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SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Department of the Treasury

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	the organization optimist]	[nterr	ational of L	BI						r identifica D 6 4 0 3	stion mumber G
				s (All organizations	must o	omple	ete this	part.)			
	ganization is n	ot a priva	te foundation becaus	e it is: (For lines 1 throug	th 11, c	heck on	ly one bo)x.)			
1				ciation of churches descr		section	170(Ъ)(1	XAXI)			
2	A school de	escribed in	section 170(b)(1)(4	(Attach Schedule E.	.)						
3	_	•	•	ce organization described							
4				in conjunction with a ho	spital de	escribed	in secti	on 170(KA)(T)(d	(III). Ent	er the hospilal's
5	name, city, An organiza	ation oper		of a college or university	owned o	r opera	ted by a	governr	nental u	nit desc	ribed in section
6				overnmental unit describe	ed in se	ction 17	MAYIY	W			
7	An organiza	ation that 170(b)(1)(/	normally receives a A)(vi). (Complete Pr	substantial part of its sup art II.)	port fro	m a gov	emment	al unit o	or from t	he gene	eral public described
8				70(b)(1)(A)(vi). (Complete							
9	ment	income a	normally receives: (I to its exempt functi nd unrelated busines action 509(a)(2). (Co	more than 33-1/3% of ions — subject to certain is taxable income (less somplete Part III.)	its supp exception ection 5	ort from ins, and 11 tax)	contribut (2) no no from bus	itions, n nore tha inesses	nembers in 33-1/3 acquire	ship fees 3% of its of by the	s, and gross receipts s support from gross e organization after
10	An organiza	aton orga	nized and operated a	exclusively to test for pub	lic safet	y. See s	section 5	i09(a)(4))		
11	more public	ly suppor	ted organizatio⊓s de	exclusively for the benefit scribed in section 509(a)(tion and complete lines 1	(1) or se	iction 50	09(a)(2).	ions of, See se	or carry ction 50	out the 19(a)(3).	purposes of one or Check the box that
	_ а ∏туре (ь 🏻 Туре ІІ	c 🗌 Type III		-	-			d []	Type III - Other
•	By checking other than f section 509	oundation	I certify that the org managers and other	anization is not controlled than one or more public	d directl ly supp	y or ind orted or	irectly by ganizatio	one or ons desc	more d cribed in	squalifi section	ed persons 1509(a)(1) or
f	If the organ	ization re	ceived a written dete	rmination from the IRS tr	nat is a	Type I,	Type II o	r Type I	ii suppo	rting or	ganization,
g	Since Augu	st 17, 200	6, has the organizat	ion accepted any gift or	contribu	tion from	n any of	the foll	owing p	ersons?	
							_				Yes No
	(f) A pers	son who d	lirectly or indirectly of	controls, either alone or to	gether	with per	sons des	scribed	ın (iı) ar	d (iii)	11.0
		_	erning body of the su er of a person descr	pported organization?			• • • • • • • • • • • • • • • • • • •				119(1)
				described in (i) or (ii) ab							11 g (ii)
ħ			·	e supported organization							
	() Name of sur	pported	(I) EIN	(IB) Type of organization (described on lines 1-9	dv	ls the	(v) Did y	ou natify existing in	(vi)	s the	(vil) Amount of support
	organizati	ion	-	(described on lines 1-9 above or IRC section (see instructions))	column (ration in D listed in Merning ment?	the organ column your su	n (D) of i	organization in column (I) organized in the U.S.?		• •
					Yes	No	Yes	No	Yes	No	
N.											
3)											
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<u>)</u>			Special specia		l .		1 ,				
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_			11. 13. 13. 15. 15. 15. 15. 15. 15. 15. 15. 15. 15								
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	For Paperwork	Reduction	Act Notice, see the	Instructions for Form 9	90 or 99	0-EZ.			chedyl R	A (For	m 990 or 990-EZ) 2010 : IVED
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	For Paperwork	Reduction	Act Notice, see the	Instructions for Form 9	90 or 99	0-EZ.					
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	For Paperwork	Reduction	Act Notice, see the	Instructions for Form 9	90 or 99	0-EZ.					m 990 or 990-EZ 2010 :IVED SS 5 2011 SS
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	For Paperwork	Reduction	Act Notice, see the	Instructions for Form 9		0-EZ.			D	EC 0	

	edule A (Form 990 or 990-EZ) 201		ist Intern	ational of	LBI	22-606403	9 Page 2
	Support Schedule for (Complete only if you checked organization fails to qualify to						
Sec	ction A. Public Support	inder the tests list	ed below, please	complete Part III.) 		
Cak	endar year (or fiscal year inning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include unusual grants.)						
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf		-				
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 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						
<u>Sec</u>	ction B. Total Support						
Cak begi	endar year (or fiscal year Inning in) >	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from smilar 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.)						
	Total support. Add lines 7 through 10						
12	Gross receipts from related activi	itles, etc (see insti	ructions)			12	
	First five years. If the Form 990 organization, check this box and	stop here	· · · · · · · · · · · · · · · · · · ·	d, third, fourth, or	fifth tax year as a	section 501(c)(3)	
Sec							
14	Public support percentage for 20	10 (line 6, column	(f) divided by line	e 11, column (f)).			- %
15	Public support percentage from 2	2009 Schedule A, I	Part II, line 14 .	· • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	<u>15</u>	- %
16:	a 33-1/3% support test — 2010. If t and stop here. The organization	he organization di qualifies as a publ	d not check the b licly supported or	ox on line 13, and ganization	the line 14 is 33-1	73% or more, che	ock this box
١	b 33-1/3% support test — 2009. If it and stop here. The organization of	he organization di qualifies as a publ	d not check a box icly supported or	on line 13 or 16a panization	, and line 15 is 33	-1/3% or more, cl	neck this box
17	a 10%-facts-and-circumstances to or more, and if the organization r the organization meets the facts	neets the Tacts-ar	id-circumstances	' test, check this b	ox and stop here.	Explain in Part IV	/ how
	o 10%-facts-and-circumstances te or more, and if the organization r organization meets the facts-and	i-circumstances t	est. The organiza	ition qualifies as a	publicly supported	d organization	,,,,,,,,,, , - [_]
18 188	Private foundation. If the organiz	ation did not chec	k a box on line 1:	3, 16a, 16b, 17a, (uctions ▶ ☐ 90 or 990-EZ) 2010

Schedule A (Form 990 or 990-EZ) 2010 Soroptimist International of LBI

Support Schedule for Organizations Described in Section 509(a)(2)

22-6064039

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(Complete only if you checked the box on line 9 of Part I or If the organization failed to qualify under Part II. If the organization fails

	to qualify under the tests lis	sted below, please	complete Part II.)	e organization la	ned to quality unde	er mart II. II the org	anization tails			
Sec	tion A. Public Support									
	ndar year (or fiscal yr beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total			
	Gifts, grants, contributions				157					
	and membership fees received. (Do not include	<u> </u>			[*** **			
•	any 'unusual grants.')	5,704.	6,197.	7,086.	8,154.	10,472.	37,613.			
4	Gross receipts from admis- sions, merchandise sold or services performed, or facilities furnished in any activity that is									
•	related to the organization's tax-exempt purpose	17,121.	21,087.	17,483.	23,939.	24,734.	104,364.			
5	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 through 5	22,825.	27,284.	24,569.	32,093.	35,206.	141,977.			
	a Amounts included on lines 1, 2, and 3 received from disqualified persons									
1	b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year									
	c Add lines 7a and 7b									
8	Public support (Subtract line 7c from line 6.)						141,977.			
Sec	tion B. Total Support	a grid ti	7. St. Britis Constituted and In	lande bla er li an blebe parken af ber d	dimensional district des	film of the first service of the see that I	212/2//			
	ndar year (or fiscal yr beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total			
_	Amounts from line 6	22,825.	27,284.	24,569.	32,093.	35,206.	141,977.			
10	B Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from	,								
	similar sourcesb Unrelated business taxable	21.	9.	247.	28.	10.	315.			
•	income (less section 511 taxes) from businesses acquired after June 30, 1975									
	c Add lines 10a and 10b	21.	9.	247.	28.	10.	315.			
11	Net income from unrelated business activates not included in line 10b, whether or not the business is regularly carried on									
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)			·						
13	Total support. (Add hs 9, 10c, 11, and 12.)						142,292.			
14	First five years. If the Form 990 a organization, check this box and	s for the organizati	on's first, second,	third, fourth, or f	ifth tax year as a s	ection 501(c)(3)				
	tion C. Computation of Pul									
	Public support percentage for 201						99.78 %			
16	Public support percentage from 2	009 Schedule A, P	art III, line 15				99.70 %			
Sec	tion D. Computation of Inv	estment Incom	e Percentage							
	17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f)									
	18 Investment income percentage from 2009 Schedule A, Part III, line 17									
19 a	19a 33-1/3% support tests — 2010. If the organization did not check the box on line 14, and tine 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization									
	Title 19 is not more than 33-1/3%,	, cneck this box and	o stop nere. Ine o	rganization qualil	ites as a publicly s	upported organizat	ion 🏲 📗			
BAA	Private foundation. If the organiz	ation did not check			CK this box and see	instructions	<u>岛亞州</u> 亞卫王			
DAA			TEEA0403 I	12/29/10	Sch	eaule A (Form 990	or 990-EZ).2010			

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SOROPTIMIST INTERNATIONAL OF LBI PO BOX 202 SHIP BOTTOM NJ 08008



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DECLARATION

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