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Short Form
Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-1150

2008

Open to Public
Inspection

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

A For the 2008 calendar year, or tax year beginning OCT 1, 2008 and ending SEP 30, 2009

B Check if applicable Address change Name change Initial return Termination Amended return Application pending	C Name of organization OPTIMIST INTERNATIONAL WILMINGTON NC SUPPER CLUB	D Employer identification number 56-0860873
	Number and street (or P.O. box, if mail is not delivered to street address) 605 EASTWOOD ROAD	Room/suite
	City or town, state or country, and ZIP + 4 WILMINGTON, NC 28405	F Group Exemption Number ► 1334

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

G Accounting method: Cash Accrual
Other (specify) ►

I Website: ► WWW.SUPPEROPTIMIST.COM

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

J Organization type (check only one) 501(c)(4) (insert no.) 4947(a)(1) or 527

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

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$1,000,000 or more, file Form 990 instead of Form 990-EZ ► \$ 100,422.

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

1 Contributions, gifts, grants, and similar amounts received	1	1,179.
2 Program service revenue including government fees and contracts	2	65,739.
3 Membership dues and assessments	3	2,530.
4 Investment income	4	404.
5a Gross amount from sale of assets other than inventory	5a	
b Less: cost or other basis and sales expenses	5b	
c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach schedule)	5c	
6 Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here ► <input type="checkbox"/>		
a Gross revenue (not including \$ _____ of contributions reported on line 1)	6a	123.
b Less: direct expenses other than fundraising expenses	6b	500.
c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	<377. >
7a Gross sales of inventory, less returns and allowances	7a	30,447.
b Less: cost of goods sold	7b	23,530.
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	6,917.
8 Other revenue (describe ►)	8	
9 Total revenue Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	76,392.
10 Grants and similar amounts paid (attach schedule)	10	3,555.
11 Benefits paid to or for members	11	
12 Salaries, other compensation, and employee benefits	12	
13 Professional fees and other payments to independent contractors	13	250.
14 Occupancy, rent, utilities, and maintenance	14	2,628.
15 Printing, publications, postage, and shipping	15	84.
16 Other expenses (describe ►)	16	93,712.
17 Total expenses. Add lines 10 through 16	17	100,229.
18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	<23,837. >
19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	47,833.
20 Other changes in net assets or fund balances (attach explanation)	20	
21 Net assets or fund balances at end of year. Combine lines 18 through 20	21	23,996.

Part II Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II.)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	42,150. 22	18,710.
23 Land and buildings	5,177. 23	4,998.
24 Other assets (describe ► OTHER DEPRECIABLE ASSETS)	506. 24	288.
25 Total assets	47,833. 25	23,996.
26 Total liabilities (describe ►)	0. 26	0.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	47,833. 27	23,996.

10

Part V Other Information (Note the statement requirements in the instructions for Part VI.)

33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity
 34 Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes
 35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.

	Yes	No
33		X
34		X

a Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?

35a	X
35b	N/A

b If "Yes," has it filed a tax return on Form 990-T for this year?

36	X
37a	0.

36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Sch. N

37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ► 37a 0.

37b	X
38a	X

38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?

38b	N/A
39a	N/A

b If "Yes," complete Schedule L, Part II and enter the total amount involved

39b	N/A
40a	0.

39 Section 501(c)(7) organizations. Enter:

40b	X
40c	0.

a Initiation fees and capital contributions included on line 9

40d	0.
40e	X

b Gross receipts, included on line 9, for public use of club facilities

40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:

40f	N/A
41	NC

section 4911 ► N/A ; section 4912 ► N/A ; section 4955 ► N/A

b Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I

41b	X
42a	0.

c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958

42b	0.
42c	X

d Enter amount of tax on line 40c reimbursed by the organization

42d	0.
43	0.

e 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

43e	X
44	0.

41 List the states with which a copy of this return is filed. ► NC

42a The books are in care of ► BRAD VASS Telephone no. ► 910-791-5272

42a	910-791-5272
42b	ZIP + 4 ► 28405

42c	28405
43	0.

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 account)?

43b	X
44	0.

43c	X
45	0.

If "Yes," enter the name of the foreign country: ►

43d	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts
44	0.

c At any time during the calendar year, did the organization maintain an office outside of the U.S.?

44	X
45	0.

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

43e	N/A
44	0.

44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ

44	X
45	0.

45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ

45	X
Form 990-EZ (2008)	

Part VI **Section 501(c)(3) organizations only.** All section 501(c)(3) organizations must answer questions 46-49 and complete the tables for lines 50 and 51

		Yes	No
46	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	46	
47	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	47	
48	Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a	
	b If "Yes," was the related organization(s) a section 527 organization?		49b
50	Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."		

51 Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

N/A

Total number of other independent contractors each receiving over \$100,000

Sign Here	<p>Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge</p> <p>Brad Vass</p> <p>Signature of officer</p> <p>Brad Vass - Vice President</p> <p>Type or print name and title</p>	12/19/09 Date
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Paid Preparer's Use Only	Preparer's signature ► <i>Jennifer H. Presnell</i>	Date <i>12/4/09</i>	Check if self-employed ► <input type="checkbox"/>	Preparer's Identifying Number (See instr.)
	Firm's name (or yours if self-employed), address, and ZIP + 4 ► RSM MCGLADREY, INC. 300 NORTH 3RD STREET, FIFTH FLOOR WILMINGTON, NC 28401		EIN ► <input type="checkbox"/>	Phone ► <input type="checkbox"/> no. (910) 762-9623

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

► Yes No

FORM 990-EZ	OTHER EXPENSES	STATEMENT 1
DESCRIPTION		AMOUNT
BANK FEES		106.
OFFICE SUPPLIES		37.
TELEPHONE		1,305.
MEETING EXPENSES		2,182.
INSURANCE		1,859.
ADVERTISING		755.
MAINTENANCE & EQUIPMENT		36,424.
FEES & REGISTRATION EXPENSES		23,742.
BALLS		2,725.
UNIFORMS		12,745.
TOURNAMENT EXPENSES		3,431.
PROGRAM INSURANCE EXPENSE		4,342.
PLAQUES & TROPHIES		3,957.
MISCELLANEOUS EXPENSES		102.
TOTAL TO FORM 990-EZ, LINE 16		93,712.

FORM 990-EZ

INCOME AND COST OF GOODS SOLD
INCLUDED ON PART I, LINE 7A

STATEMENT 2

INCOME

1. GROSS RECEIPTS	30,447
2. RETURNS AND ALLOWANCES	
3. LINE 1 LESS LINE 2	30,447
4. COST OF GOODS SOLD (LINE 13)	23,530
5. GROSS PROFIT (LINE 3 LESS LINE 4)	6,917

COST OF GOODS SOLD

6. INVENTORY AT BEGINNING OF YEAR	
7. MERCHANDISE PURCHASED	
8. COST OF LABOR	
9. MATERIALS AND SUPPLIES	23,133
10. OTHER COSTS	397
11. ADD LINES 6 THROUGH 10	23,530
12. INVENTORY AT END OF YEAR	
13. COST OF GOODS SOLD (LINE 11 LESS LINE 12)	23,530

FORM 990-EZ	COST OF GOODS SOLD - OTHER COSTS	STATEMENT 3
DESCRIPTION		AMOUNT
DEPRECIATION		397.
TOTAL INCLUDED ON FORM 990-EZ, PART I, LINE 7B		397.

FORM 990-EZ

INFORMATION REGARDING TRANSFERS
ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS

STATEMENT 4

A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS,
DIRECTLY OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL
BENEFIT CONTRACT? [] YES [X] NO

B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS,
DIRECTLY OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT? . . [] YES [X] NO

990-EZ PG 2

STATEMENT 5

TO TEACH AREA YOUTH THE IMPORTANCE OF SPORTSMANSHIP, PHYSICAL FITNESS AND TEAMWORK.