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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)

OMB No 1545-0047

2008

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

	For the	2008 calend	dar year, d	or tax year beginning		2008, an	nd endin	g			,
В	Check if	applicable		C Name of organization				-	D Employ	er Iden	tification Number
	Add	ress change	Please use IRS label	GARY SPORTSMEN	CLUB				35~	0329	985
	Nau	ne change	or print or type.	inumper and street (or P O	box if mail is not delivered to s	treet addr)	Room/s	uite	E Telepho	опе пит	ber
	 	al return	See specific	10101 MADISON S	ጥቡፍድጥ				(21	9) 6	62-5822
	Ħ		Instruc-	City, town or country	TRUBI	State ZIF	P code + 4		(21	<i>)</i>	
	 4	mination	tions.	1							• E3E 000
		ended return	F	CROWN POINT		IN 4	6307	H/a) to this	G Gross		
	App	lication pending		and address of principal officer					a group retui affiliates inc		H H
			RON QU						attach a list		structions) Yes No
<u> </u>	Tax-e	exempt status	s X 501	(c) (7) (Insert r	no) 4947(a)(1)	or	527				
J	Webs	site: ► N/	<u>A</u>					H(c) Group	exemption n	umber •	<u> </u>
K	Туре	of organization	X Corpora	ation Trust Associat	ion Other ►	L Year	of Format	ion 193	4 M s	State of	legal domicile IN
Pa	irt l	Summa	ary		• •						
	1 E	Briefly describ	be the org	anization's mission or mo	st significant activities	A Fı	rater	nal At	hletic	Or	ganization
d)	1	A Frater	nat or	ganization form	ed to promote	local	athl	etic a	ctivi	ties	
ũ				local communit							
Ë	7	the city	as a	whole.							
o Ve		Check this bo		if the organization discon	tinued its operations or	disposed	of more	than 25°	% of its as	ssets	
9				bers of the governing bod							15
SS			•	t voting members of the g	overning body (Part VI,	line 1b)				$\overline{}$	15
ij				yees (Part V, line 2a)						5	15
Activities & Governance	1			eers (estimate if necessar		~ .					80
•	7a⊺	otal gross ur	nrelated b	usiness revenue from Par	4 Although AS-coloring					7a	0.
	ρı	Net unrelated	business	taxable income from Fori	n 990; i, line[34 V L]	"		1		7b	
				ts (Part VIII, line 1h)	3	RS-OSC		Р	rior Year		Current Year
Ð			•		NOV 3 0 2009	ŏ		ļ			78,248.
Ĕ	1	-		ue (Part VIII, line 2g) 📙	1 }	122		L			124,515.
Revenue				irt VIII, column (A), lin e s 3				ļ			
ш				II, column (A), lines 5, 6d		1		ļ <u>.</u>			151,471.
				nes 8 through 11 (must eq); line 1 2	2)	<u> </u>	,		354,234.
	13 (Grants and sii	mılar amo	ounts paid (Part IX, colum	ın (A), lines 1-3)						7,833.
	14 E	Benefits paid	to or for r	members (Part IX, columr	n (A), line 4)			ļ			
ø	15 S	Salaries, othe	r compen	sation, employee benefits	s (Part IX, column (A), I	ines 5-10	0)				186,6 <u>67.</u>
ıse	16a F	Professional f	undraisin	g fees (Part IX, column (A	A), line 11e)						
Expenses	ЬТ	otal fundrais	ing exper	nses (Part IX, column (D),	line 25). ►						
ũ				X, column (A), lines 11a-1							127,465.
	1			nes 13-17 (must equal Par		5)					321,965.
						٠,					32,269.
	19 F	Revenue less	expenses	Subtract line 18 from lin	16 12			+			
te or			5 122 :	16)					nning of Y	-	End of Year
Not Assets Fund Baland		otal assets (•				ļ <u>1</u>	,242,1		1,199,314.
a g	21 T	fotal liabilities	s (Part X,	line 26)				ļ	11,0	156.	11,756.
				inces Subtract line 21 fro	m line 20			1	<u>,231,0</u>	52.	1,187,558.
Pa	rt II	Signatu	<u>ire Bloc</u>	:k							
		Under penaltie	erjury.	Declare that have examined the Declaration of preparer (other th	s retion, including accompany	ng schedul	es and sta	tements, and	to the best	of my kr	nowledge and belief, it is
		true, correct, a	FIG Complete	r Declaration of preparer comes in	an enicery is based on an inion	mation of w	vilicii prepa	irei ilas aliy	Kilowieage		
Sig	gn 💮	 	m	K. XM	4	_		_ 1	1/14/0	9	
He	re	Signature	of officer			-		Da	te		
		► David	R. S	hebish				Treas	surer_		
			int name and								
				1 /1 -	11/1	Date			heck if	P	reparer's identifying number see instructions)
Pa	id			1 / /// C.			<i>[]</i>	/ se	elf- inployed P		
Pre		Preparer's signature	► [///.	iVIC. XR	M	//	114/	69 "	, . ,	3	514-52-9490
pa	rer's			id P Shahiah Chi	<u> </u>					1	<u> </u>
Ųs		Firm's name (or yours if self-							INI -		
On	ly	employed), address, and		Hemlock Lane	TN 4	6307		E	IIN	219	662-9222
		1710 . 4	Cra	wn Doint	IN A	n 111/		101	попело 🟲	~ 17	18 W L 1 L L L

Form	1 990 (2008)			MEN CLUB					35-0	32998	35		Page 2
Par	t III Sta	atement of	Progr	am Service	Accomp	olishments (see	instructio	ns)					
` 1	Briefly desci	ribe the organ	ization's	mission.									
				Organiza			_ _						
	A Frate	rnat orga	aniza	tion form	ed_to_	promote loca	al athlet	tic acti	vities_	_ _			
	See Form 9	90, Page 2, P	art III, L	ine 1 (continue	ed)								
2	Did the orga	nization unde	rtake ar	y significant p	rogram sei	vices during the ye	ear which wer	e not listed	on the prior				
	Form 990 or	· 990-EZ?									Yes	X	No
	If 'Yes,' des	cribe these ne	w servi	es on Schedu	le O					_		_	
3	Did the orga	ınızatıon ceas	e condu	cting, or make	significant	t changes in how it	conducts, an	ny program s	ervices?	П	Yes	X	No
	If 'Yes,' des	cribe these ch	anges o	n Schedule O.		-		-		_		_	
4	Describe the	e exempt purp	ose ach	evements for	each of the	e organization's thre are required to repo	ee largest pro	ogram servic	es by expens	ses Sec	tion 50)1(c)(3	3)
	and 501(c)(4	4) organization	ns and s	ection 4947(a)	(1) trusts a	are required to repo	ort the amoun	nt of grants a	nd allocation	s to othe	ers, the	e total	
	expenses, a	ina revenue, i	r any, to	r each progran	n service r	eportea							
													
4 a	(Code) (Exp	enses	\$		including grants of	\$) (Revenue	\$)
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4 b	(Code) (Exp	enses	\$		including grants of	\$) (Revenue	\$)
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4 c	(Code) (Exp	enses	\$		including grants of	\$) (Revenue	\$)
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4 d			Describe	n Schedule (-4 6		\	ć				
	(Expenses	\$			ing grants) (Revenue				<u>) </u>	
4 e	fotal progra	m service ex	penses	▶ Ş		(Must equa	I Part IX, Line	e ∠ɔ, columr	1 (B))				

Form 990 (2008) GARY SPORTSMEN CLUB

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		x
2	Is the organization required to complete Schedule B, Schedule of Contributors?	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		x
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any 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		Х
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? If 'Yes,' complete Schedule D, Part IV	9_		х
10	Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25° If 'Yes,' complete Schedule D, Parts VI, VIII, IX, or X as applicable	11		х
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14 a	a Did the organization maintain an office, employees, or agents outside of the U S ?	14a		X
t	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If 'Yes,' complete Schedule F, Part I	14b		X
15	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, Part II	15		х
	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, Part III	16		х
	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I	17		X
	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 17 If 'Yes,' complete Schedule I, Parts I and II	21	<u> </u>	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 27 If 'Yes,' complete Schedule I, Parts I and III	22		X
23	Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete Schedule J	23		<u>x</u>
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 questions 24b-24d and complete Schedule K. If 'No,'go to question 25	24a		х
Ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		<u> </u>
25 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	_	
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If 'Yes,' complete Schedule L, Part I	25b		
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, or substantial contributor, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		_x_
2 Λ Λ		Fore	990	(2008)

Form 990 (2008) GARY SPORTSMEN CLUB

Part IV | Checklist of Required Schedules (continued)

	•		Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
i	a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If 'Yes,' complete Schedule L, Part IV	28a		Х
١	Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' complete Schedule L, Part IV	28b		х
•	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If 'Yes,' complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
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		Х
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		х
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		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35		х
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		
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_
RΔΔ		Form	990 (2008)

Form 990 (2008) GARY SPORTSMEN CLUB	35-0329985	F	age
Part V Statements Regarding Other IRS Filings and Tax Compliance			
		Yes	No
1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S Information Returns. Enter -0- if not applicable	0		
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportab (gambling) winnings to prize winners?	le gamıng	x z	
2a 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	15		
2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	21	X	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instru	ictions)		
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3	a	Х
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	31)	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other author financial account in a foreign country (such as a bank account, securities account, or other financial account	rity over, a	3	Х
b If 'Yes,' enter the name of the foreign country.	,		
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank a Financial Accounts.	and		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 6	9	x
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	51	5	Х
c If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regard Prohibited Tax Shelter Transaction?	ding 50	:	
6a Did the organization solicit any contributions that were not tax deductible?	68	+	Х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or deductible?	gifts were not		
7 Organizations that may receive deductible contributions under section 170(c).		1	
a Did the organization provide goods or services in exchange for any guid pro guo contribution of more than \$	575? 7 8		X
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	71		1
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was requ			
Form 8282?	70	<u> </u>	X
d If 'Yes,' indicate the number of Forms 8282 filed during the year			
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a person benefit contract?	76		Х
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	71	+	X
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	70		
h For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as		וו	
8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization excess business holdings at any time during the year?	a)(3) ion, have		e.
9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	9 8	3	_
b Did the organization make any distribution to a donor, donor advisor, or related person?	91	5	
10 Section 501(c)(7) organizations. Enter			
a Initiation fees and capital contributions included on Part VIII, line 12	1,750.	1	
b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	0.		
11 Section 501(c)(12) organizations. Enter			
a Gross income from other members or shareholders			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	122	<u>. </u>	<u> </u>
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year . 12b			
BAA	For	n 990	(2008

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Form 990 (2008) GARY SPORTSMEN CLUB

Part VI Governance, Management and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Sec	ction A.	Governing Body and Management					
		n 'Yes' response to lines 2-7b below, and for a 'No' resp es, or changes in Schedule O See instructions	oonse to lines 8 or 9b below, de	escribe the circumstances,		Yes	No
1	a Enter th	e number of voting members of the governing body		1a 15	_		
	b Enter th	e number of voting members that are independent	Į	1b 15			
2	Did any officer, o	officer, director, trustee, or key employee have a family firector, trustee or key employee?	relationship or a business rela	ationship with any other	2	-	Х
3	Did the of	organization delegate control over management duties or s, directors or trustees, or key employees to a manage	customarily performed by or uniment company or other person	der the direct supervision	3		Х
4		organization make any significant changes to its organi e prior Form 990 was filed?	zational documents		4		Х
5		organization become aware during the year of a materia	al diversion of the organization's	s assets?	5		Х
6		e organization have members or stockholders?	5		6	Х	
7	a Does the	e organization have members, stockholders, or other pe	rsons who may elect one or mo	ore members of the	7a	х	
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?							
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following							
		erning body?			8 a	X	
	b Each co	mmittee with authority to act on behalf of the governing	body?		8b	Х	
9	a Does the	organization have local chapters, branches, or affiliate	es?		9 a		Х
	b If 'Yes,' and brai	does the organization have written policies and proceduches to ensure their operations are consistent with tho	res governing the activities of see of the organization?	such chapters, affiliates,	9 b		
10 Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990							
11 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							X
Sec	ction B.	Policies					
						Yes	No
		organization have a written conflict of interest policy?			12a	_X_	
	to confli				12b		х
	Schedul	e organization regularly and consistently monitor and er e O how this is done	nforce compliance with the polic	cy? If 'Yes,' describe in	12c	х	
		e organization have a written whistleblower policy?			13		_X
		e organization have a written document retention and de			14	Х	 ,
	persons	process for determining compensation of the following process comparability data, and contemporaneous substantiation.	on of the deliberation and decis	oproval by independent	-	-	
	_	inization's CEO, Executive Director, or top managemen	t official?		15a		X
		ficers of key employees of the organization?			15b		<u>X</u>
		the process in Schedule O (see instructions)					
	entity di	organization invest in, contribute assets to, or participations the year?			16a		x
	in joint v	has the organization adopted a written policy or proced enture arrangements under applicable federal tax law, ith respect to such arrangements?	ure requiring the organization to and taken steps to safeguard th	o evaluate its participation ne organization's exempt	16ь		
Se		Disclosures					
17		states with which a copy of this Form 990 is required to	be filed >				
18	Section inspection	6104 requires an organization to make its Forms 1023 on. Indicate how you make these available. Check all the	(or 1024 if applicable), 990, and at apply.	d 990-T (501(c)(3)s only) ava	aılable	for pu	blic
	Owr	website Another's website X	Upon request				
19	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						ıal
		e name, physical address, and telephone number of the Shebish 10101 Madison					5822
	- pavic	Sueprai	CTOWN_FOINC1	<u> </u>			
BAA	Λ				Form	990 ((2008)

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1 a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- 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) or 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.

Check this box if the organization did not compensate any officer, director, trustee, or key employee (A) (B) (c) (D) (E) (F)										
(A)		(D)	(E)	(F)						
Name and Title	Average hours per week	D undivide at trustee or director	anstitutional frustee	Officer	a key emphyee	ap High est कार्याद्वानाञ्चाल	y) Furne	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Ron Quale										
President	20.00			X				1,000.	0.	0.
David Shebish										
Treasurer	20.00			X_	_			1,000.	0.	0.
Joe Vasallo					1					
Secretary	20.00			Х				1,000.	0.	0.
Bud Midgett				,,	l					0
Vice President	20.00			X				0.	0.	0.
Bob Stewart	20 00	v	i		ŀ			0.	0.	0.
Board member	20.00	_^_						- 0.	0.	
								Ü		
										<u> </u>

· (A)	(B)			-	c)			(D)	(E)		(F)	
Name and Title	Average hours per week	ndıvıdual trustee	o Institutional ⁺rustee	Officer		Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation for related organization (W-2/1099-MISC)	n is	Estimal amount of compens from the organiza and rela organizal	other ation ne ition ated
	-								-			
		-										
1 b Total					_		>	3,000.		<u> </u>		0
2 Total number of individuals (including those in 1a) who organization ►	ho recei	ved	mor	e th	an S	\$100	,000) in reportable con	npensation from	the		
organization											Ye	s No
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such inc	dividual										3	х
4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater th individual	ortable an \$150	com ,000	pen: 17 If	satio 'Ye:	on a s' co	nd o	ther lete	compensation fro Schedule J for suc	m ch		4	x
5 Did any person listed on line 1a receive or accrue co rendered to the organization? If 'Yes,' complete Sche	mpensa edule J f	ition or si	fror uch	n ar pers	ny u son	nrela	ated	organization for s	ervices		5	X
Section B. Independent Contractors												
Complete this table for your five highest compensate compensation from the organization	d indep	ende	ent c	ontr	acto	ors t	hat	received more that	n \$100,000 of			
(A) Name and business address	<u>s</u>							(B) Description o	f Services	С	(C) ompensat	ion
						_						
2 Total number of independent contractors (including ti	hose in	1) w	ho r	ece	ıved	mo	re th	l nan \$100,000 in				

Pai	t viii Statement of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions) 1 d 1 d 1 d 1 d 1 d 1 d 1 d 1 d 1 d 1 d	47,405. 30,843.		revenue		312, 313, 01 314
AND	g Noncash contribns included in lns 1a-1f \$ h Total. Add lines 1a-1f		78,248.			
핑	L	Business Code		-		
EVEN	2a Bar and Food Income 72	22410	124,515.	124,515.	0.	0.
RAM SERVICE RE	b c d					
300	f All other program service revenue	>	104 515			
-	g Total. Add lines 2a-2f		124,515.			
	 Investment income (including dividends, in other similar amounts) Income from investment of tax-exempt bo Royalties 	>			· · · · · · · · · · · · · · · · · · ·	
	(i) Real	(II) Personal				
	6a Gross Rents b Less rental expenses c Rental income or (loss)	13,870.				•
	d Net rental income or (loss)	13,870.	13,870.	13,870.	- 0.	0.
	7 a Gross amount from sales of assets other than inventory	(II) Other	13,070.	13,070.	<u>.</u>	
	b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss)	<u> </u>	-			
OTHER REVENUE	8a Gross income from fundraising events (not including \$\frac{30,843}{30,843}\$. of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses b	nts Þ				
	c Net income or (loss) from fundraising ever 9a Gross income from gaming activities See Part IV, line 19 a	nts				
	b Less direct expenses b					
	c Net income or (loss) from gaming activitie 10a Gross sales of inventory, less returns and allowances . a	295,361.				
	b Less cost of goods sold . b	170,846.	104 515	124 515	•	_
	c Net income or (loss) from sales of invento	Business Code	124,515.	124,515.	0.	0.
ł		00099	9,532.	9,532.	0.	0.
		00099	2,000.	2,000.	0.	0.
		00099	1,554.	1,554.	0.	0.
	e Total. Add lines 11a-11d	•	13,086.			
	12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6	6d, 7d, 8c, 9c, ▶	354.234.	275.986.	Ω	0.

Page 10

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).

	,	/A\	(B)	(C)	(D)
Do 1 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	7,833.	7,833.		
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	3,000.		3,000.	
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	161,367.	161,367.		
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	22,300.	22,300.		
11	Fees for services (non-employees)				
a	Management				
t	Legal				
•	: Accounting				
•	l Lobbying				
	Prof fundraising svcs See Part IV, In 17				
f	Investment management fees				
) Other				
12	Advertising and promotion				
13	Office expenses	1,546.	1,546.		
14	Information technology				
15	Royalties				
16	Occupancy				
17 18	Travel Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
24	Insurance Other expenses Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
	Utilities	47,626.	47,626.		
t	Bank Charge	211.	211.		
	Placemats	322.	322.		
	Grounds	26,016.	26,016.		
	Membership_Exp	51,744.	51,744.		
	All other expenses .				
	Total functional expenses. Add lines 1 through 24f	321,965.	318,965.	3,000.	
26	Joint Costs. Check here ► If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
BAA					Form 990 (2008)

<u> </u>	<u>". ^</u>	Dalarice Street		(A)		(B)
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		258,919.	1	192,250.
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Receivables from current and former officers, directors or other related parties. Complete Part II of Schedule I	, trustees, key employees, -		5	
	6	Receivables from other disqualified persons (as define	d under section 4958(f)(1))			
		and persons described in section 4958(c)(3)(B) Comp	lete Part II of Schedule L		6	
A S E T S	7	Notes and loans receivable, net			7	
Ē	8	Inventories for sale or use			8	
Š	9	Prepaid expenses and deferred charges			9	
	10 a	Land, buildings, and equipment cost basis				
	b	Less accumulated depreciation Complete Part VI of	ĺ			-
		Schedule D	10Ь	983,189.	10 c	1,007,064.
	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			15	
	16	Total assets. Add lines 1 through 15 (must equal line 3	34)	1,242,108.	16	1,199,314.
	17	Accounts payable and accrued expenses		-1,108.	17	-1,108.
	18	Grants payable			18	
	19	Deferred revenue			19	
Ļ	20	Tax-exempt bond liabilities			20	*
Å	21	Escrow account liability. Complete Part IV of Schedule	D		21	
LIABILITI	22	Payables to current and former officers, directors, trus highest compensated employees, and disqualified personal disqualified perso	tees, key employees, cons Complete Part II		n	
Ę		of Schedule L		22		
S	23	Secured mortgages and notes payable to unrelated thi	rd parties		23	
	24	Unsecured notes and loans payable			24	
	25	Other liabilities Complete Part X of Schedule D		12,164.	25	12,864.
	26	Total liabilities. Add lines 17 through 25		11,056.	26	11,756.
N E T		Organizations that follow SFAS 117, check here	and complete lines			
	~-	27 through 29 and lines 33 and 34.				
A S E	27	Unrestricted net assets			27	
Ī	28	Temporarily restricted net assets			29	<u> </u>
Q R	29	Permanently restricted net assets	e ► X and complete		23	
		Organizations that do not follow SFAS 117, check her lines 30 through 34.	e > N and complete			
FUZD	30	•		1,053,468.	30	1,053,468.
		Capital stock or trust principal, or current funds	mont fund	1,033,400.	31	1,033,400.
BALAZCES	31	Paid-in or capital surplus, or land, building, and equipment accumulated income,		177,584.	32	134,090.
Ā	32	,	or other lunus	1,231,052.	33	1,187,558.
Ę	33	Total net assets or fund balances.		1,242,108.	34	1,199,314.
	34 rt X	Total liabilities and net assets/fund balances Financial Statements and Reporting		1,242,100.	34	1,199,314.
10	II ()	Financial Statements and Reporting				Yes No
1		counting method used to prepare the Form 990 X		Other		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?					•	2a X
		re the organization's financial statements audited by an				2b X
	rev	Yes' to 2a or 2b, does the organization have a committed iew, or compilation of its financial statements and selections.	tion of an independent accou	ntant?		2c X
3	a As	a result of a federal award, was the organization requir dit Act and OMB Circular A-133?	ed to undergo an audit or aud	its as set forth in the Si	ngie	3a X
		Yes,' did the organization undergo the required audit or	audits?			3b
BA		. co, cio dio organization andorgo the required about of				Form 990 (2008)

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2008

Department of the Treasury Internal Revenue Service Name of the organization Attach to Form 990. To be completed by organizations that answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

Name	me of the organization Employer Identification number									
GAF	Y SPORTSMEN CLUB			35-0329985						
Par	t I Organizations Maintaining Donor	r Advised Funds or Other Similar Fu	nds or Acc	ounts Complete if						
	the organization answered 'Yes' to	o Form 990, Part IV, line 6.								
		(a) Donor advised funds	(b) F	unds and other accounts						
1	Total number at end of year									
2	Aggregate contributions to (during year)									
3	Aggregate grants from (during year)			<u> </u>						
4	Aggregate value at end of year									
5	funds are the organization's property, subject to the organization's exclusive legal control? Yes No									
6	Did the organization inform all grantees, donorsused only for charitable purposes and not for the impermissible private benefit??	ne benefit of the donor or donor advisor or othe	er	Yes No						
Par	t II Conservation Easements Comple	ete if the organization answered 'Yes	' to Form 99	90, Part IV, line 7.						
1	Purpose(s) of conservation easements held by									
	Preservation of land for public use (e g , re	ecreation or pleasure) Preservation	of an historica	ally important land area						
	Protection of natural habitat	Preservation	of certified his	storic structure						
	Preservation of open space									
2	Complete lines 2a-2d if the organization held a of the tax year	qualified conservation contribution in the form	n of a conserva	tion easement on the last day						
	or the tax year			Held at the End of the Year						
а	Total number of conservation easements		2a							
	Total acreage restricted by conservation easem	nents	2b							
	: Number of conservation easements on a certifi		2c							
	Number of conservation easements included in		2d							
	Number of conservation easements modified, to		ted by the orga	nization during the taxable						
	year ►									
4	Number of states where property subject to cor	nservation easement is located >								
5	Does the organization have a written policy regenforcement of the conservation easement it has	arding the periodic monitoring, inspection, vioolds?	lations, and	Yes No						
6	Staff or volunteer hours devoted to monitoring,	, -	_							
7	Amount of expenses incurred in monitoring, ins	specting, and enforcing easements during the	year ► Ş							
8	Does each conservation easement reported on $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)^{2}$	•		Yes No						
9	In Part XIV, describe how the organization repo include, if applicable, the text of the footnote to conservation easements	the organization's financial statements that d	escribes the or	ganization's accounting for						
Par	Organizations Maintaining Colle Complete if the organization answ	ctions of Art, Historical Treasures, of wered 'Yes' to Form 990, Part IV, line	or Other Sin e 8.	nilar Assets						
	If the organization elected, as permitted under treasures, or other similar assets held for publi the text of the footnote to its financial statemen	c exhibition, education, or research in furthera its that describes these items	ince of public s	ervice, provide, in Part XIV,						
b	If the organization elected, as permitted under treasures, or other similar assets held for publi amounts relating to these items.	c exhibition, education, or research in furthera	ent and balance ince of public s	e sheet works of art, historical ervice, provide the following						
	(i) Revenues included in Form 990, Part VIII,	line 1		► \$						
	(ii) Assets included in Form 990, Part X	•	•	> \$						
	If the organization received or held works of art amounts required to be reported under SFAS 1	16 relating to these items:	for financial gai	n, provide the following						
	Revenues included in Form 990, Part VIII, line	1		• \$						
b	Assets included in Form 990, Part X			►\$						

Schedule D (Form 990) 2008 GARY					35-032		Page 2
Part III Organizations Mainta	ining Collec	tions of Art, H	storica	d Treasures, or	Other Similar Ass	ets (contir	าued)
3 Using the organization's accession that apply).	n and other rec	ords, check any of	the follo	wing that are a sign	ficant use of its collec	tion items (ch	neck all
a 🔲 Public exhibition		d 🔲 Lo	an or ex	change programs			
b Scholarly research		e [_] Ot	her				
c Preservation for future generation							
4 Provide a description of the organ Part XIV						ın	
5 During the year, did the organizar assets to be sold to raise funds re	ather than to be	maintained as pa	rt of the	organization's collec	tion?	Yes	No
Part IV Trust, Escrow and Cu IV, line 9, or reported	an amount	on Form 990, F	Part X,	line 21.		Form 990,	Part ———
1 a ls the organization an agent, trus included on Form 990, Part X?					assets not	Yes	No
b If 'Yes,' explain the arrangement	in Part XIV and	complete the follo	wing tab	le			
						Amount	
c Beginning balance					1c		
d Additions during the year					1 d		
e Distributions during the year					1e		
f Ending balance		_			1f		П
2a Did the organization include an a		990, Part X, line 2	217			Yes	∐ No
b If 'Yes,' explain the arrangement				·) D - 4 IV/ I 10		
Part V Endowment Funds Co				ī ·		1	
	(a) Current y	ear (b) Prior	r year	(c) Two years back	(d) Three years back	(e) Four ye	ears back
1 a Beginning of year balance				 	 	 	
b Contributions						 	
c Investment earnings or losses						+	
d Grants or scholarships						-	
 Other expenditures for facilities and programs 							
f Administrative expenses							
g End of year balance							
2 Provide the estimated percentage		d balance held as:					
a Board designated or quasi-endow	ment ►	8					
b Permanent endowment	%						
c Term endowment	%						
3a Are there endowment funds not in organization by:	n the possessio	n of the organization	on that a	re held and administ	ered for the	Yes	No_
(i) unrelated organizations						3a(i)	
(ii) related organizations						3a(ii)	
b If 'Yes' to 3a(II), are the related o	rganızatıons lıs	ted as required on	Schedul	e R²		3b	
4 Describe in Part XIV the intended							
Part VI Investments—Land, B	uildings, an	d Equipment.	<u>See Fo</u>	<u>rm 990, Part X, </u>	<u>line 10.</u>		
Description of investment	. (a) Cost or other ba (investment)	sıs (t	b) Cost or other basis (other)	(c) Depreciation	(d) Book	Value
1 a Land	L						
b Buildings							
c Leasehold improvements	L						
d Equipment	L						
e Other							
Total. Add lines 1a-1e (Column (d) sho	ould equal Form	990, Part X, colum	nn (B), II	ne 10(c).)	<u> </u>		
BAA					Sched	dule D (Form	990) 2008

TEEA3302 12/23/08

Schedule D (Form 990) 2008 GARY SPORTSMEN CLU		35-0329985 Page 3
Part VII Investments-Other Securities See Fo		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests	<u>-</u>	
Other		
· · · · · · · · · · · · · · · · · · ·	-	
	<u>.</u>	
	<u> </u>	
	<u> </u>	
Total. (Column (b) should equal Form 990 Part X, col. (B) line 12.)		
Part VIII Investments-Program Related (See F	orm 990, Part X.	line 13)
(a) Description of investment type	(b) Book value	(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
		
		
		
· · · · · · · · · · · · · · · · · · ·		
Total Column (b)(should equal Form 990, Part X, Col (B) line 13)		
Part IX Other Assets (See Form 990, Part X,	ine 15)	
	scription	(b) Book value
(a) 50.	scription	(b) Book 12:30
•		
	-	
	· · ·	
Total. Column (b) Total (should equal Form 990, Part X, col	(R) line 15)	•
		·
Part X Other Liabilities (See Form 990, Part)		
(a) Description of Liability	(b) Amount	
Federal Income Taxes		
Payroll Liabilities	12,8	64.
		
Total. Column (b) Total (should equal Form 990, Part X, col (B) line 25)	12,8	64.
In Part XIV, provide the text of the footnote to the organization		
positions under FIN 48		

SCHEDULE I

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments and Individuals in the U.S.

Complete if the organization answered 'Yes,' on Form 990, Part IV, lines 21 or 22.
 Attatch to Form 990.

OMB No 1545-0047 2008

Open to Public, Inspection

% ⊠ (h) Purpose of grant or assistance **A** Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' on Form Employer identification number □Yes 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000 Use 35-0329985 (g) Description of non cash assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States (d) Amount of cash grant Part IV and Schedule I-1 (Form 990) if additional space is needed (c) IRC section if applicable Part I General Information on Grants and Assistance (P) EIN 1 (a) Name and address of organization or government SPORTSMEN CLUB İ İ Name of the organization Ī 1111 1 GARY

Enter total number of section 501(c)(3) and government organizations 3 Enter total number of other organizations

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

TEEA3901 12/19/08

Schedule I (Form 990) 2008

Page 2 Schedule I (Form 990) 2008 Grants and Other Assistance to Individuals in the United States. Complete of the organization answered 'Yes' on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed. (f) Description of non cash assistance Part IV | Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. 35-0329985 (e) Method of valuation (book, FMV, appraisal, other) _All_requests_for_donation_must_be_for_charitable_purposes. (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients GARY SPORTSMEN CLUB (a) Type of grant or assistance Schedule 1 (Form 990) 2008 Pt_I_Line_2 Part III BAA Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 1 (continued)

Briefly describe the organization's mission:

and to support local community activites for the betterment of

the city as a whole.

Supporting Statement of:

Form 990 p 5/Line 10a

Description	Amount
Initition Fees	1,750.
Total	1,750.

Supporting Statement of:

Form 990 p 9/Fundraising Events

Description	Amount
nET FUNDRAISERS	30,843.
Total	30,843.

Supporting Statement of:

Form 990 p 9/Gross sales of inventory

Description	Amount
Bar and Food Income	295,361.
Total	295,361.

Supporting Statement of:

Form 990 p 9/Cost of Goods Sold

Description	Amount
Bar Expenses	115,043.
Food Expense	55,803.

Description	Amount
Form 990 p 9/Cost of Goods Sold	
Supporting Statement of:	Continued
GARY SPORTSMEN CLUB 35-0329985	3

Total

170,846.