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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 **Hurricane Boosters Inc** 3137503 Part I Reason for Public Charity Status (All organizations must complete this part.) (see instructions) The organization is not a private foundation because it is. (Please check only one organization.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.) A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives: (1) more than 331/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3 % of its support_from_gross investment income and unrelated business taxable income (less section_511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. c Type III-Functionally integrated **b** Type II e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disgualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Nο (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) 11g(i) and (iii) below, the governing body of the supported organization? 11g(ii) (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iu) Provide the following information about the organizations the organization supports (i) Name of supported (iii) Type of organization (iv) Is the organization (ii) EIN (v) Did you notify (vi) Is the (vii) Amount of (described on lines 1-9 the organization in in col (i) listed in your organization in col organization support above or IRC section governing document? col (i) of your (i) organized in the (see instructions)) Yes Yes Yes

(f) Total							
(f) Total							
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1							
							
ion 501(c)(3)							
<u>%</u>							
							
33½% support test – 2008. If the organization did not check the box on line 13, and line 14 is 33½% or more, check this box and stop here. The organization qualifies as a publicly supported organization							
.▶ [
10%-facts-and-circumstances test – 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.							
15 is 10% or it IV how the .▶ [nstructions ▶ [
1							

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.)

Continue A. Dublin Support								
Section 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.")	`			,	43.000	43,000	
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					8,176	. 8.176	
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					51 176	51.176	
6	Total. Add lines 1-5 .					31 176	31.170	
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					<u> </u>	- 2 -	
С	Add lines 7a and 7b							
8	Public support (Subtract line 7c from line 6)						51,176	
Sec	tion B. Total Support							
Ca	llendar year (or fiscal year beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total	
9	Amounts from line 6					51,176	51 176	
_	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources			-		2,553	2,553	
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
С	Add lines 10a and 10b					2,553	2,553	
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)						53,729	
14	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here							
Sec	tion C. Computation of Public Su							
15	Public support percentage for 2008 (lir				(f)) .	15	%	
16	Public support percentage from 2007	Schedule A, P	art IV-A, line 2			16	%	
Sec	tion D. Computation of Investmen	nt Income P	ercentage					
17	Investment income percentage for 200	8 (line 10c. co	olumn (f) divide	ed by line 13. o	column (f))	17	%	
18	investment income percentage from 20	•	* *	•	••	18	%	
	331/3 % support tests — 2008. If the org				and line 15 is i	more than 331/3	%, and line	
b	17 is not more than 33% %, check this box and stop here. The organization qualifies as a publicly supported organization ▶ □							
	line 18 is not more than 331/3 %, check this	s box and stop	here. The org	anızation qualifi	es as a publicly	supported orga	ınızation 🕨 🔲	
20	Private foundation. If the organization	aid not check	va DOX OH HINE	14, 13d, Ut 19	o, check this b	ועא מווע שבע וווש	uucuons 🚩 🗀	

Check here if the organization is not required to attach Schedule B. You must also sign the declaration at the end of this letter.

0425857589 Dec. 21, 2009 LTR 2695C 0 R 59-3137503 200906 67 00017496

HURRICANE BOOSTERS INC PO BOX 696 MOUNT DORA FL 32756

Under penalties of perjury, I declare that I have examined the return identified in this letter, including any accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. I understand that this declaration will become a permanent part of that return.

Signature of officer or trustee

Title