

**Personal Property Return**  
**As of January 1, 2008**  
**Due April 15, 2008**

**2008**

**Form 1**

**Page 1 of 4**

Date Received  
by Department

CHECK  
ONE

Type of Business	ID # Prefix	Filing Fee	Type of Business	ID # Prefix	Filing Fee
<input type="checkbox"/> Domestic Stock Corp.	(D)	\$300	<input type="checkbox"/> Domestic Limited Liability Company	(W)	\$300
<input type="checkbox"/> Foreign Stock Corp.	(F)	\$300	<input type="checkbox"/> Foreign Limited Liability Company	(Z)	\$300
<input checked="" type="checkbox"/> Domestic Non-Stock Corp.	(D)	- 0 -	<input type="checkbox"/> Domestic Limited Partnership	(M)	\$300
<input type="checkbox"/> Foreign Non-Stock Corp.	(F)	- 0 -	<input type="checkbox"/> Foreign Limited Partnership	(P)	\$300
<input type="checkbox"/> Foreign Insurance Corp.	(F)	\$300	<input type="checkbox"/> Domestic Limited Liability Partnership	(A)	\$300
<input type="checkbox"/> Foreign Interstate Corp.	(F)	- 0 -	<input type="checkbox"/> Foreign Limited Liability Partnership	(E)	\$300
<input type="checkbox"/> SDAT Certified Family Farm (A,D,M,W)		\$100	<input type="checkbox"/> Business Trust	(B)	\$300
			<input type="checkbox"/> Real Estate Investment Trust	(D)	\$300



D02910271 X 04 NO FILING FEE

Make  
Address  
Corrections  
Here

Name of  
Business  
Mailing  
Address

INTERNATIONAL COSTUMERS GUILD, INC.  
2801 ASHBY AVE  
BERKELEY, CA 94705-2305

☐ Check here  
if this is a  
change of  
address

COPY

DEPARTMENT ID NUMBER		FEDERAL EMPLOYER IDENTIFICATION NUMBER	
ID#	D 0 2 9 1 0 2 7 1	5 2 1 6 5 6 1 8 8	
DATE OF INCORPORATION OR FORMATION		STATE OF INCORPORATION OR FORMATION	FEDERAL PRINCIPAL BUSINESS CODE
Nov. 28, 1989		MARYLAND	
TRADING AS NAME		<input type="checkbox"/> Check here if you use a preparer and do not want personal property forms mailed to you next year.	

**SECTION I**

- A. Is any business conducted in Maryland? NO Date began: \_\_\_\_\_  
(Yes or No)
- B. Nature of business conducted in Maryland: NON-PROFIT EDUCATIONAL - MEMBERSHIP
- C. Does the business own, lease or use personal property located in Maryland? NO If No, skip SECTION II.  
(Yes or No)

**ONLY CORPORATIONS COMPLETE ITEM D**

D. Names and addresses of officers and names of directors (type or print):

OFFICERS	
Names	Addresses
President <u>NORAMAI</u>	<u>7835 MILAN, UNIVERSITY CITY, MD 63130</u>
Vice-President <u>JAN PRICE</u>	<u>11424 ENCORE DR, SILVER SPRING, MD 20904</u>
Secretary <u>KAREN HEIM</u>	<u>2845 LEMP AVE, ST. LOUIS, MO 63118</u>
Treasurer <u>BRUCE MACDERMOTT</u>	<u>3040 VALLEY VISTA DR., SEDONA, AZ 86351</u>

DIRECTORS			
Names		Names	
<u>HAURY OSIER</u>	<u>MICHAEL BRUNO</u>	<u>HAROLD AGNEW</u>	<u>MARISSA WLODKA</u>
<u>JULIE SARGO</u>	<u>JACQUELINE WARRA</u>	<u>BYRON CUNNELL</u>	<u>DIANE HARRIS</u>
<u>VALERIE ROBERTS</u>	<u>ANN HAMILTON</u>	<u>JANICE DALLAS</u>	<u>BRUCE MAI</u>
<u>JENNIFER THOMPSON</u>	<u>ROB HIMMELSBACH</u>	<u>JACKIE BOWIN</u>	<u>KARI DOERING</u>

Type or Print  
Department ID Number Here

ID # PREFIX

D 0 2 9 1 0 2 7 1

PLEASE STAPLE CHECK HERE

DETACH HERE WHEN FILING IN ALL OTHER JURISDICTIONS  
INCLUDE DEPARTMENT ID NUMBER ON CHECK



**BUSINESS TANGIBLE PERSONAL PROPERTY LOCATED IN MARYLAND**

EACH QUESTION MUST BE ANSWERED—SEE INSTRUCTIONS

ROUND CENTS TO THE NEAREST WHOLE DOLLAR

**2008****Form 1**

continued

**Page 2 of 4****SECTION II**

**A. IMPORTANT:** Show exact location of all personal property owned and used in the State of Maryland, including county, town, and street address (PO Boxes are not acceptable). This assures proper distribution of assessments. If property is located in two or more jurisdictions, provide breakdown by locations by completing additional copies of Section II for each location.

NONE

(County)

(Address, Number and Street)

(Zip Code)

☐

Check here if this location has changed from the 2007 return.

(Incorporated Town)

Is the property located inside the limits of an incorporated town?

(Yes or No)

**Note:** If all of the personal property of this business is located entirely in the following exempt counties: Frederick, Garrett, Kent, Queen Anne's, or Talbot, you may be eligible to skip the remainder of Section II. Refer to Specific Instructions, Section II, A for more information.

- ① **Furniture, fixtures, tools, machinery and equipment not used for manufacturing or research and development.** State the original cost of the property by year of acquisition and category of property as described in the Depreciation Rate Chart on page 4. Include all fully depreciated property and property expensed under IRS rules.

Columns B through G require an explanation of the type of property being reported. Use the lines provided below. If additional space is needed, provide a supplemental schedule. Failure to explain the type of property will result in the property being treated as Category A property (see instructions for example). **Refer to the 2008 Depreciation Rate Chart on page 4 for computer equipment rates for categories B and D.**

**ORIGINAL COST BY YEAR OF ACQUISITION**

SPECIAL DEPRECIATION RATES (SEE PAGE 4)

	A	B	C	D	E	F	G	TOTAL COST
2007								
2006								
2005								
2004								
2003								
2002								
2001								
2000 and prior								
TOTAL COST COLUMNS A-G →								

DESCRIBE B through G PROPERTY HERE:

- ② **Commercial Inventory.** Furnish an average of 12 monthly inventory values taken in Maryland during 2007 at cost or market value of merchandise and stock in trade. Include products manufactured by the business and held for retail sale and inventory held on consignment. (Do not include raw materials or supplies used in manufacturing.) Note: LIFO prohibited in computing inventory value.

Average Commercial Inventory

\$

NONE

Furnish from the latest Maryland Income Tax return:

Opening Inventory - date \_\_\_\_\_ amount \$ \_\_\_\_\_

Closing Inventory - date \_\_\_\_\_ amount \$ \_\_\_\_\_

**Note:** Businesses that need a Trader's License must report commercial inventory here.

- ③ **Supplies.** Furnish the average cost of consumable items not held for sale (e.g., contractor's supplies, office supplies, etc.).

Average Cost

\$

NONE

- ④ **Manufacturing/Research and Development (R&D) Inventory.** Furnish an average of 12 monthly inventory values taken in Maryland during 2007 at cost or market value of raw materials, supplies, goods in process and finished products used in and resulting from manufacturing/R&D by the business. (Do not include manufactured products held for retail sale.)

Average Manufacturing/R&amp;D Inventory

\$

NONE

Furnish from the latest Maryland Income Tax return:

Opening Inventory - date \_\_\_\_\_ amount \$ \_\_\_\_\_

Closing Inventory - date \_\_\_\_\_ amount \$ \_\_\_\_\_



- ⑤ **Tools, machinery and equipment used for manufacturing or research and development:** State the original cost of the property by year of acquisition. Include all fully depreciated property and property expensed under IRS rules. If this business is engaged in manufacturing / R&D, and is claiming such an exemption for the first time, a **manufacturing / R&D exemption application must be submitted on or before September 1, 2008** before an exemption can be granted. Contact the Department or visit [www.dat.state.md.us](http://www.dat.state.md.us) for an application.

If the property is located in a taxable jurisdiction, a detailed schedule by depreciation category should be included to take advantage of higher depreciation allowances.

ORIGINAL COST BY YEAR OF ACQUISITION			
2007		2003	
2006		2002	
2005		2001	
2004		2000 and prior	

TOTAL COST

\$ NONE

- ⑥ **Vehicles with Interchangeable Registration** (dealer, recycler, finance company, **special mobile equipment**, and transporter plates) and unregistered vehicles should be reported here. See specific instructions.

ORIGINAL COST BY YEAR OF ACQUISITION			
2007		2005	
2006		2004 and prior	

TOTAL COST

\$ NONE

- ⑦ **Non-farming livestock** \$ \_\_\_\_\_ (Book Value) \$ \_\_\_\_\_ (Market Value)

Total Cost

\$ NONE

- ⑧ **Other personal property** ..... Total Cost  
File separate schedule giving a description of property, original cost and the date of acquisition.

\$ NONE

- ⑨ **Property owned by others and used or held by the business** as lessee or otherwise. . . . Total Cost  
File separate schedule showing names and addresses of owners, lease number, description of property, installation date and separate cost in each case.

\$ NONE

- ⑩ **Property owned by the business but used or held by others** as lessee or otherwise. . . . Total Cost  
File separate schedule showing names and addresses of lessees, lease number, description of property, installation date and original cost by year of acquisition for each location. Schedule should group leases by county where the property is located. Manufacturer lessors should submit the retail selling price of the property not the manufacturing cost.

### SECTION III This Section must be completed.

- A. Total Gross Sales, or amount of business transacted during 2007 in Maryland: \$ NONE  
If the business has sales in Maryland and does not report any personal property, explain how the business is conducted without personal property. If the business is using the personal property of another business, provide the name and address of that business.

- B. If the business operates on a fiscal year, state beginning and ending dates: \_\_\_\_\_  
C. If this is the business' first Maryland personal property return, state whether or not it succeeds an established business and

give name: \_\_\_\_\_ ☐ yes ☒ no

- D. Does the business own any fully depreciated and/or expensed personal property located in Maryland? ☐ yes ☒ no  
If yes, is that property reported on this return? ☐ yes ☐ no
- E. Does the submitted balance sheet or depreciation schedule reflect personal property located outside of Maryland? ☐ yes ☐ no  
If yes, reconcile it with this return.
- F. Has the business disposed of assets or transferred assets in or out of Maryland during 2007? ☐ yes ☐ no If yes, complete Form 4C (Disposal and Transfer Reconciliation).

### • PLEASE READ "IMPORTANT REMINDERS" ON PAGE 4 BEFORE SIGNING •

I declare under the penalties of perjury, pursuant to Tax-Property Article 1-201 of the Annotated Code of Maryland, that this return, including any accompanying schedules and statements, has been examined by me and to the best of my knowledge and belief is a true, correct and complete return.

NAME OF FIRM, OTHER THAN TAXPAYER, PREPARING THIS RETURN

X  
SIGNATURE OF PREPARER

DATE

( )  
PREPARER'S PHONE NUMBER

E-MAIL ADDRESS

BRUCE R. MACDERMOTT

PRINT OR TYPE NAME OF CORPORATE OFFICER OR PRINCIPAL OF OTHER ENTITY TITLE

x Bruce R. MacDermott  
SIGNATURE OF CORPORATE OFFICER OR PRINCIPAL

Treasurer

08 APR 08  
DATE

(510) 486-8232  
BUSINESS PHONE NUMBER

E-MAIL ADDRESS

See top of page 4 for correct mailing address



**Information copy. Do not send to IRS.**Form **990-N**Department of the Treasury  
Internal Revenue Service**Electronic Notice (e-Postcard)**  
for Tax-Exempt Organizations not Required To File Form 990 or  
990-EZOMB No.  
1545-2085**2007**Open to Public  
Inspection**A** For the 2007 calendar year, or tax year beginning 1/1/2007, and ending 12/31/2007.**B** Check if applicable☐ Terminated, Out of  
Business☒ Gross receipts are  
normally \$25,000 or less**C** Name of organization: INTERNATIONAL COSTUMERS GUILD  
INC  
d/b/a:2801 Ashby Avenue  
Berkeley, CA, US, 94705-2305**D** Employer  
Identification  
Number  
52-1656188**E** Website:www.costume.org**F** Name of Principal Officer: Bruce MacDErmott2801 Ashby Avenue  
Berkeley, CA, US, 94705-2305

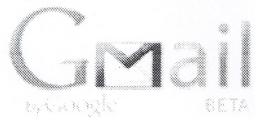
**Privacy Act and Paperwork Reduction Act Notice.** We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to give us the information. We need it to ensure that you are complying with these laws.

The organization is not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. The rules governing the confidentiality of the Form 990-N is covered in Code section 6104.

The time needed to complete and file this form and related schedules will vary depending on individual circumstances. The estimated average times is 15 minutes.

**Note:** This image is provided for your records only. Do NOT mail this page to the IRS. The IRS will not accept this filing via paper. You must file your Form 990-N (e-Postcard) electronically.





Bruce MacDermott <brmacdermott@gmail.com>

## Form 990-N E-filing Receipt - IRS Status: Accepted

1 message

epostcard@urban.org <epostcard@urban.org>

Wed, Apr 9, 2008 at 8:20 AM

To: icg-treasurer@costume.org

Organization: INTERNATIONAL COSTUMERS GUILD INC

EIN: 52-1656188

Submission Type: Form 990-N

Year: 2007

Submission ID: 7800582008100av43836

e-File Postmark: 4/9/2008 11:06:35 AM

Accepted Date: 4/9/2008

The IRS has accepted the e-Postcard described above. Please save this receipt for your records.

Thank you for filing.

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e-Postcard technical support

Phone: 888-887-0084 (toll free)

email: [ePostcard@urban.org](mailto:ePostcard@urban.org)

Hours: 8:00 AM to 8:00 pm Eastern  
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INTERNATIONAL COSTUMERS GUILD INC

2801 Ashby Avenue

Berkeley, CA 94705-2305