	0.	0.
(15) Jim Nelson	- , , , ,	١.,		,						-
Secretary	1.00	<u> </u>		Х				0.	0.	0.
(16) Patti Hanks	- 40 00			,,				45.45.		-
Executive Director	40.00	 		Х				47,150.	0.	0.
(17) Jennifer Silva	-									_
Past Exec. Director	40.00		<u> </u>	Х		<u> </u>		9,529.	0.	0 . Form 990 (2010)
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· (A)	(B)	(c)						(D)	(E)		(F)	
Name and title	Average hours per week (describe hours for related organi- zations in Sch O)			Officer		Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W 2/1099 MISC)	amo con f org ar	stimated unt of ol ipensati rom the janization d relate anization	ther ion on ed
(18)	-		- -						······································			
(19)	-											
(20)												
(21)												
(22)									· -·.			
(23)												
(24)												
(25)												
(26)												
(27)												
(28)				-	_							
(29)						-						
1 b Sub-total	<u> </u>					1	▶	56,679.	0.			0
c Total from continuation sheets to Part VII, Section A	١.						►	00,0.3.				
d Total (add lines 1b and 1c)							>	56,679.	0.			0
2 Total number of individuals (including but not limited from the organization ► 0	to those	e iist	ea a	abov	e) w	/no i	rece	ived more than \$1	UU,UUU in reportabi	e comp	ensatı	on
3 Did the organization list any former officer, director of	or truste	e, ke	ey e	mplo	yee	, or	hıgl	nest compensated	employee		Yes	No
on line 1a ³ If 'Yes,' complete Schedule J for such inc. 4 For any individual listed on line 1a, is the sum of rep	ortable	com	pens	satic	n ar	nd o	ther	compensation fro	m	3		X
the organization and related organizations greater the such individual	an \$150	,000	? If	'Yes	s' co	mpl	ete	Schedule J for		4		х
5 Did any person listed on line 1a receive or accrue co for services rendered to the organization? If 'Yes,' co	mpensa <i>mplete</i>	tion Sch	fron edul	n an e J	y ur for s	rela uch	ted per	organization or in	dividual	5		х
Section B. Independent Contractors 1 Complete this table for your five highest compensate	d indepe	ende	nt c	ontr	acto	rs th	nat r	received more than	\$100,000 of			
compensation from the organization (A)					_							
Name and business address	S							(B) Description o	f services	Compe	nsatio	n
						_						
							_	<u> </u>				
							_		_			
2 Total number of independent contractors (including b \$100,000 in compensation from the organization ►		mıte	d to	thos	se li	sted	abo	ove) who received	more than			

<u> </u>		in Statement of Ites	ciiuc					
•					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
	1 2	Federated campaigns	1	9				
ž S					-			
ξž		Membership dues	1		_			
S, G	C	: Fundraising events	1	с				
A A	C	Related organizations		d				
S,E	e	Government grants (contribution	ns) 1	e		•		
S S		-						
듗핖	T	All other contributions, gifts, gr similar amounts not included al	ants, and bove 1	f 1,106,731.				
\$ 2	_		· -	\$ 683,789.	-			
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	~	Noncash contributions included	III IIIS 1a-11					
	n	Total. Add lines 1a-1f			1,106,731.		· · · · · · · · · · · · · · · · · · ·	-
Ĭ	_			Business Code			~=	
Š	2 a	'					-	
2	b)						
Ş	c	:						
ËE	d	ı						
Σ	е						-	-
GR/	f	All other program service	revenue	-	 			
PROGRAM SERVICE REVENUE		Total. Add lines 2a-2f	70401140	<u> </u>				
					 			
	3	Investment income (incluother similar amounts)	iding dividen	ds, interest and	5,541.	0.	0.	E E // 1
		•	-f t		3,341.	0.		5,541.
	4	Income from investment	or tax-exemp	•	` <u></u>			
	5	Royalties		<u>▶</u>	1		· · · · · · · · · · · · · · · · · · ·	
		_	(ı) Real	(II) Personal	_			,
	6a	Gross Rents			_			
	b	Less rental expenses				ż		,
	c	Rental income or (loss)						
	d	Net rental income or (los	s)	•	•			•
	7.	Gross amount from sales of	(i) Securities	(II) Other		,		- 1 ¹ 11 - 1
	/ a	assets other than inventory						
		´ F	-		=			
	b	Less cost or other basis and sales expenses						
	_	Gain or (loss)			=			
		· '			-	-		-
	a	Net gain or (loss)						T
NUE	8 a	Gross income from fundra (not including \$	·	5				
OTHER REVEN		of contributions reported	on line 1c)					
24		See Part IV, line 18		a				
뿚	b	Less: direct expenses		b				
Ò	С	Net income or (loss) from	n fundraising	events				
		Gross income from gamii See Part IV, line 19	ū	a				
- 1	b	Less direct expenses		b	-			
		Net income or (loss) from	a amina act	<u>-</u>	-			
		Gross sales of inventory, and allowances	less returns	a	-			
		Less cost of goods sold		b	-			
	С	Net income or (loss) from						
		Miscellaneous Revenue		Business Code				
	11 a	Textile recycli	ng	900099	6,388.	6,388.	0.	0.
	b							
	С							
	d	All other revenue						
	е	Total. Add lines 11a-11d		•	6,388.			
		Total revenue. See instru	ictions	•	1,118,660.	6,388.	0.	5,541.
!					,, 000.	0,000.		2,341.

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)

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				·
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	56,679.	18,248.	18,030.	20,401
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	151,455.	99,551.	20,679.	31,225
Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	9,801.	7,422.	1,154.	1,225.
10 Payroll taxes	18,202.	10,339.	3,455.	4,408.
11 Fees for services (non-employees)			-	
a Management				
b Legal				
c Accounting	18,186.	0.	18,186.	0
d Lobbying				
Professional fundraising services See Part IV, line 17 Investment management fees				
g Other	1,779.	1,007.	331.	441
12 Advertising and promotion	4,190.	0.	350.	3,840
13 Office expenses				
14 Information technology	5,074.	158.	447.	4,469
15 Royalties				
16 Occupancy	119,086.	105,378.	5,354.	8,354
17 Travel				
Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	2,016.	0.	2,016.	0.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	8,430.	8,430.	0.	0.
23 Insurance	4,625.	4,146.	241.	238
Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a In-kind clothing	726,799.	726,190.	609.	0.
b Inventory	77,653.	77,653.	0.	0.
c In-kind supplies & equipment	3,642.	2,874.	642.	126.
d Off site storage	6,223.	6,223.	0.	0.
e Utilities	8,870.	7,194.	1,233.	443.
f All other expenses	52,598.	14,414.	7,323.	30,861.
25 Total functional expenses Add lines 1 through 24f	1,275,308.	1,089,227.	80,050.	106,031.
26 Joint costs. Check here ► X if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational				
campaign and fundraising solicitation	0.	0.	0.	0 . Form 990 (2010

Pa	<u>ırt X</u>	Balance Sheet			
•			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1	
	2	Savings and temporary cash investments	71,029.	2	62,967.
	3	Pledges and grants receivable, net	159,273.	3	155,557.
	4	Accounts receivable, net	1,762.	4	878.
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	2,000.	5	0.
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)	,	6	
S	7	Notes and loans receivable, net		7	
S S E T S	8	Inventories for sale or use	324,484.	8	277,808.
S	9	Prepaid expenses and deferred charges	18,923.	9	3,754.
	10 a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 70,050	0.		
	l b	Less accumulated depreciation 10b 56, 959	 1	10 c	13,091.
	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	59,480.	15	53,520.
	16	Total assets Add lines 1 through 15 (must equal line 34)	658,472.	16	567,575.
	17	Accounts payable and accrued expenses	1,795.	17	6,255.
	18	Grants payable		18	
	19	Deferred revenue		19	2,500.
Ļ	20	Tax-exempt bond liabilities		20	
L A B I	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
L F T	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L.	AA AMARIAA AA	22	*
Ė	23	Secured mortgages and notes payable to unrelated third parties		23	
Ĭ	24	Unsecured notes and loans payable to unrelated third parties		24	58,200.
	25	Other liabilities Complete Part X of Schedule D	4,453.	25	5,044.
	26	Total liabilities. Add lines 17 through 25	6,248.	26	71,999.
N		Organizations that follow SFAS 117, check here > X and complete lines	0,2101		71,000.
N E T		27 through 29 and lines 33 and 34.			
A	27	Unrestricted net assets	442,951.	27	340,019.
ASSETS	28	Temporarily restricted net assets	159,273.	28	155,557.
	29	Permanently restricted net assets	50,000.	29	0.
Q R		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete	•		
		lines 30 through 34.			
FUND :	30	Capital stock or trust principal, or current funds		30	
B A	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
AZCES	33	Total net assets or fund balances	652,224.	33	495,576.
Š	34	Total liabilities and net assets/fund balances	658,472.	34	567,575.

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Form **990** (2010)

Form 990 (2010) Clothes To Kids, Inc.	14-1849798	}	Pa	ge 12				
Part XI Reconciliation of Net Assets								
Check if Schedule O contains a response to any question in this Part XI								
1 Total revenue (must equal Part VIII, column (A), line 12)	1		<u> 18,6</u>					
2 Total expenses (must equal Part IX, column (A), line 25)	2	1,2	75,3	808.				
3 Revenue less expenses Subtract line 2 from line 1								
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4								
5 Other changes in net assets or fund balances (explain in Schedule O) 5								
6 Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) 6								
Part XII Financial Statements and Reporting								
Check if Schedule O contains a response to any question in this Part XII				\Box				
			Yes	No				
1 Accounting method used to prepare the Form 990								
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?		2a		X				
b Were the organization's financial statements audited by an independent accountant?		2b	Х					
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight review, or compilation of its financial statements and selection of an independent accountant?	t of the audit,	2c	х					
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule \ensuremath{O}								
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were separate basis, consolidated basis, or both	issued on a			,				
X 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 Audit Act and OMB Circular A-133?	the Single	3a		_X_				
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required audit	3b						
BAA		Form	990 (2010)				

TEEA0112 12/21/10

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

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

OMB No 1545-0047 **2010**

Open to Public Inspection

Employer identification number

Clo	the	es To Kids, I								34979			
Parl	: 1	Reason for Pub	lic Charity Status	(All organizations	must o	comple	te this	part.)	See ı	nstruct	tions.		
The c	r <u>g</u> ai	nization is not a priva	te foundation because	e it is (For lines 1 through	gh 11, cl	heck onl	y one b	ox)					
1		A church, convention	of churches or assoc	lation of churches desci	ribed in	section	170(b)(1)(A)(i).					
2		A school described in	n section 170(b)(1)(A)	(ii). (Attach Schedule E)								
3		A hospital or a coope	erative hospital service	e organization described	in sect	ion 17 0 (b)(1)(A)	(iii).					
4		A medical research of	organization operated	in conjunction with a ho	spital de	escribed	ın secti	on 17 0 (b)(1)(A)	(iii) Ente	er the hosp	tal's	
	_	name, city, and state											
5		An organization oper 170(b)(1)(A)(iv). (Co	ated for the benefit of implete Part II)	a college or university	owned o	r operat	ed by a	governn	nental u	nıt desc	ribed in sec	tion	
6				vernmental unit describ						_			
7		ın section 170(b)(1)(A)(vi). (Complete Par	•		_	ernment	tal unit c	or from t	he gene	ral public d	escrib	ed
8	님			0(b)(1)(A)(vi). (Complete									
9		from activities related investment income a	d to its exempt functio	omore than 33-1/3% of ons — subject to certain of taxable income (less s mplete Part III)	exception	ns, and	(2) no r	nore tha	ın 33-1/3	3% of its	s support from	om gra	oss
10		An organization orga	inized and operated ex	clusively to test for pub	lic safet	y See s	ection 5	509(a)(4)).				
11		more publicly suppor	ted organizations des	clusively for the benefit cribed in section 509(a) on and complete lines 1	(1) or se	ection 50	he funct 19(a)(2)	ions of, See se	or carry ction 50	out the 9(a)(3).	purposes of Check the	f one box th	or nat
		a Type I	b Type II	c ☐ Type III	– Fund	tionally	ıntegrate	ed		d 🗌	Type III -	- Othe	r
е		By checking this box other than foundation section 509(a)(2)	, I certify that the organ managers and other	inization is not controlle than one or more public	d directl	y or ındı orted orç	rectly by ganization	y one or ons desc	more d cribed in	squalific section	ed persons 509(a)(1)	or	
f		` , ` ,	ceived a written deter	mination from the IRS tl	hat is a	Type I, 7	уре ІІ о	r Type I	II suppo	rtıng orç	ganızatıon,		
g		Since August 17, 200	06, has the organization	on accepted any gift or	contribu	tion fron	n any of	the follo	owing pe	ersons?			
_		-	_				•		•			Yes	No
		(i) A person who obelow, the gove	directly or indirectly co erning body of the sup	introls, either alone or to ported organization?	ogether	with pers	sons des	scribed i	n (II) an	d (III)	11 g (i)		
		(ii) A family memb	er of a person describ	ed in (i) above?							11 g (ii)		
		(iii) A 35% controlle	ed entity of a person o	lescribed in (i) or (ii) ab	ove?						11 g (iii)		
h		Provide the following	information about the	supported organization	n(s)								
		(i) Name of supported organization	(II) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organiz column (your go	Is the ration in in listed in overning ment?	the organ	ou notify lization in n (i) of upport?	(vi) l organiz colun organize U S	ation in nn (i)	(vii) Amour	nt of sup	port
					Yes	No	Yes	No	Yes	No			
			1	}									
A)													
					ŀ	}							
B)			<u> </u>		ļ								
C)				···				-				 -	
D)													
_\													
E)											-		
otal													
otal				<u> </u>	<u> </u>	l	L	<u> </u>					

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Sec	tion A. Public Support						
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include 'unusual grants')	883,435.	913,964.	882,065.	1,118,343.	1,106,731.	4,904,538.
2	Tax revenues levied for the organization's benefit and either paid to it 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	883,435.	913,964.	882,065.	1,118,343.	1,106,731.	4,904,538.
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						4,904,538.
Sec	tion B. Total Support						
	ndar year (or fiscal year nning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4	883,435.	913,964.	882,065.	1,118,343.	1,106,731.	4,904,538.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4,510.	436.	3,938.	6,159.	5,541.	20,584.
9	Net income from unrelated business activities, whether or not the business is regularly carried on					,	
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)			4,095.	5,672.	6,388.	16,155.
11	Total support. Add lines 7 through 10						4,941,277.
12	Gross receipts from related activi	ties, etc (see instr	uctions)			12	
13	First five years. If the Form 990 i organization, check this box and		ion's first, second	, third, fourth, or	fifth tax year as a	section 501(c)(3)	▶ □
Sec	tion C. Computation of Pul	blic Support Po	ercentage				
14	Public support percentage for 201		•	11, column (f))		14	99.26%
15	Public support percentage from 2	009 Schedule A, F	art II, line 14			15	99.43%
16 a	16a 33-1/3% support test — 2010. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						
t	b 33-1/3% support test — 2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						
17 a	10%-facts-and-circumstances te or more, and if the organization in the organization meets the 'facts-	neets the 'facts-an	d-circumstances' i	test, check this b	ox and stop here.	Explain in Part IV	0% how ►
t	o 10%-facts-and-circumstances tea or more, and if the organization n organization meets the 'facts-and	neets the 'facts-an -circumstances' te	d-circumstances' f est. The organizat	test, check this b ion qualifies as a	ox and stop here. publicly supporte	Explain in Part IV d organization	how the
18	Private foundation. If the organiz	ation did not check	ca box on line 13	, 16a, 16b, 17a, c			
BAA					90	hadula A (Form QC	20 or 990.F7\ 2010

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 or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

Sec	tion A. Public Support	······································	 ·	·			
	ndar year (or fiscal yr beginning in) >	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include any 'unusual grants')						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose					, , , , , , , , , , , , , , , , , , , ,	
3	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						
	Total. Add lines 1 through 5 a Amounts included on lines 1, 2, and 3 received from disqualified persons						
ŀ	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						
(Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						
Sec	tion B. Total Support		,	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	
	idar year (or fiscal yr beginning in) 🟲 🔠	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
10 a	Amounts from line 6 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b 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)						
13	Total support. (Add Ins 9, 10c, 11, and 12)						•
14	First five years. If the Form 990 is organization, check this box and	s for the organiza	tion's first, secon	d, third, fourth, or	fifth tax year as a	section 501(c)(3)	
				· · · · · · · · · · · · · · · · · · ·	-	,	<u> </u>
	tion C. Computation of Pub			10 (6)		·	
	Public support percentage for 201	•	• •	e 13, column (f))		15	8
	Public support percentage from 2					16	
	tion D. Computation of Inve					7 1	
17	Investment income percentage for			-	nn (f))	17	
18	Investment income percentage fro					18	ક
	33-1/3% support tests — 2010. If is not more than 33-1/3%, check	this box and stop	here. The organiz	zation qualifies as	s a publicly suppor	ted organization	▶ _
t	33-1/3% support tests – 2009. If line 18 is not more than 33-1/3%,	tne organization of , check this box ai	aid not check a bo nd stop here. The	ox on line 14 or lir organization qua	ne 19a, and line 16 Ilifies as a publicly	s is more than 33- supported organiz	1/3%, and ation ► □
20	Private foundation. If the organization	ation did not chec	k a box on line 14	4, 19a, or 19b, ch	eck this box and s	ee instructions	▶ □

Schedule	A (Form 9	90 or 990-EZ) 2010	Clothes To	Kids, Ir	nc.	14-1849798	Page 4
Part IV	Supple Part II, (See ii	emental Informa , line 17a or 17b nstructions).	tion. Complete ; and Part III, li	this part to ne 12. Also	provide the explanat complete this part fo	14-1849798 ions required by Part II, line r any additional information	e 10; n.
Other	Income	Part II, Li	ne 10				
Descri	ption:	Textile rec	ycling				
2008:	4095.						
2009:	5672.						
2010:_	6388.		-				
			-				
		-					
							
							
							

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2010

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

Inspection Employer identification number

Cl	othes To Kids, Inc.		14-1849798
	rt I Organizations Maintaining Dono	r Advised Funds or Other Similar I	Funds or Accounts. Complete if
	the organization answered 'Yes' t	o Form 990, Part IV, line 6.	•
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5		or advisors in writing that the assets held in	donor advised Yes No
6	Did the organization inform all grantees, donor used only for charitable purposes and not for the	s, and donor advisors in writing that grant fu	unds can be
_	purpose conferring impermissible private bene	fit?	Yes No
	rt II Conservation Easements. Compl		es' to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by		
	Preservation of land for public use (e g , re	ecreation or education) Preservati	on of an historically important land area
	Protection of natural habitat	Preservati	on of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization last day of the tax year	n held a qualified conservation contribution	in the form of a conservation easement on the
			Held at the End of the Tax Year
	a Total number of conservation easements		2a
	b Total acreage restricted by conservation easen		2b
•	c Number of conservation easements on a certifi	ed historic structure included in (a)	2c
	d Number of conservation easements included in structure listed in the National Register		2d
3	Number of conservation easements modified, t tax year ▶	ransferred, released, extinguished, or termin	nated by the organization during the
4	Number of states where property subject to cor	nservation easement is located 🕨	
5	Does the organization have a written policy regard enforcement of the conservation easement	ts it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring	g, inspecting, and enforcing conservation ea	sements during the year
7	Amount of expenses incurred in monitoring, ins	specting, and enforcing conservation easem	ents during the year
8	Does each conservation easement reported on 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	line 2(d) above satisfy the requirements of	section Yes No
9	In Part XIV, describe how the organization report include, if applicable, the text of the footnote to conservation easements	orts conservation easements in its revenue a the organization's financial statements that	and expense statement, and balance sheet, and t describes the organization's accounting for
Pa	rt III Organizations Maintaining Colle	ctions of Art, Historical Treasures wered 'Yes' to Form 990, Part IV, II	, or Other Similar Assets. ne 8.
1 8	alf the organization elected, as permitted under art, historical treasures, or other similar assets in Part XIV, the text of the footnote to its finance	held for public exhibition, education, or rese	venue statement and balance sheet works of earch in furtherance of public service, provide,
ŀ	b If the organization elected, as permitted under historical treasures, or other similar assets held following amounts relating to these items:	SFAS 116 (ASC 958), to report in its revenu d for public exhibition, education, or researc	ue statement and balance sheet works of art, h in furtherance of public service, provide the
	(i) Revenues included in Form 990, Part VIII,	line 1	► \$
	(ii) Assets included in Form 990, Part X		► \$
2	If the organization received or held works of arl amounts required to be reported under SFAS 1	t, historical treasures, or other similar assets 16 (ASC 958) relating to these items:	s for financial gain, provide the following
á	Revenues included in Form 990, Part VIII, line		► \$
ŀ	Assets included in Form 990, Part X		►S

•								
Schedule D (Form 990) 2010 Cloth					14-184			Page 2
Part III Organizations Maintai	ning Collections	s of Art, Histo	orica	l Treasures, or	Other Similar Ass	sets (d	ontini	ued)
3 Using the organization's acquisition items (check all that apply)	on, accession, and ot	her records, che	ck any	y of the following th	at are a significant use	e of its o	:ollectio	on
a Public exhibition		d Loan	or exc	hange programs				
b Scholarly research		e Other						
c Preservation for future genera	itions							
4 Provide a description of the organ Part XIV	ization's collections	and explain how	they f	further the organizat	ion's exempt purpose	ın		
5 During the year, did the organizati assets to be sold to raise funds ra	on solicit or receive their than to be main	donations of art, tained as part of	histoi f the o	rical treasures, or o rganization's collect	ther similar ion?	Yes	. [No
Part IV Escrow and Custodial 9, or reported an amount	Arrangements. unt on Form 990	Complete if , Part X, line	orgar 21.	nization answer	ed 'Yes' to Form 9	990, P	art IV	, line
1 a Is the organization an agent, trust included on Form 990, Part X?	ee, custodian, or oth	er intermediary	for cor	ntributions or other a	assets not	Yes		No
b If 'Yes,' explain the arrangement i	n Part XIV and comp	lete the followin	g table	e·		_	·	_
						Amoun	t	
c Beginning balance					1 c			
d Additions during the year					1 d			
e Distributions during the year					1 e			
f Ending balance					1f			
2a Did the organization include an an	nount on Form 990, I	Part X, line 21?				Yes		No
b If 'Yes,' explain the arrangement i								_
Part V Endowment Funds. Co	mplete if the org	anization ans	swere	ed 'Yes' to Form	990, Part IV, line	e 10.		
	(a) Current year	(b) Prior yea	r	(c) Two years back	(d) Three years back	(e)	Four year	rs back
1 a Beginning of year balance	49,278.	39,0	22.	41,609	•			
b Contributions		5,0	00.	5,000	•			
c Net investment earnings, gains, and losses	5,451.	5,2	56.	-7,587				
d Grants or scholarships	•					T		
e Other expenditures for facilities and programs	11,411.							-
f Administrative expenses								
g End of year balance	43,318.	49,2	78.	39,022				,
2 Provide the estimated percentage	of the year end bala	nce held as					* "	
a Board designated or quasi-endowr	ment ► 100).00%						
b Permanent endowment	Q.							
c Term endowment ►	8							
3a Are there endowment funds not in organization by	the possession of th	e organization th	nat are	e held and administe	ered for the	ſ	Yes	No
(i) unrelated organizations						3a(i)	163	X
(ii) related organizations						3a(ii)		X
b If 'Yes' to 3a(ii), are the related or	nanizations listed as	required on Sch	عاييات	₽?		3b		 ^-
4 Describe in Part XIV the intended	-	•				<u> </u>		1
Part VI Land, Buildings, and E					<u> </u>			
Description of investment	(a) Cos	t or other basis	(b)	Cost or other pasis (other)	(c) Accumulated depreciation	(d)	Book va	alue
1 a Land				(50,01)	200.001011			
b Buildings			_					
c Leasehold improvements				42,362.	41,508.			854.
d Equipment				27,688.	15,451.		12	,237.
e Other		ŀ		2.,000.	10, 101.			1231.

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) BAA

13,091. Schedule **D** (Form 990) 2010

Part VII Investments—Other Securities. See	Form 990, Part X, Iir	ne 12.
 (a) Description of security or category (including name of security) 	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other	I .	
(A)		
(B)		
(C)	-	
(D)		
(E)		198
<u>(F)</u> (G)	-	
(H)		
(1)		
Total (Column (b) must equal Form 990 Part X, column (B) line 12)	•	, and the same and
Part VIII Investments-Program Related. (See	Form 990, Part X, I	ine 13)
(a) Description of investment type	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
<u>(5)</u> (6)		
(7)		
(8)		
(9)		
(10)		
	-	
Part IX Other Assets. (See Form 990, Part X		
	escription	(b) Book value
(1) Deposits		10,202.
(2) Investment - endowment fund		43,318.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column(E) Part X Other Liabilities. (See Form 990, Part		► 53,520.
(a) Description of liability		
(1) Federal income taxes	(b) Amount	
(2) Accrued payroll	5,04	4
(3)	5,04	7.
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
(11)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 25)	▶ 5,04	
2. FIN 48 (ASC 740) Footnote In Part XIV, provide the text	of the footnote to the orga	anization's financial statements that reports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740)

		-1849798	Page 4
Par			
` 1	Total revenue (Form 990, Part VIII,column (A), line 12)		1,118,660.
2	Total expenses (Form 990, Part IX, column (A), line 25)		1,275,308.
3	Excess or (deficit) for the year Subtract line 2 from line 1		-156,648.
4	Net unrealized gains (losses) on investments		
5	Donated services and use of facilities		
6	Investment expenses		
7	Prior period adjustments		
8	Other (Describe in Part XIV)		
9	Total adjustments (net) Add lines 4 through 8		
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		-156,648.
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	turn	
1	Total revenue, gains, and other support per audited financial statements	1	1,123,160.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments 2a	İ	
b	Donated services and use of facilities 2b 4,500.		
c	Recoveries of prior year grants 2c		
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d	2 e	4,500.
3	Subtract line 2e from line 1	3	L,118,660.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		<u> </u>
	Investments expenses not included on Form 990, Part VIII, line 7b		
ь	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		1,118,660.
	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Return	
	Total expenses and losses per audited financial statements		1,279,808.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities 2a 4,500.		
b	Prior year adjustments 2b		
С	Other losses 2c		
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d	2 e	4,500.
3	Subtract line 2e from line 1		,275,308.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investments expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIV)		
	Add lines 4a and 4b	4c	
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5 1	275,308.
	t XIV Supplemental Information		
Comp Part any a	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lin V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete the additional information	es 1b and 2b is part to pro), Vide
Pt_	V Line 4 The purpose of the endowment fund is to preserve and		
	protect_its_principal_while_earning_an_appropriate		
	return to permit distributions for the Organization's		
	purpose and or the growth of principal.		
	·		

Schedule D	(Form 990) 2010	Clothes To Ki	ds, Inc.			14-1849798	Page 5
Part XIV	Supplementa	Information (con	tınued)		· · · · · · · · · · · · · · · · · · ·		
•							
				-			
	-						
			-				
							
	_ 						
		- 					
_ _						 	
						-	

SCHEDULE M (Form 990)

Noncash Contributions

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

OMB No 1545 0047 2010

Open To Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990.

Clothes To Kids, Inc. 14-1849798 Part I Types of Property (a) (b) (d) (c) Check if Number of Noncash contribution Method of determining applicable contributions or amounts reported on noncash contribution amounts items contributed Form 990, Part VIII, line 1g Art-Works of art Art-Historical treasures 3 Art-Fractional interests 4 Books and publications Clothing and household goods Χ 680, 122. Salvation Army pricing 6 Cars and other vehicles Boats and planes Я Intellectual property Securities-Publicly traded Securities-Closely held stock 10 11 Securities-Partnership, LLC, or trust interests 12 Securities-Miscellaneous Qualified conservation contribution-Historic structures Qualified conservation contribution-Other 14 15 Real estate-Residential 16 Real estate-Commercial Real estate-Other 17 Collectibles 18 19 Food inventory 20 Drugs and medical supplies 21 Taxidermy 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts Other ► (supplies & equip ___) 25 Х 30 3,667. estim market value 26 Other ► (_____) 27 Other • (______ 28 Other ► 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 Yes No 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? 30 a Х 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? 31 Х 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32 a X b If 'Yes,' describe in Part II 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

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

Schedule M (Form 990) 2010

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.
Pt I Line 32bMinor non-usuable clothing is sold for textile
recyclying.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2010

Open to Public Inspection

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

Employer identification number Clothes To Kids, Inc 14-1849798 Pt VI-B, Line 11a Reviewed by Finance Manager, Executive Director and Board Treasurer. Pt_VI-B, Line 12c Board members required to sign and review annually. Pt VI-C, Line 19 Available upon request Pt VI-B, Line 15 Review by personnel/governance committee