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Form **990-EZ**

Department of the Treasury
Internal Revenue Service

Short Form
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)

► Sponsoring organizations, and controlling organizations as defined in section 512(b)(13) must file Form 990 All other organizations with gross receipts less than $100,000 and total assets less than $250,000 at the end of the year may use this form
► *The organization may have to use a copy of this return to satisfy state reporting requirements*

OMB No 1545-1150

2006

Open to Public Inspection

A For the 2006 calendar year, or tax year beginning 10/01 , 2006, and ending 9/30 , 2007

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return
- ☐ Amended return
- ☐ Application pending

Please use IRS label or print or type See Specific Instructions

C
International City Optimist Club, Inc.
P. O. Box 6849
Warner Robins, GA 31095

OPTI

D Employer identification number 58-2419213 91-1931701

E Telephone number 478-953-0125

F Group Exemption Number ► 1334

• ***Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).***

G Accounting method ☒ Cash ☐ Accrual Other (specify) ►

I **Website:** ► www.icoptimistclub.com

H Check ► ☒ if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

J Organization type (check only one) — ☒ 501(c) (4) ◄ (insert no) ☐ 4947(a)(1) or ☐ 527

K Check ► ☐ if the organization is not a section 509(a)(3) supporting organization **and** its gross receipts are normally **not** more than $25,000 A return is not required, but if the organization chooses to file a return, be sure to file a complete return

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if $100,000 or more, file Form 990 instead of Form 990-EZ ► $ 58,027.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

REVENUE	1	Contributions, gifts, grants, and similar amounts received		1	
	2	Program service revenue including government fees and contracts		2	
	3	Membership dues and assessments		3	13,695.
	4	Investment income		4	130.
	5a	Gross amount from sale of assets other than inventory	5a		
	b	Less cost or other basis and sales expenses	5b		
	c	Gain or (loss) from sale of assets other than inventory (line 5a less line 5b) (attach schedule)		5c	
	6	Special events and activities (attach schedule) If any amount is from **gaming,** check here ► ☐			
	a	Gross revenue (not including $ _____ of contributions reported on line 1)	6a 44,202.		
	b	Less direct expenses other than fundraising expenses	6b 28,415.		
	c	Net income or (loss) from special events and activities (line 6a less line 6b) See Statement 1		6c	15,787.
	7a	Gross sales of inventory, less returns and allowances	7a		
	b	Less cost of goods sold	7b		
	c	Gross profit or (loss) from sales of inventory (line 7a less line 7b)		7c	
	8	Other revenue (describe ► _____)		8	
	9	**Total revenue** (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8) ►		9	29,612.
EXPENSES	10	Grants and similar amounts paid (attach schedule) See Statement 2		10	19,081.
	11	Benefits paid to or for members		11	
	12	Salaries, other compensation, and employee benefits		12	
	13	Professional fees and other payments to independent contractors		13	
	14	Occupancy, rent, utilities, and maintenance		14	
	15	Printing, publications, postage, and shipping		15	
	16	Other expenses (describe ► See Statement 3)		16	13,304.
	17	**Total expenses** (add lines 10 through 16) ►		17	32,385.
NET ASSETS	18	Excess or (deficit) for the year (line 9 less line 17)		18	-2,773.
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)		19	13,898.
	20	Other changes in net assets or fund balances (attach explanation)		20	
	21	Net assets or fund balances at end of year (combine lines 18 through 20) ►		21	11,125.

Part II Balance Sheets – If Total assets on line 25, column (B) are $250,000 or more, file Form 990 instead of Form 990-EZ

	(See Instructions)	(A) Beginning of year		(B) End of year
22	Cash, savings, and investments	13,898.	22	11,125.
23	Land and buildings		23	
24	Other assets (describe ► _____)		24	
25	**Total assets**	13,898.	25	11,125.
26	**Total liabilities** (describe ► _____)	0.	26	0.
27	**Net assets or fund balances** (line 27 of column (B) must agree with line 21)	13,898.	27	11,125.

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Part III Statement of Program Service Accomplishments (See the instructions)

What is the organization's primary exempt purpose? See Statement 4

Describe what was achieved in carrying out the organization's exempt purposes In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title

Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, optional for others)

28 Funds given in support of efforts of Nece Hopson Foundation, Inc. to improve educational opportunities for youth of Houston County.

(Grants $ 3,000.) If this amount includes foreign grants, check here ► ☐ 28a

29 Funds given to support Camp Wings, a youth bereavement camp undertaken by Hospice of Houston County.

(Grants $ 2,000.) If this amount includes foreign grants, check here ► ☐ 29a

30 Funds given to Linwood elementary to support the efforts of the school to aid underpriveleged children and in support of the Junior Optimist Club at Linwood.

(Grants $ 1,631.) If this amount includes foreign grants, check here ► ☐ 30a

31 Other program services (attach schedule) See Statement 5

(Grants $ 12,450.) If this amount includes foreign grants, check here ► ☐ 31a

32 **Total program service expenses** (add lines 28a through 31a) ► 32

Part IV List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated See Instructions)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans and deferred compensation	(E) Expense account and other allowances
See Statement 6		0.	0.	0.

Part V Other Information (Note the statement requirement in the instructions) See Statement 7

			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity	33		X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If 'Yes,' attach a conformed copy of the changes	34		X
35	*If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others), but* **not** *reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T*			
a	Did the organization have unrelated business gross income of $1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?	35a		X
b	If 'Yes,' has it filed a tax return on **Form 990-T** for this year?	35b	N/A	
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? (If 'Yes,' attach a statement)	36		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ► 37a 0.			
b	Did the organization file **Form 1120-POL** for this year?	37b		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38a		X
b	If 'Yes,' attach the sch specified in the line 38 instructions and enter the amount involved 38b N/A			
39	*501(c)(7) organizations* Enter			
a	Initiation fees and capital contributions included on line 9 39a N/A			
b	Gross receipts, included on line 9, for public use of club facilities 39b N/A			

International City Optimist Club, Inc
9/30/2007
Form 990EZ, Part I, Line 10
Statement of Grants and Similar amounts paid

Donee Name	Street	City	State	Zip Code	Donation Amount
Nece Hopson Memeorial Foundation	104 Gunn Rd, Ste A	Centerville	GA	31028	3,000 00
Warner Robins American Little League	P O Box 6562	Warner Robins	GA	31095	500 00
Houston County High School	920 Hwy 96	Warner Robins	GA	31088	1,700 00
Linwood Elementary School Fund	1050 Education Way	Warner Robins	GA	31098	1,630 84
The Methodist Home for Children & Youth	304 Pierce Avenue	Macon	GA	31204	500 00
YMCA	2954 Moody Rd	Warner Robins	GA	31088	250 00
Hospice of Houston County	302 N Houston Rd , Box 1023	Warner Robins	GA	31093	2,000 00
Exchange Club of Houston County	P O Box 7089	Warner Robins	GA	31095	250 00
Community Outreach Services Center	404 Duke Ave	Warner Robins	GA	31093	250 00
GYSTC	P O Box 2469	Warner Robins	GA	31099	1,250 00
Houston County DFACS	94 Cohen Walker Dr	Warner Robins	GA	31088	1,500 00
Toys for Team Robins	18251 Quantico Gateway Drive	Triangle	VA	22172	500 00
Jeff Smith Nissan Golf Classic	839 Warren Dr	Warner Robins	GA	31088	1,500 00
Hearts for Heros	P O Box 711	Cochran	GA	31014	250 00
Northside High School	926 Green Street	Warner Robins	GA	31093	500 00
Chamber of Commerce Youth	1228 Watson Blvd	Warner Robins	GA	31093	1,000 00
Fccla	220 Smithonia Road	Winterville	GA	30683	250 00
Rainbow House	108 Elmwood St	Warner Robins	GA	31093	500 00
Cherished Children	511 Myrtle Street	Warner Robins	GA	31093	500 00
Warner Robins Police	P O Box 1488	Warner Robins	GA	31099	500 00
Joanna McAffee Cancer Foundation	P O Box 9537	Warner Robins	GA	31095	500 00
Heart of Georgia DDM	615 Corder Road	Warner Robins	GA	31088	250 00
					19,080 84

Statement 1
Form 990-EZ, Part I, Line 6
Net Income (Loss) from Special Events

Special Events	Gross Receipts	Less Contri-butions	Gross Revenue	Less Direct Expenses	Net Income (Loss)
Golf Tournament	23,678.	0.	23,678.	9,060.	14,618.
Reverse Raffle	20,524.	0.	20,524.	19,355.	1,169.
Total	$ 44,202.	$ 0.	$ 44,202.	$ 28,415.	$ 15,787.

Statement 2
Form 990-EZ, Part I, Line 10
Grants and Similar Amounts Paid

Cash Grants and Allocations

Donee's Name:	See attached list	
Amount Given:		$ 19,081.
	Total Cash Grants and Allocations	$ 19,081.
	Total Grants and Similar Amounts Paid	$ 19,081.

Statement 3
Form 990-EZ, Part I, Line 16
Other Expenses

Annual Registration	$ 60.
Bank Charges	17.
Dues	1,645.
Meals	10,395.
Travel	1,187.
Total	$ 13,304.

Statement 4
Form 990-EZ, Part III
Organization's Primary Exempt Purpose

To support youth of Houston County within the guideline of Optimist International.

Statement 5
Form 990-EZ, Part III, Line 31
Statement of Program Service Accomplishments

Description	Grants and Allocations	Program Service Expenses
Warner Robins American Little League Includes Foreign Grants: No	500.	
The Methodist Home for Children and Youth Includes Foreign Grants: No	500.	
YMCA Includes Foreign Grants: No	250.	
Exchange Club of Houston County Includes Foreign Grants: No	250.	
Community Outreach Service Center Includes Foreign Grants: No	250.	
GYSTC Includes Foreign Grants: No	1,250.	
Houston County DFACS Includes Foreign Grants: No	1,500.	
Toys for Team Robins Includes Foreign Grants: No	500.	
Warner Robins Chamber of Commerce Youth Leadership Program Includes Foreign Grants: No	1,000.	
Jeff Smith Golf Classic Includes Foreign Grants: No	1,500.	
Hearts for Heroes Includes Foreign Grants: No	250.	
Northside High School Includes Foreign Grants: No	500.	
FCCLA Includes Foreign Grants: No	250.	
Rainbow House Childrens Resource Center Includes Foreign Grants: No	500.	
Cherished Children Daycare Center Includes Foreign Grants: No	500.	
Warner Robins Police Includes Foreign Grants: No	500.	
Joanna McAfee Childhood Cancer Foundation Includes Foreign Grants: No	500.	
Heart of Georgia DDM Includes Foreign Grants: No	250.	
Houston County High School Includes Foreign Grants: No	1,700.	
Total	$ 12,450.	$ 0.

Statement 6
Form 990-EZ, Part IV
List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title and Average Hours Per Week Devoted	Compensation	Contribution to EBP & DC	Expense Account/ Other
Jack Broeils 100 Dynasty Terrace Warner Robins, GA 31088	President 0	$ 0.	$ 0.	$ 0.
Andy Thomas 255 Carl Vinson Parkway Warner Robins, GA 31088	Vice President 0	0.	0.	0.
John Luppino 102 Putters Court Warner Robins, GA 31088	Secr./Treas. 0	0.	0.	0.
Thomas Lamb 207 Westbury Ct. Warner Robins, GA 31088	Program Chair 0	0.	0.	0.
Kevin Greer 304 Fieldfare Kathleen, GA 31047	Board of Direct 0	0.	0.	0.
Scott Street 1544 Watson Blvd. Warner Robins, GA 31088	Board of Direct 0	0.	0.	0.
Lee Minor 119 Stillwood Drive Warner Robins, GA 31088	Board of Direct 0	0.	0.	0.
Steve Holcomb 123 Chadwyck Lane Bonaire, GA 31005	Board of Direct 0	0.	0.	0.
	Total	$ 0.	$ 0.	$ 0.

Statement 7
Form 990-EZ, Part V
Regarding Transfers Associated with Personal Benefit Contracts

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? No
(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? No