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Department of the Treasury

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 tung benefit trust or private foundation)

Sponsoning 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 \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form

OMB No 1545-1150 2009

Open to Public Inspection

	emai Revenue Service	The organization may have to use a copy of	this return to satisfy state reporting re	equirements		
		r year, or tax year beginning	, 2009, and er	nding	_	, 20
В	Check if applicable	C Name of organization		D Employ	er ident	ification number
F=7	Address change	Please PENINSULA OPTIMIST CLUB		93-	60224	48
\equiv	Name change	use IRS label or Number and street (or P O box, if mail is not deli	vered to street address) Ro	om/suite E Telepho	one num	ber
	Initial return	print or type.				
一三		See PO BOX 83324				
片	Terminated	Specific Instruc- City or town, state or country, and ZIP + 4		F Group I	Exemption	on
님	Amended return	tions. PORTLAND, OR 97283			r · · ·•	
ليا	Application pending		table trusts must attach	G Accounting Me		X Cash Accrual
	• Section 501(c)(3)	organizations and 4947(a)(1) nonexempt charit		•		Vicasii - Vocidai
		a completed Schedule A (Form 990 or 990-E	<u> </u>	Other (specify)		rangation is not
				H Check ► X		rganization is not
	Website:			- '		edule B (Form 990,
		check only one) - $[X]$ 501(c) (4) \blacktriangleleft (insert r				
		rganization is not a section 509(a)(3) supporting		ceipts are normally not i	more tha	n \$25,000 A return
		the organization chooses to file a return, be sure				
L		7b, to line 9 to determine gross receipts, if \$500			▶ \$	86,741
P	art I Revenu	e, Expenses, and Changes in Net A	ssets or Fund Balanc	es (See the instruction	ons for P	art I)
	1 Contribution	is, gifts, grants, and similar amounts received			1	
	2 Program ser	rvice revenue including government fees and co	intracts		2	
					3	1,085
	4 Investment				4	3,141
	5a Gross amou	int from sale of assets other than inventory •	5a		*	
تہے		or other basis and sales expenses · · · · ·				
2010 2	a Coun or floor	s) from sale of assets other than inventory (Subt			5c	
	•	•		· ()		
မေ v	Special events	and activities (complete applicable parts of Schedule G). If an	f contributions	ck liele		
₩ ñ	· I		6a			
20 "		•	<u> </u>			
FEB		expenses other than fundraising expenses -		 .		
		or (loss) from special events and activities (Sub	1 1		6c	
Щ		of inventory, less returns and allowances		82,333		
<u>z</u>		of goods sold		48,812	ļ	
SCANNED	c Gross profit	or (loss) from sales of inventory (Subtract line 7	b from line 7a) · · · · ·	• • • • • • • • •	7c	33,521
Q		ue (describe STM141)	8	182
<i>G</i> 5 _	9 Total reven	ue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 • •		<u> </u>	9	37,929
	10 Grants and	sımılar amounts paid (attach schedule)			10	23,551
E	1 Bernelits Gal	to princip prembers			11	
x	12 Salaries, oth	her compensation, and employee benefits - •	• • • • • • • • • • • •		12	
p e	Professiona	I fees and other payments to independent control rent, attlities, and maintenance	actors		13	11,550
n	Occupancy,	rent, utilities, and maintenance			14	1,139
s e	5 Printing put	blications, postage, and shipping			15	
s		nses (destribe ► STM130)	16	3,639
	17 Total expen	ises. Add lines 10 through 16 · · · · · ·			17	39,879
_		deficit) for the year (Subtract line 17 from line 9)			18	(1,950
	A)	or fund balances at beginning of year (from line				
N e		figure reported on prior year's return) · · · ·			19	75,556
ť		ges in net assets or fund balances (attach explai			20	702
	_					74,308
_		or fund balances at end of year Combine lines 1			21	
LF	Part II Balanc	e Sheets. If Total assets on line 25, column	(B) are \$1,250,000 or more,	Tile Form 990 instead of	Form 9	10-EZ
		(See the instructions for Part II)		(A) Beginning of ye		(B) End of year
22	! Cash, savings, an	d investments • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	72,	856 22	71,608
23	-	s		2,	700 23	2,700
24	Other assets (des	cribe •	<u> </u>		24	
25	Total assets • •	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	. 75,	556 25	74,308
26	Total liabilities (d	escribe >)	26	
27	Net assets or fund	d balances (line 27 of column (B) must agree w	ith line 21)	. 75,	556 27	74,308

Form 990 EZ (2009) PENINSULA OPTIMIST CI	LUB	_	93−€	502244	18 Page 2
Part III Statement of Program Service Accord	mplishments (See the	instructions for Part III)		Expenses
What is the organization's primary exempt purpose? YOUTH A	CTIVITIES		•		ired for section
Describe what was achieved in carrying out the organization's e)(3) and 501(c)(4) Izations and section			
manner, describe the services provided, the number of persons		a)(1) trusts, optional			
each program title	for oth				
28 MONETARY GRANTS TO YOUTH SPORTING ACTIVI	TIES				
AND VARIOUS COMMUNITY CHARITIES				j j	
					
(Grants \$ 19,851) If this amo	unt includes foreign grants	check here · · · ·	• • • • •	28a	0
29 VOCATIONAL SCHOLARSHIPS	ant molades folloging and	, direct ricio		1	<u>_</u>
	 -			1	
(Grants \$ 3,700) If this amo	unt includes foreign grants	check here		29a	0
30	unt moludes foreign grants	, CHECK HEIE		234	
					
				1	
		- Land Barrier			
	unt includes foreign grants	, cneck nere · · · ·	· · · · · P	30a	
31 Other program services (attach schedule) · · · · · ·				1	
	unt includes foreign grants			31a	
32 Total program service expenses (add lines 28a through 31	<u> </u>			32	0
Part IV List of Officers, Directors, Trustees, and Key En					
(a) Name and address	(b) Title and average hours per week	(c) Compensation (If not paid,	(d) Contributions employee benefit pla		(e) Expense account and
	devoted to position	enter -0-)	deferred compensa		other allowances
WILLIAM VAN NOSTRAN	PRESIDENT			l l	
PORTLAND PORTLAND OR, 97203	0	0		q	0
JOHN SULLIVAN	TREAS				
PORTLAND PORTLAND OR, 97203	0	0		q	0
GEORGE GALATI	SEC				
PORTLAND PORTLAND OR, 97203	0	0		þ	0
	-	<u> </u>			
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Par	t V Other Information (Note the statement requirements in the instructions for Part V)		Vac	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed		Yes	No
••	description of each activity ••••••••••••••••••••••••••••••••••••	33		х
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of			
•	the changes · · · · · · · · · · · · · · · · · · ·	34		Х
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 why the organization did not report the income on Form 990-T			
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section			70 80 00
	6033(e) notice, reporting, and proxy tax requirements?	35a		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b		
36	Did the organization undergo a liquidation, dissolution, termination, or substantial contraction during the			
	year? If "Yes," complete applicable parts of Schedule N	36		Х
37 a	Enter amount of political expenditures, direct or indirect, as described in the instructions • • • • ▶ 37a			
	Did the organization file Form 1120-POL for this year?	37b	- 1	x '
	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 outstanding at the end of the period covered by this return?	38a		х
b	If "Yes," complete Schedule L, Part II and enter the total amount involved			
39	Section 501(c)(7) organizations Enter			l
	Initiation fees and capital contributions included on line 9			
ь	Gross receipts, included on line 9, for public use of club facilities			
40 a				i
	section 4911 ▶ , section 4912 ▶ , section 4955 ▶			
ь	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit			
	transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified	-	, ,	,
	person in a prior year, and that the transaction has not been reported on any of the organization's prior			l
	Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		Х
С	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on			
	organization managers or disqualified persons during the year under sections 4912,			*
	4955, and 4958 · · · · · · · · · · · · · · · · · · ·			
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c		İ	
	reimbursed by the organization • • • • • • • • • • • • • • • • • • •		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			
42 a	The organization's books are in care of ▶ ST JOHNS TAX SERVICE Telephone no ▶ 503-2	36-1	561	
	Located at ▶ 7537 N RICHMOND PORTLAND, OR ZIP+4 ▶ 9720	3		
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		Х
	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			ĺ
	and Financial Accounts.	_	_	
С	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c		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			
			Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of	-		
	Form 990-EZ	44		X
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
	F.		A F7 /	SOON

d Total	number of other independ	ent contractors each receiving over \$100	0,000 • •		
Sign Here	and belief, it is true, corre	y I declare that I have examined this return including the Declaration of propagatory to the return the Lam K. Van Nost	an officer) is based on all infom	nation of which preparer	e best of my knowledge has any knowledge 25 - 2010
Paid	Preparer's signature	h 7. Auk	Date 01-19-2010	Check if self-employed	Preparer's Identifying No (See inst) Popo 13345
Preparer's		ST JOHNS TAX SERVICE		EIN ►	930940626
Use Only	Firm's name (or yours if self-employed),	7537 N RICHMOND AVENUE			
	address, and ZIP + 4	PORTLAND, OR 97203		Phone no	503-286-1561
May the IRS	discuss this return with th	e preparer shown above? See instruction	ons · · · · · ·		· · · · ▶ [X] Yes [No
		· · · · · · · · · · · · · · · · · · ·	FEA		Form 990-EZ (2009)

Name(s) as shown on ret		upporting Staten	nents	2009 FEIN
	FORM 990EZ GRANTS AND SIMILAR	, PART I, LINE AMOUNTS PAID S		STATEMENT #122
ACTIVITY GRANTEE	MONETARY TO YOUTH SPORTING	G ACTIVITY	<u>AMOUNT</u> 19,851	RELATIONSHIP
ADDRESS	PORTLAND	OR		
ACTIVITY GRANTEE ADDRESS	VOCATIONAL SCHOLARSHIPS		3,700	
		TOTAL	23,551	
	OTHER EXPERING EXPENSE NG EXPENSE PENSE AND POSTAGE UNCHES	, PART I, LINE NSES SCHEDULE 2		
DESCRIPTIO TELEPHONE TOTAL	OTHER REVE	, PART I, LINE NUES SCHEDULE 2 -		

Federal Supporting S	statements	2009 FEIN
FORM 990EZ, PART I, I OTHER CHANGES IN NET ASSET	LINE 20 S SCHEDULE	
DESCRIPTION UNRECOGNIZED GAIN ON INVESTMENTS TOTAL	<u>AMOUNT</u> 702	
·		