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(:)

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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)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990 All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form

Intern	al Reven	ue Service	► The organization may h	ave to use a copy of	this return to	o satisfy state rej	porting requirem	ents	Inspection
A F	or the	2008 cale	endar year, or tax year beginnin	g JUL 1,	2008	and end	ing JUN 3	0, 2	009
	heck if	Please	C Name of organization				D Em		ntification number
الم	oplicable Address change	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•		_		<i>y</i> -		
늗					. / #				16060
느	Name change	print or type	HASTINGS TIGER BO	OSTER CLUE	3 ()				16860
	Initial return	See	Number and street (or P.O. box, if i	nail is not delivered to	street address		om/suit	ephone nu	ımber
	Termin ation	- Specific	PO BOX 744			<u> </u>	「 <i>一</i>	02-4	61-7550
\vdash	Amend	1.1.00 GO F	City or town, state or country, and	ZIP + 4			-	oup Exemp	
₩.	⊣return Applicati pending	1							Juoit
					,			mber 🕨	-10
	Section	ion 501(c)(3) organizations and 4947(a)(1) none		ts must attach	a completed	G Accounting n	nethod: 📙	X Cash Accrual
			Schedule A (Form 9	90 or 990-EZ).			Other (specif	y) >	
I V	/ebsite	: ► N/Z	A		_		H Check ▶ [X If the	organization is not
•) ((insert no.)	4947(a)(1) or 527			e B (Form 990, 990-EZ, or 990-PF)
	heck >								
			ne organization is not a section 509(a		-	jioss receipis are i	iorniany not more	man \$20,	OOO. A return is not
			rganization chooses to file a return, b						
			d 7b, to line 9 to determine gross rece					▶ \$	110,465.
Pa	rt I	Reven	ue, Expenses, and Chang	jes in Net Asse	ts or Fund	d Balances (S	See the instruction:	s for Part I	.)
١ ا	1 (Contribution	s, gifts, grants, and similar amounts	eceived				1	8,075.
			vice revenue including government fo					2	
		•		co and contracto				— ;	1 240
			dues and assessments					3	1,240.
	4 1	Investment i	ncome					4	
2 1	5a (Gross amou	nt from sale of assets other than inve	ntory		5a		l	
197	ь	Less: cost o	r other basis and sales expenses			5b			
•	c (Gain or (loss	s) from sale of assets other than inver	itory (Subtract line 5b.)	from line 5a) (attach schedule)		1 5c	
			its and activities (complete applicable	* *		•	nook boro	-	
ָם. י						is ironi yannny, o	IECK HEIE		
Nહ્ય ∄. Revenue			ue (not including \$	of contrib	utions	1 1			
Ä	ı	reported on	line 1)			_6a	<u>41,189.</u>		
	ь	Less: direct	expenses other than fundraising expe	nses		6b	23,369.		
	c i	Net income	or (loss) from special events and acti	vities (Subtract line 6b	from line 6a)			6c	17,820.
			of inventory, less returns and allowar	·	TMT 3	7a	59,432.		, 0200
			• •	.003	.mi J		54,527.		
			f goods sold			7b	54,547.	1 1	4 005
		-	or (loss) from sales of inventory (Sul		7a)			7c	4,905.
ريد. مهري	8	Other reveni	ue (describe INTEREST	INCOME)	8	529.
زج ال ــــــــــــــــــــــــــــــــــــ	9 .	Total reven	ue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, an	d 8				9	32,569.
			similar amounts paid (attach schedule		-3	STMT 2		10	44,832.
			d to or for members	1881	\mathcal{L}			11	
	110	Calarra att		الم المالية المالية	V				
ses	12	Salaries, otr	ier compensation, and employee beni I fees and other payments to indepen rent, utilities, and maintenance	HIS CHAIRE IN				12	
ë	13	Professiona	l fees and other payments to indepen	dent carrestors	261p			13	
Expen	14	Occupancy,	rent, utilities, and maintenance	. A.B	ra.			14	
ш	15	Printing, pul	blications, postage, and shipping		NCH			15	1,352.
	I		ses (describe	75° at	AM	SEE STATE	MENT 1	16	9,925.
			ses Add lines 10 through 16	dent prestors	DEL T			17	56,109.
				,, Or	· · · · · ·	· · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
<u>s</u>		-	deficit) for the year (Subtract line 17 f	om iine 9)	1	· · · · · · · · · · · · · · · · · · ·		18	-23,540.
Net Assets			or fund balances at beginning of year	(from line 27, column (A))		RS-080		
Ą		(must agree	with end-of-year figure reported on i	orior year's return)	19.6	OCT 7. 4. 20	14 0	19	59,861.
ë	20	Other chance	jes in net assets or fund balances (att	ach explanation)	\ -	001	(3)	20	
Z	l		or fund balances at end of year. Comb	•	, i L.		i <u>F</u>	21	36,321.
D	art II		ce Sheets. If Total assets on li			more file Form 00	O inctood of Form		30,321.
_Fè	af L II	Salaik	(See the instructions for P		2,300,000 01				(D) Cadad
			(See the instructions for F	arr II.)		(A)	Beginning of year		(B) End of year
22	Cast	n, savings, a	nd investments				<u>59,861</u>	L . 22	36,321.
	Land	d and buildir	ngs					23	
= 24		r assets (de)		24	
\geq_{25}		l assets					59,861		36,321.
٠_			(danariha 🟲			, 			_
26			(describe -			/ 		26	0.
27	Net:		nd balances (line 27 of column (B) m				59,861	L • 27	36,321.
S 832	171 17-08	LHA Fo	r Privacy Act and Paperwork Reduct	ion Act Notice, see the	e Instructions	for Form 990			Form 990-EZ (2008)

Form 990-EZ (2008) HASTINGS TIGER BOOSTER			26-	18168	60 Page 2
Part III Statement of Program Service Accomplis		Part III.)			cpenses
What is the organization's primary exempt purpose? SEE STATEN	MENT 6			Required	for 501(c)(3) ganizations and
Describe what was achieved in carrying out the organization's exempt purpos	ses. In a clear and concise manner, d	escribe the services		4947(a)(1) trusts; optional
provided, the number of persons benefited, or other relevant information for	each program title.			for others	
28 SEE STATEMENT 5					
				1 1	
(Grants \$) If this amount includes fo	reign grants, check here	>		28a	54,540.
29					
(Grants \$) If this amount includes for	reign grants, check here	_		29a	
30					
		<u></u>			
(Grants \$) If this amount includes for	reign grants, check here	<u> </u>		30a	
31 Other program services (attach schedule)					
(Grants \$) If this amount includes for	reign grants, check here			31a	
32 Total program service expenses (add lines 28a through 31a)				32	54,540.
Part IV List of Officers, Directors, Trustees, and I	Key Employees. List each one ex	ven if not compensated	(See the	instructions	for Part IV)
	(h) Title and average hours	(a) Componentian	(d) Co	ontributions	(a) [vananaa
(a) Name and address	(b) Title and average hours per week devoted to	(c) Compensation (If not paid, enter	toe	mployee fit plans &	(e) Expense account and
(4) 1141110 4110 4441000	position	-0)		eferred	other allowances
	F	,		pensation	
JAY LANDELL	PAST PRESIDEN	T			
HASTINGS, NE 68901	1.00	0.		0.	0.
DAVID LONG	PRESIDENT				
HASTINGS, NE 68901	1.00	0.		0.	0.
LAURA MATHIAS	SECRETARY				
HASTINGS, NE 68901	1.00	0.		0.	0.
VICKI KRUEGER	TREASURER				
HASTINGS, NE 68901	1.00	0.		0.	0.
STEPHANIE BLISS	DIRECTOR				
HASTINGS, NE 68901	1.00	0.		0.	0.
BOB FOOTE	DIRECTOR				
HASTINGS, NE 68901	1.00	0.		0.	0.
MIKE KARLOFF	DIRECTOR				
HASTINGS, NE 68901	1.00	0.		0.	0.
CARRIE LACY	DIRECTOR			• • •	
HASTINGS, NE 68901	1.00	0.		0.	0.
PAM MCCARTNEY	DIRECTOR				_
HASTINGS, NE 68901	1.00	0.		0.	0.
JACK NEWLUN	DIRECTOR				
HASTINGS, NE 68901	1.00	0.		0.	0.
MATT VALENTINE	VICE PRESIDEN				
HASTINGS, NE 68901	1.00	0.		0.	0.
					[
		1			1
		<u> </u>			
					1
		-			1
	- 				
832172 12-17-08	· · · · · · · · · · · · · · · · · · ·	•		Form	990-EZ (2008)
					_ \/

		<i></i>			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed described to the IRS?	iption of e	ach activity	33		X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attack		· ·	34		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among	others), l	out not			
	reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-)-T.				į
а	Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, rep	orting, and	proxy			1
	tax requirements?			35a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?			35b	N/	Α
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete	e applicab	e parts of Sch. N	36		X
37 a	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
38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or wei	e any suc	n loans made	1		
	in a prior year and still unpaid at the start of the period covered by this return?			38a		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	N/A		,	
39	Section 501(c)(7) organizations. Enter:					ł
a	Initiation fees and capital contributions included on line 9	_39a	N/A	_		1
b	Gross receipts, included on line 9, for public use of club facilities	39b	N/A			l
40 a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:					l
	section 4911 ▶ 0 . ; section 4912 ▶ ; section 4955	▶	0.			
b	Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit trans	saction du	ring the year or			1
	did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I			40Ь		X
C	Enter amount of tax imposed on organization managers or disqualified persons during the year under					
	sections 4912, 4955, and 4958	▶_	0.			
d	Enter amount of tax on line 40c reimbursed by the organization	▶_	0.			1
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter					
	transaction? If "Yes," complete Form 8886-T			40e		X
41	List the states with which a copy of this return is filed. NONE					
42 a	The books are in care of ▶ VICKI KRUEGER	Telep	none no. $ ightharpoonup 402-46$	<u> 51-7</u>	550	
	Located at ▶ PO BOX 744, HASTINGS, NE		ZIP+4 ▶ <u>(</u>	5890	2	
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority					
	over a financial account in a foreign country (such as a bank account, securities account, or other financial				Yes	No
	account)?			42b		X
	If "Yes," enter the name of the foreign country:					1
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank	and Finan	cial Accounts.	İ		
C	At any time during the calendar year, did the organization maintain an office outside of the U.S.?			42c	<u> </u>	X
	If "Yes," enter the name of the foreign country:					
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here					
	and enter the amount of tax-exempt interest received or accrued during the tax year		▶ 43	N/A	1	
					Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of					1
	Form 990-EZ			44		X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)?	f "Yes," Fo	rm 990 must be			
	completed instead of Form 990-EZ			45	<u> </u>	X
				Form !	990-EZ	(2008

Form 990-E		CLUB		26-1816	860		Page 4
Part VI	Section 501(c)(3) organizations only. All sect	tion 501(c)(3) organizations mus	t answer question	ns 46-49 and co	mplet	te the	
40 D.J.A.	tables for lines 50 and 51	rea on habelf of or in appropriants to	andidates for public			Yes	No
	e organization engage in direct or indirect political campaign activit ? If "Yes," complete Schedule C, Part I	ies on benail of of the opposition to t	andidates for public	,	46	163	X
	e organization engage in lobbying activities? If "Yes," complete S	Schedule C. Part II			47		X
	organization operating a school as described in section 170(b)(1)(a		ule E		48		Х
	e organization make any transfers to an exempt non-charitable rela				49a		Х
	s," was the related organization(s) a section 527 organization?	· ·			49b		
50 Comp	lete this table for the five highest compensated employees (other the mpensation from the organization. If there is none, enter "None."	nan officers, directors, trustees and	key employees) who	each received n	ore th	an \$10	0,000
	(a) Name and address of each employee paid more than \$100,000 NONE	(b) Title and average hours per week devoted to position	(c) Compensation	(D) Contribution to employee benefit plans & deferred compensation	(I a othe	E) Expe ccount er allow	and
	270372			-			
				-			
	, , , , , , , , , , , , , , , , , , ,			1	+		
	er of other employees paid over \$100,000 elete this table for the five highest compensated independent contra	actors who each received more than	\$100,000 of compe	nsation from the	organi	zation.	If there
is nor	ne, enter "None." NONE						
	(a) Name and address of each independent contractor paid m	nore than \$100 000	(b) Type of se	Duice /	e) Con	npensa	tion
	(a) Name and address of each independent contractor paid in	iore than \$ 100,000	(b) Type of se	TVICE (C) CON	iheiisa	
							•
	0400000		1				<u>.</u>
	per of other independent contractors each receiving over \$100,000. Under penalties of perjury, I declare that I have examined this return, includic correct, and complete. Declaration of preparer (other than officer) is based of			ny knowledge and b	elief, it i	s true,	
Sign Here	Signature of officer			Date			
	Type or print name and title						
Paid Preparer's	Preparer's signature CPS	Date Ch	eck if self-	parer's Identifying	Number	(See ins	str)

Form 990-EZ (2008)

(402) 462-4154

X Yes No

EIN 🕨

Phone >

Use Only

Firm's name (or yours

rf self-employed), address, and ZIP + 4 MCDERMOTT AND MILLER, P.C.

HASTINGS, NE 68902-1317

PO BOX 1317

May the IRS discuss this return with the preparer shown above? See instructions

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

2008 Open to Rublic

Name of the organization

Inspection
Employer identification number

Schedule A (Form 990 or 990-EZ) 2008

				S TIGER BOOS						∠6	-T8T0	<u>, 6 6 U</u>	
Part I	Reas	son f	for Public Char	ity Status (All organız	ations mus	st complet	e this part	.) (see inst	tructions)				
he orga	nızatıon is	not a	private foundation l	because it is (Please ch	eck only o	ne organiz	ation)						
1 🗀	A churc	h, cor	nvention of churches	s, or association of churc	ches descr	nbed in se	ction 170	(b)(1)(A)(i)					
2	A school	l desc	cribed in section 17	0(b)(1)(A)(ii). (Attach Sc	hedule E)								
з 🗀	Ahospr	al or	a cooperative hospi	tal service organization of	described i	n section	170(b)(1)(A)(iii) . (Att	ach Sche	dule H.)			
4	A medic	al res	earch organization of	perated in conjunction	with a hosi	pital descr	ibed in se	ction 170	(b)(1)(A)(ii	i). Enter th	ne hospital	i's nam	ie,
	city, and	state	е'										
5] An orga	nızatı	on operated for the	benefit of a college or ur	niversity ov	vned or op	erated by	a governr	nental unr	t describe	d ın		
	section	170((b)(1)(A)(iv). (Comple	ete Part II.)									
6	A federa	ai, sta	te, or local governme	ent or governmental und	t described	l in sectio	n 170(b)(1)(A)(v).					
7] An orga	nızatı	on that normally rec	eives a substantial part (of its supp	ort from a	governme	ntal unıt o	r from the	general p	ublic desc	cribed in	n
	section	170(I	b)(1)(A)(vi). (Comple	te Part II)									
8	A comm	unity	trust described in s	ection 170(b)(1)(A)(vi).	(Complete	Part II.)							
9 X] An orga	nızatı	on that normally rec	eives (1) more than 33 1	1/3% of its	support fr	om contril	outions, m	nembershij	p fees, and	d gross re	ceipts	from
	activitie	s relat	ted to its exempt fur	nctions - subject to certa	un exceptio	ons, and (2	2) no more	than 33 1	/3% of its	support f	rom gross	invest	ment
	ıncome	and u	inrelated business ta	axable income (less sect	tion 511 ta	x) from bu	sinesses a	cquired b	y the orga	nization a	fter June 3	30, 197	5
	See sec	tion (509(a)(2). (Complete	the Part III.)									
10 🗀] An orga	nızatı	on organized and or	perated exclusively to te	st for publi	c safety. S	ee sectio	n 509(a)(4	I). (see ins	tructions)			
11 🗆] An orga	nızatı	on organized and op	perated exclusively for th	ne benefit d	of, to perfo	rm the fur	ctions of,	or to carry	y out the p	ourposes o	of one o	or
	more pu	iblicly	supported organiza	ations described in section	on 509(a)(1	i) or sectio	n 509(a)(2). See sec	tion 509(a	a)(3). Che	ck the box	c that	
	describ	es the	type of supporting	organization and comple	ete lines 1°	1e through	11h.						
	a 🔲 🤈	Гуре I	b	Type II c	: 🔲 Тур	e III - Func	tionally int	egrated		d 🔙	Type III - 0	Other	
е 🗀	By chec	king 1	this box, I certify tha	it the organization is not	controlled	directly or	r indirectly	by one or	more disc	qualified p	ersons otl	her tha	n
	foundat	ion m	anagers and other t	han one or more publicly	y supporte	d organiza	tions desc	cribed in s	ection 509	9(a)(1) or s	ection 509	9(a)(2)	
f	If the or	ganız	ation received a writ	ten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III				
	support	ing or	rganization, check th	nis box									
g	Since A	ugust	17, 2006, has the c	organization accepted ar	ny gift or co	ontribution	from any	of the follo	owing pers	sons?			
	(i) A j	oerso	n who directly or ind	irectly controls, either al	lone or tog	ether with	persons d	escribed i	ın (ıı) and (III) below,		Yes	No
	the	gove	erning body of the si	upported organization?							11g(i)		
	(ii) At	amıly	member of a persor	n described in (i) above?	•						11g(ii)	1	
	(iii) A	35% d	controlled entity of a	person described in (i) o	or (II) above	∍?					11g(iii)	<u></u>	
h	Provide	the fo	ollowing information	about the organizations	the organ	ızatıon sup	ports.						
	ne of suppor	rted	(ii) EIN	(iii) Type of organization	(iv) Is the c in col. (i) lis	organization sted in your	(v) Dıd yol organızat		(vi) Is organizatio	on in col.		mount o	of
·	gumzumom			(described on lines 1-9 above or IRC section	governing	document?	(i) of your	support?	(i) organız U.S	.7 " ""			
				(see instructions))	Yes	No	Yes	No	Yes	No			
					ļ								
										ļ			
						ļ			ļ				
									 				
													•
					<u> </u>								
Total			L	<u> </u>	<u> </u>	<u> </u>	L	L	}				

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

	rt II Support Schedule for	Organizations	s Described in	Sections 170	(b)(1)(A)(iv) ar	nd 170(b)(1)(A)(vi)
	(Complete only if you checke	d the box on line 5	5, 7, or 8 of Part I.)			
Sec	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants ")						
2	Tax revenues levied for the organ-						
	ızatıon'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						
4	Total. Add lines 1 - 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						1
	column (f)		1				
_6	Public Support. Subtract line 5 from line 4						
Sec	ction B. Total Support		1				
Cale	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4						
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			<u> </u>	ļ. 		<u> </u>
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)	-		ļ	ļ <u></u>		
11				1	<u> </u>	 	
	Gross receipts from related activities	•				12	
13	First five years. If the Form 990 is fo	•	s first, second, th	ırd, fourth, or fifth t	tax year as a secti	on 501(c)(3)	,
500	organization, check this box and stoction C. Computation of Pub		rcentage				
	Public support percentage for 2008 (-	actumn (f)		14	
14 15	Public support percentage from 2007		•	column (i)) .		15	<u>%</u>
	33 1/3% support test - 2008. If the		· ·	on line 13, and line	14 is 33 1/3% or		
100	stop here. The organization qualifies	•			1413001707001	more, cricek trile b	▶ □
ŀ	33 1/3% support test - 2007. If the		_		d line 15 is 33 1/39	% or more, check to	his box
	and stop here. The organization qua	_				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	▶□
17:	10% -facts-and-circumstances tes		-		ne 13. 16a. or 16b.	and line 14 is 10%	or more.
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"		•	•	•	ant vi vion and orga	▶
ŧ	10% -facts-and-circumstances tes	-	•		-	17a, and line 15 is	10% or
•	more, and if the organization meets t	`	=				
	organization meets the "facts-and-cir				•		
18	Private foundation. If the organization		=	-		=	ns 🕨
						nedule A (Form 990	

Schedule A (Form 990 or 990-EZ) 2008 HASTINGS TIGER BOOSTER CLUB 26-1816860 Page 3 Part III | Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants") 57,393. 9,315. 66,708. Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the 100,621. 189,765. 89,144. organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 109,936. 256,473. 146,537. 6 Total, Add lines 1 - 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 c Add lines 7a and 7b 256,473 8 Public support (Subtract line 7c from line 6) Section B. Total Support (e) 2008 Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (f) Total

9 Amounts from line 6			146,537.	109,936.	256,473.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources			692.	529.	1,221.
b Unrelated business taxable income					
(less section 511 taxes) from businesses acquired after June 30, 1975					
c Add lines 10a and 10b			692.	529.	1,221.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on					
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)					
13 Total support (Add lines 9, 10c, 11, and 12)					257,694.
14 First five years. If the Form 990 is for	the organization's firs	st, second, third, four	th, or fifth tax year as a section	n 501(c)(3) organiz	ation,

 $\triangleright \mathbf{X}$ check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) 15 % 16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g 16 % Section D. Computation of Investment Income Percentage 17 17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f) % Investment income percentage from 2007 Schedule A, Part IV-A, line 27h 18 %

124	a 33 1/3% support tests - 2000. If the organization did not check the box on line 14, and line 13 is more than 33 1/3%, and line 17 is not	
	more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	ightharpoons
ı	b 33 1/3% support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and	
	line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	
20	Private foundation, If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions	

FORM 990-EZ OTHER EXPEN	SES	STATEMENT	1
DESCRIPTION		AMOUNT	
RECOGNITION BANQUET AWARDS AND EXPENSES BANK FEES		2,41	11. 17.
COACHES EQUIPMENT/SHIRTS		2,00	68.
TEAM TROPHIES AND AWARDS		5,2	29.
TOTAL TO FORM 990-EZ, LINE 16		9,92	25.
FORM 990-EZ CASH GRANTS AND ALL	OCATIONS	STATEMENT	2
CLASS OF ACTIVITY/DONEE'S NAME AND ADDRESS	DONEE'S RELATIONSHIP	AMOUN'	Г
FUNDING TO PURCHASE TIGER MASCOT HASTINGS HIGH SCHOOL 1100 WEST 14TH STREET HASTINGS, NE 68901	NONE	1,68	89.
FUNDING TO PURCHASE BASKETBALL EQUIPMENT HASTINGS HIGH SCHOOL 1100 WEST 14TH STREET HASTINGS, NE 68901	NONE	8,2	13.
FUNDING TO PURCHASE VIDEO EQUIPMENT HASTINGS HIGH SCHOOL 1100 WEST 14TH STREET HASTINGS, NE 68901	NONE	5,4	30.
FUNDING TO ASSIST WITH TRACK EQUIPMENT P HASTINGS HIGH SCHOOL 1100 WEST 14TH STREET HASTINGS, NE 68901	NONE	26,5	00.
FUNDING FOR STUDENT POST PROM & GRADUATI HASTINGS HIGH SCHOOL 1100 WEST 14TH STREET HASTINGS, NE 68901	NONE	3,0	00.
TOTAL INCLUDED ON FORM 990-EZ, LINE 10		44,8	32.

FORM	990-EZ INCOME AND COST OF GOODS SOLI INCLUDED ON PART I, LINE 7A)	STATEMENT 3
INCO	ME		
	GROSS RECEIPTS	59,432	
	LINE 1 LESS LINE 2		59,432
	COST OF GOODS SOLD (LINE 13)	54,527	4,905
COST	OF GOODS SOLD		
7. 1 8. 9	INVENTORY AT BEGINNING OF YEAR	54,527	
	OTHER COSTS		54,527
	INVENTORY AT END OF YEAR		54,527

FO	RM 990-EZ INFORMATION REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS			4			
A)	DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT?		[1	YES	[X]	NO
B)	DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS, DIRECTLY OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT? .	•	[]	YES	[X]	NO

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STATEMENT

5

ORGANIZING AND MANAGING VARIOUS FUNDRAISING ACTIVITIES THROUGHOUT THE SCHOOL YEAR, AND PROVIDING \$54,540 OF FINANCIAL SUPPORT TO THE EXTRACIRRICULAR ACTIVITIES OF THE STUDENTS AT HASTINGS PUBLIC SCHOOLS.

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STATEMENT

6

TO PROMOTE INTEREST THOUGHOUT THE COMMUNITY, IN ALL HASTINGS HIGH SCHOOL SPORTS AND ACEDEMIC EXTRACURRICULAR ACTIVITY PROGRAMS. TO PROMOTE THE THEORY AND PRACTICE OF THE PRINCIPLES OF GOOD SPORTSMANSHIP. TO CARRY ON PROJECTS AGREEABLE TO THE MEMBERSHIP, SO THAT SPORTS EQUIPMENT CAN BE PURCHASED FOR THE ATHLECTIC DEPARTMENT OF THE SCHOOL. TO CARRY OUT ANY PROJECTS FOR THE BETTERMENT OF THE BOOSTER CLUB, ATHLETIC PROGRAMS, OR ACADEMIC PROGRAMS OF HASTINGS PUBLIC SCHOOLS.