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SCHEDULE A

(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.

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service
Name of the organization

Employer identification number 45 0373009

ST T	THO	MAS BOOST	TER CLUB INC						45	0	373009
Par	_			arity Status (All org	ganizatio	ns must	comple	ete this p	oart.) (se	e instruc	ctions)
	_			dation because it is: (
1	J			rches, or association						A)(i).	
2	$\overline{\Box}$			n 170(b)(1)(A)(ii). (Att							
3	$\overline{\Box}$			nospital service organi			ın sectio ı	n 170(b)(1)(A)(iii).	(Attach S	chedule H.)
4	$\overline{\Box}$			tion operated in conju							
•	_		_	ate:							
5		An organizat		the benefit of a collect			vned or o	perated I	by a gov	ernmental	unit described in
6	П			ernment or governme	ntal unit	described	d ın secti	on 170(b)(1)(A)(v)_	
7				receives a substantia							the general public
•				1)(A)(vi). (Complete P		ito ouppo		govorimi	Orital arii	. 0 0	o gonora: pasia
8	П			I in section 170(b)(1)		omplete	Part II.)				
9		_		receives: (1) more that				n contrib	utions, m	embershi	p fees, and gross
•	_	receipts fron	n activities relate	ed to its exempt funct	ions-su	bject to d	ertain ex	ceptions	, and (2)	no more	than 331/3 % of its
				ent income and unre						1 511 tax)	from businesses
		acquired by	the organization	after June 30, 1975.	See sect	tion 509(a)(2). (Co	mplete F	Part III.)		
10		An organizat	tion organized ar	nd operated exclusive	ely to test	for publi	ic safety.	See sec	tion 509	(a)(4). (see	e instructions)
11		An organizat	tion organized a	nd operated exclusiv	ely for th	ne benefi	t of, to p	erform t	he functi	ons of, o	r to carry out the
				olicly supported organ							
		509(a)(3). Ch	neck the box tha	t describes the type	of suppo	rting orga	anızatıon	and com	plete line	es 11e thr	ough 11h.
		a 🗌 Type				e III-Fund					Type III-Other
е		By checking	this box, I cert	ify that the organizat	tion is no	t control	led direc	tly or inc	lirectly b	y one or	more disqualified
				n managers and other	r than one	e or more	publicly	supporte	d organi	zations de	scribed in section
		509(a)(1) or	section 509(a)(2)	•							
f		If the organi	ization received	a written determinati	on from	the IRS t	that it is	a Type I	, Type II	, or Type	III supporting
			, check this box								
g		Since Augus following pe		the organization acce	epted any	gift or c	ontributio	on from a	ny of the	•	
				r indirectly controls, ending body of the supp				h person	s descri	bed in (ii)	Yes No
		(ii) A family	member of a pe	rson described in (i) a	above?						11g(ii)
		(iii) A 35% c	ontrolled entity	of a person described	d in (i) or	(II) above	?				11g(iii)
<u>h</u>		Provide the	following informa	ation about the organ	izations t	the organ	ization si	upports.			
(ī)		ne of supported (ii) EIN		(iii) Type of organization	(iv) is the organization (v) Did you notifing the organization				(vi) Is the organization in col (i) organized in the		(vii) Amount of support
orç		ganization	•	(described on lines 1-9 above or IRC section	governing document?		col (i) of your				заррогі
				(see instructions))	ļ			oort?		S?	
					Yes	No	Yes	No	Yes	No	
NON	ΙE										
					ļ				 		
							· · · · · · · · · · · · · · · · · · ·				
											-
										<u> </u>	

Par	Support Schedule for Org (Complete only if you check					and 1/0(b)(1	I)(A)(VI)
Sec	tion A. Public Support					 	
Ca	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 organization'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		\nearrow				
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, column (f)						
6	Public support. Subtract line 5 from line 4.	L_/		ļ	<u> </u>	<u> </u>	<u> </u>
	tion B. Total Support	· · · · · · · · · · · · · · · · · · ·	,			,	····
Ca	lendar 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						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10 .		L	<u> </u>	l		<u> </u>
12	Gross receipts from related activities, etc.	•	•			12	
13	First five years. If the Form 990 is for organization, check this box and stop he tion C. Computation of Public Su	ere	<u> </u>	nd, third, fourth			on 501(c)(3)
		<u> </u>		4 1 (0)		144	0/
14	Public support percentage for 2008 (line	_		i, column (i))		14	<u>%</u> %
15	Public support percentage from 2007 Sc						
16a	331/3 % support test—2008. If the organiand stop here. The organization qualifies	s as a publicly	supported orga	ınızatlon			▶ 🗀
	33% % support test—2007. If the organization quality box and stop here. The organization quality	alifies as a pub	licly supported	organization .			▶ □
	10%-facts-and-circumstances test — 20 more, and if the organization meets the "facts-and-circum organization meets the "facts-and-circum	facts-and-circunstances" test	mstances" test The organizatio	check this box on qualifies as a	and stop here publicly suppo	. Explain in Par orted organization	t IV how the on .▶ □
b 18	10%-facts-and-circumstances test—2007 more, and if the organization meets the "organization meets the "facts-and-circumstance" Private foundation. If the organization did	facts-and circur ances" test. The	nstances" test, organization qu	check this box ialifies as a publi	and stop here.	Explain in Par rganization	t IV how the ▶ □

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	ule A (Form 990 or 990-EZ) 2008 **Example 111	nizations De	scribed in Se	ection 509(a) t l.)	(2)		rage O
Sec	tion A. Public Support						
Ca	lendar 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	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	497197	493604	497138	613361	708087	28093
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						
6	Total. Add lines 1-5	497197	493604	497138	613361	708087	
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .						
	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						
	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						
Sec	tion B. Total Support		.1				
	llendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6	497197	493604	497138	613361	708087	
_	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С 11	Add lines 10a and 10b						
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.)						
14	First five years. If the Form 990 is for organization, check this box and stop	here		nd, third, fourth	, or fifth tax y	ear as a section	on 501(c)(3) ► □
	tion C. Computation of Public Su				(0)	45	
15 16	Public support percentage for 2008 (Nr. Public support percentage from 2007)	Sobedule A, Pa	art IV-A, line 27	e 13, odlumn (7g	(†))	15	<u>%</u>
_	tion D. Computation of Investmen			· ···			
17	Investment income percentage for 200	8 (line 10ბ.co	lumn (fl⁄ðívided	t by line 13 co	nlumn (fl)	17	%

19a 331/3 % support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 331/3 %, and line

17 is not more than 331/3 %, check this box and stop here. The organization qualifies as a publicly supported organization ightharpoonup

Investment income percentage from 2007 Schedule A Part IV-A, line 27h

33½% support tests—2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33½%, and line 18 is not more than 33½%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions >

Schedule A (Form 990 or 990-EZ) 2008

(Form 990 or 990-EZ) 2008 Supplemental Information. Complete the Part III. line 17a or 17b; or Part III, line 12	this part to provide the explanation required by Part II, lin 2. Provide any other additional information. (see instruction
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