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## CISTRN9QPC

SCHEDULE A

Public Charity Status and Public Support

OMB No 1545-0047

(Form 990 or 990-EZ)	Complete if the organiz	2014								
Department of the Treasury	► Attu	4947(a)(1) nonexempt charitable trust.  Attach to Form 990 or Form 990-EZ.  an about Schedule A (Form 990 or 990-EZ) and its instructions is at www.			Open to Public Inspection					
iams of the organization	- Milotatativa accor activates vili				cation number					
omemaker Thrift					89					
Part I Reason fo	or Public Charity Status (All c	organizations must o	complete this pa	rt.) See instructio	กร					
	rivate foundation because it is: (For line		•							
=	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(I).									
=	ed in section 170(b)(1)(A)(ii), (Atlach ( constitute bostutal service organization		OIBY1YAYIIA.							
	· · ·	perative hospital service organization described in section 170(b)(1)(A)(iii). n organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the								
hospital's name,										
5 🔲 An organization o	on operated for the benefit of a college or university owned or operated by a governmental unit described in									
_	section 170(bX1)(AXiv). (Complete Part II.)									
	or local government or governmental u									
	that normally receives a substantial pan		emmental unit or mo	m the general public						
_	tion 170(b)(1)(A)(vi). (Complete Parl II st described in saction 170(b)(1)(A)(vi)	-								
	that normally receives: (1) more than 33		contributions, mem!	ership lees, and gross	\$					
	(vilues related to its exempt functions - (									
	ss investment income and unrelated bu									
	organization after June 30, 1975. Sec s		•							
= -	organized and operated exclusively to to	•			an of					
	organized and operated exclusively for I									
	licly supported organizations described to through 11d that describes the type				/IRUA					
	poorting organization operated, supervi									
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	d organization(s) the power to regularly	•	•							
• •	. You must complete Part IV, Section									
b 📗 Type lf. A su	A supporting organization supervised or controlled in connection with its supported organization(s), by having									
	nanagement of the supporting organization vested in the same persons that control or manage the supported									
	on(s). You must complete Part IV, Sections A and C.									
	notionally integrated. A supporting organization operated in connection with, and functionally integrated with,									
	ed organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.									
d Typo III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness										
	t (see instructions) You must complete Part IV, Sections A and D, and Part V.									
e 🔲 Check this b	box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III									
	ntegrated, or Type III non-functionally in				<del></del>					
	ving Information about the supported			Ad described manager.	(vr) Amount of					
(I) Name of supported or	ganzaton (II) EIN	(48) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) is the organization listed in your governing	(v) Amount of monetary support (see enstructions)	susprotous) other ambout (see fat) vincens or					
			document?							
		(2000-27)	Yes No							
<del>^</del>										
B)										
·			<del>                                     </del>	}						
C)										
		· · · · · · · · · · · · · · · · · · ·	<del>  </del>		<del></del>					
O)	i									
E)				<u>                                      </u>						
otal		<u> </u>	<u> </u>	<u> </u>						
	Act Notice, see the Instructions for			Schedul	e A (Form 990 or 990-EZ) 2014					
orm 990 or 890-EZ. EA					•					
•					845545					
					04 B01 B					
					<del></del>					

	ction A. Public Support			_ <del></del>	- <del></del>		
ıle	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(a) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
1	Total. Add lines 1 through 3	<del> </del>	ļ	<del></del>			
,	The portion of total contributions by	<i>i</i>		ļ		1	1
	each person (other than a governmental unit or publicly	. '		Į.		1	1
	supported organization) included on	!		1 -			.[
	line 1 that exceeds 2% of the amount	ı '				· [	
	shown on line 11, column (f)	Ĺ'					
j	Public support. Subtract line 6 from line 4 • • •				<u> </u>		
	ction B. Total Support	(a) 2010	T /5\ 2011	T (-12012	(d) 2013	T 3014	Total
шо: 7	Amounts from line 4	(8) 2010	(b) 2011	(c) 2012	(0) 4013	(e) 2014	(f) Total
8	Gross Income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
0	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	1					
1	Total support. Add lines 7 through 10		<u> </u>	<u> </u>			
2	Gross receipts from related activities, etc. (se	-					
3	First five years. If the Form 990 is for the organization, check this box and atop here			n, or fifth tax year a	s a section 501(c);	3)	▶□
	tion C. Computation of Public Sup	pport Percent	tage				
4	Public support percentage for 2014 (line 6, co		•	• • •			%
5 8 a	Public support percentage from 2013 Schedu						%
5a	33 1/3% support test - 2014. If the organizate box and stop here. The organization qualifier					ak this	
b	33 1/3% support test - 2013. If the organization	, , ,					···· - ⊔
_	check this box and stop here. The organizati				1000 mm		▶ 📋
74	10%-facts-and-circumstances test - 2014.	If the organization	did not check a bo	ox on line 13, 16a, c	-		<del>-</del>
	10% or more, and if the organization meets it						
	Part VI how the organization meets the flacts		-				٠ ٦
ь	organization						▶ ⊔
•	15 is 10% or more, and if the organization me Explain in Part VI how the organization meets	eets the "facts-and	l-circumstances" te	est, check this box a	and stop here.		
	supported organization					-	▶ □
3	Private foundation. If the organization did no					• • • • •	bana
	instructions						<b>&gt;</b> 🔲
CA						Schedule A (Form	990 or 990-EZ) 2014

	th HI Support Schedule for Or	maker Thrift	Shop Inc.	ction 500/a\/2	·	06-1055789	Page 3
	(Complete only if you chec					n auglifu under l	Dort II
	If the organization fails to	qualify under the	tests listed be	elow, please co	omplete Part II.	)	rait II.
e	tion A. Public Support						
ale	indar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
		1					
1	Gifts, grants, contributions, and membership fees		1	ł			
2	received. (Do not include any "unusual grants.")  Gross receipts from admissions, merchandise	<del></del>			<del></del>		· · · · · · · · · · · · · · · · · · ·
	sold or services performed, or facilities furnished in any activity that is related to the	1 !	1				
	organization's tax-exempt purpose	50,620	54,232	61,823	57,186	65,753	289,614
3	Gross receipts from activities that are not an unrelated trade or bus under sec \$13						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						•
	The value of services or facilities						
,	funished by a governmental unit to the organization without charge						
5	Total. Add lines 1 through 5	50,620	54,232	61,823	57,186	65,753	289,614
8	Amounts included on tines 1, 2, and 3 received from disquelified persons						
b	Amounts included on lines 2 and 3			1		Ì	
	received from other than disqualified persons that exceed the greater of \$5,000		ĺ	[			
	or 1% of the amount on line 13 for the year						
C	Add lines 7s and 7b						
	Public support (Subtract line 7¢ from line 6.)	ł	ł			1	200 514
80	tion B. Total Support	<u> </u>			1		289,614
alo	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(o) 2014	(f) Total
ł	Amounts from line 6	50,620	54,232	61,823	57,186	65,753	289,614
	Gross income from interest, dividends, payments received on securities loans, rents, roystres and income from similar sources						
	Unrelated business taxable income (less section 511 laxes) 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 carned on						
	• • • • • • • • • • • • • • • • • • • •	<del></del>				<del></del>	
	Other Income, Do not include gain or loss from the sale of capital assets (Explain in Part VI)				]		
	Total support. (Add lines 9, 10c, 11, and 12.)	50,620	54,232	61,823	57,186	65,753	289,614
	First five years, if the Form 980 is for the org organization, check this box and stop here						▶ 🗇
_	tion C. Computation of Public Su Public support percentage for 2014 (line 8, co					45   -	
	r uonc support percentage for 2014 (nne 8, co Public support percentage from 2013 Schedu				· · · · · · · · · · · · · · · · · · ·	15 1	00.00 %
	tion D. Computation of Investmen		entage				79
	Investment income percentage for 2014 (line	10c, column (1) divid	ed by line 13, colu	nn (f)) · · · ·		17	0.00 %
	Investment income percentage from 2013 Sci				[	18	%
	33 1/3% support tests - 2014. If the organiza 17 is not more than 33 1/3%, check this box a						▶⊠
į	33 1/3% support tests - 2013. If the organiza line 18 is not more than 33 1/3%, check this b	ox and stop here. T	he organization qu	stilles as a publicly	supported organiz		▶□
_	Private foundation. If the organization did no	t check a box on line	14, 19a, or 19b, c	heck this box and :	see instructions		> []
A							1990 m et 1994 194 et 1914