

**Form 990-N (e-Postcard) Summary**  
**(\*\*THIS IS NOT A FILEABLE FORM - FOR REVIEW PURPOSES ONLY\*\*)**

Tax period beginning 01/01/2015 and ending 12/31/2015

Organization's legal name

Employer ID number

TIME TRAVELERS COSTUME GUILD

47-3916135

Other names used by organization (DBA)

Number and street (or P.O. box, if applicable)

Room/Suite

Telephone number

PO BOX 1878

City or town, state or country and ZIP + 4

BEAVERTON, OR 97075

Web address, if applicable \_\_\_\_\_

Check if organization is not a 509(a)(3) supporting organization and its gross receipts meets limits for the tax year .....

Check if organization is terminating (going out of business) .....

**Information regarding principal officer:**

Name

Lorraine Fletcher

Street address

11943 SW 125TH CT

City, state or country and ZIP + 4

Portland, OR 97223