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Form **990-EZ**Department of the Treasury
Internal Revenue Service**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)

▶ 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.

OMB No 1545-1150

2008**Open to Public
Inspection****A For the 2008 calendar year, or tax year beginning** **October 1**, 2008, and ending **September 30**, 20 **09****B** Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Termination
☐ Amended return
☐ Application pending

Please
use IRS
label or
print or
type.
See
Specific
Instruc-
tions.**C Name of organization****Optimist Club of Bossier City**

Number and street (or P O box if mail is not delivered to street address) Room/suite

PO Box 5411

City or town, state or country, and ZIP + 4

Bossier City, LA 71171-5411**D Employer identification number****72 : 6031435****E Telephone number****(318) 797-3953****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:** ▶**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) (**3**) ◀ (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** ▶ \$ **262422****Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See the instructions for Part I.)

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	1168
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	2151
	4	Investment income	4	927
	5a	Gross amount from sale of assets other than inventory	5a	
	5b	Less: cost or other basis and sales expenses	5b	
	5c	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 checked="" type="checkbox"/>		
	6a	Gross revenue (not including \$ 1168 of contributions reported on line 1)	6a	258177
Expenses	6b	Less: direct expenses other than fundraising expenses	6b	176245
	6c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	81932
	7a	Gross sales of inventory, less returns and allowances	7a	
	7b	Less: cost of goods sold	7b	
	7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
	8	Other revenue (describe ▶)	8	
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	86177
	10	Grants and similar amounts paid (attach schedule)	10	76508
	11	Benefits paid to or for members	11	
Net Assets	12	Salaries, other compensation, and employee benefits	12	6724
	13	Professional fees and other payments to independent contractors	13	1200
	14	Occupancy, rent, utilities, and maintenance	14	
	15	Printing, publications, postage, and shipping	15	319
	16	Other expenses (describe ▶ See attached schedule)	16	5901
	17	Total expenses. Add lines 10 through 16	17	90651
	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-4474
	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	88687
	20	Other changes in net assets or fund balances (attach explanation)	20	-1380
21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	82833	

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	88687	22 82833
23 Land and buildings		23
24 Other assets (describe ▶)		24
25 Total assets	88687	25 82833
26 Total liabilities (describe ▶)		26
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	88687	27 82833

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

Cat No 106421

Form 990-EZ (2008)

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SCANNED JAN 04 2010

Expenses

(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, optional for others)

28	Academic Grants to teachers (\$25,842) Membership dues and registration for youth clubs (\$3,298) Oratorical & Essay Contests (\$1,417) (Grants \$ 30557) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	30557
29	Teacher Appreciation Program (\$387) Youth programs (\$1,170) Scholarships \$1,500 (Grants \$ 3057) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	3057
30	Donations to organizations (\$41,740) Donations to individuals (\$1,154) (Grants \$ 42894) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	42894
31	Other program services (attach schedule) (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	
32	Total program service expenses (add lines 28a through 31a) <input type="checkbox"/>	32	76508

Instructions for Part IV.)

[illegible]

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

	Yes	No
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.		
a Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?		✓
b If "Yes," has it filed a tax return on Form 990-T for this year?		
36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N		✓
37a Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a		
b Did the organization file Form 1120-POL for this year?		✓
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?		✓
b If "Yes," complete Schedule L, Part II and enter the total amount involved		
38b		
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9		
39a		
b Gross receipts, included on line 9, for public use of club facilities		
39b		
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ 0 ; section 4912 ▶ 0 , section 4955 ▶ 00		
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		✓
c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶		
d Enter amount of tax on line 40c reimbursed by the organization ▶		
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.		✓
41 List the states with which a copy of this return is filed. ▶		
42a The books are in care of ▶ <u>Philipp R. Blaufuss</u> Telephone no ▶ (<u>318</u>) <u>797-3953</u> Located at ▶ <u>521 McIntosh Dr., Shreveport, LA</u> ZIP + 4 ▶ <u>71115-3060</u>		
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)? 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 and Financial Accounts .		✓
c At any time during the calendar year, did the organization maintain an office outside of the U.S.? 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 ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43		
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ		✓
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		✓

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.

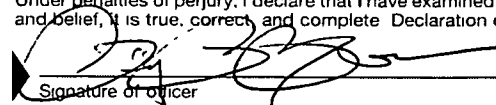
- | | Yes | No |
|--|-----|-------------------------------------|
| 46 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I | | <input checked="" type="checkbox"/> |
| 47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II | | <input checked="" type="checkbox"/> |
| 48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | | <input checked="" type="checkbox"/> |
| 49a Did the organization make any transfers to an exempt non-charitable related organization? | | <input checked="" type="checkbox"/> |
| 49b If "Yes," was the related organization(s) a section 527 organization? | | <input checked="" type="checkbox"/> |
- 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."

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				
Total number of other employees paid over \$100,000 ▶				

- 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."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
None		
Total number of other independent contractors each receiving over \$100,000 . . . ▶		

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.

Sign Here  12/1/09
 Signature of officer Date

Philipp R. Blaufuss - Secretary-Treasurer
 Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶	Date	Check if self-employed <input type="checkbox"/>	Preparer's Identifying Number (See instructions)
Firm's name (or yours if self-employed), address, and ZIP + 4 ▶	EIN ▶	Phone no ▶ ()	

May the IRS discuss this return with the preparer shown above? See instructions . . . ▶ ☐ Yes ☐ No

ATTACHMENT TO IRS FORM 990EZ
OPTIMIST CLUB OF BOSSIER CITY 72-6031435

PART 1, Line 16

Membership dues paid to affiliates	\$3,892	
Office Supplies	\$511	
Meals for guest speakers	\$719	
Club member awards	\$669	
Membership recruitment expenses	\$109	
TOTAL		\$5,901

PART 1, Line 20

Additional expense following closeout of last years IRS Form 990 (\$1,380) (Program Expense)

PART 3, Line 30

Donations to Organizations:

Air Force Sergeants Association	\$100	
Airline High School	\$95	
AL-LA-MS District Optimist	\$100	
Alliance For Education	\$200	
Altrusa Club	\$1,000	
Bossier Arts Council	\$150	
Bossier Elementary	\$2,500	
Bossier KIDS	\$900	
Bossier Learning Center	\$2,600	
Camp FROG	\$375	
Louisiana Roundballers	\$500	
LSUS Weightlifting Foundation	\$6,800	
NW Louisiana Foodbank	\$250	
One Great River	\$3,550	
Optimist Int'l Foundation	\$750	
Optimist Leukemia Foundation	\$418	
Providence House	\$9,000	
Rainbow Camp	\$250	
Red River Marines	\$3,300	
Sci-Port Discovery Center	\$300	
Shreveport-Bossier Rescue	\$452	
The Strand	\$5,000	
Young Authors Program	\$150	
SUB-TOTAL		\$41,740

Donations to Individuals:

A needy local family	\$154	
A need family from Homer, LA	\$1,000	
SUB-TOTAL		\$1,154

TOTAL		\$42,894
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