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Form **990-EZ**

Department of the Treasury Infernal Revenue Service

2009

OMB No 1545-1150

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 \$500,000 and total assets less than \$1,250,000 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 tax year beginning 07/01/09, and ending 06/30/10

Open to Public Inspection

| Α | For the 2009 cale | n <u>dar year</u> | or tax year beginning 07/01/09, and e | nding 06/30/ | 10 | | |
|----------------|---|----------------------|---|------------------------|-------------------------------|-----------------------|--|
| В | B Check if applicable Please C Name of organization use IRS | | | | | | loyer identification number |
| | Address change label or ROSEBURG INDIAN BOOSTERS CLUB | | | | | | -0853780 |
| | Initial return | print or type. | Number and street (or P O box, if mail is not delivered to | street address) | Room/suite | E Tele | phone number |
| | Termination | See | PO BOX 2084 | • | | 54: | 1-672-9981 |
| H | Amended return | Specific Instruc- | City or town, state or country, and ZIP + 4 | | | F Grou | ip Exemption |
| | Application pending | tions. | | R 97470-044 | 4 | Num | ber |
| L | Section 501(c) | (3) organ | izations and 4947(a)(1) nonexempt charitable true | sts must attach | G Accounting | method | X Cash Accrual |
| | | асо | mpleted Schedule A (Form 990 or 990-EZ). | | Other (specify) | <u> </u> | |
| ī | Website: ▶ N | /A | | | H Check ▶ | X If the | organization is not |
| <u>J</u> _ | Tax-exempt status | check only o | ne) — X 501(c) (3) ◀ (insert no) 49 | 47(a)(1) or 527 | required to a 990-EZ, or 9 | ettach Sch 190-PF) | organization is not redule B (Form 990, |
| K | Check ► | | rganization is not a section 509(a)(3) supporting org | | | | more than \$25,000 A |
| | | | eturn is not required, but if the organization chooses | | | | 56,802 |
| 뜴 | Add lines 5b, 6b, and | | 9 to determine gross receipts, if \$500,000 or more, file Form kpenses, and Changes in Net Assets or | | | etions | |
| C.P | 4 Contribution | | | Fullu Dalatices | (See the many | 1 | 24,360 |
| က | 1 | - | ints, and similar amounts received renue including government fees and contracts | | | 2 | 24,300 |
| 67 | _ | | nd assessments | SEE STAT | темент 1 | 3 | 13,385 |
| EB | 4 Investmen | • | nu assessinents | 022 023 | | 4 | 13,303 |
| 11 | | | sale of assets other than inventory | 5a | | | |
| \Box | | | pasis and sales expenses | 5b | *** | 1 1 | |
| Ž | | | e of assets other than inventory (Subtract line 5b from line 5a | | | 5c | |
| SCANNED evenue | | • | ivities (complete applicable parts of Schedule G) If any amo | | k here | | |
| 35 | | | including \$ 17,294 of contribu | | اا | | |
| € €0 | reported o | | | 6a | 4,77 | | |
| _ | b Less direc | ct expens | es other than fundraising expenses | 6b | 4,02 | 4 | |
| | c Net incom | e or (loss |) from special events and activities (Subtract line 6b | from line 6a) | | 6c | 746 |
| | 7a Gross sale | es of inve | ntory, less returns and allowances | 7a | | | |
| | b Less: cost | of goods | sold . | 7b | | _ | |
| | c Gross pro | fit or (loss |) from sales of inventory (Subtract line 7b from line | 7a) | | 7c | |
| | 8 Other reve | nue (des | cribe SEE STATEMENT 2 | |) | 8 | 14,287 |
| | | | lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 | | | 9 | 52,778 |
| | 10 Stants and | i şımılar a | Y 1' ' | M 990-EZ PART 1 | 11 | 10 | 34,784 |
| | | | or members | | | 11 | |
| es | 11 () 1 | | pensန်န်းပြn, and employee benefits | | | 12 | |
| penses | 13 Profession | al fees a | nd other payments to independent contractors | | | 13 | <u>570</u> |
| EXP | Occupano | y, rent, ut | ılıtıes⊈and maintenance s∷postage, and shipping | | | 14 | |
| w | 11 (11 21) [| 1/1 1/1 | I 1 | | , | 15 | 10,631 |
| | 16 COUBLE AND | | | | <u>\</u> | 16 | 45,985 |
| | | | ld lines 10 through 16 or the year (Subtract line 17 from line 9) | · | | 18 | 6,793 |
| sts | • | | palances at beginning of year (from line 27, column | (A)) (must agree with | | " | 0,755 |
| SSE | | | eported on prior year's return) | (rty) (mast agree mail | | 19 | 29,819 |
| Net Assets | · · | - | et assets or fund balances (attach explanation) | | | 20 | |
| Ž | | - | palances at end of year Combine lines 18 through 2 | 0 | • | 21 | 36,612 |
| ₽ | | | eets. If Total assets on line 25, column (B) are \$1,3 | | orm 990 instead o | f Form 9 | |
| | | | (See the instructions for Part II) | |) Beginning of year | | (B) End of year |
| 22 | Cash, savings, and | d investm | · | | 29,81 | 9 22 | 36,612 |
| | Land and buildings | | | | | 23 | |
| 24 | Other assets (des | cribe 🕨 | |) | | 24 | |
| 25 | Total assets | | | | 29,81 | 9 25 | 36,612 |
| 26 | Total liabilities (de | escribe 🕨 | · |) | | 0 26 | 0 |
| | | | es (line 27 of column (B) must agree with line 21) | | 29,81 | 9 27 | 36,612 |
| F* | Drivoov Act and E | | Paduction Act Notice, see the separate instruct | ione | | | 50m 990-F7 (2000) |

DAA

| Form 990-EZ (2009) ROSEBURG IN | DIAN | BOOSTERS | CLUE | 93 | 3-0853780 | | | Page 2 |
|---|---------------|--|-------------|--------------------------------------|------------------|---------------|---------------------------------------|--------------------------|
| Part III Statement of Program S | Service | Accomplish | nents (S | See the instruc | tions for Part I | 11.) | E | xpenses |
| What is the organization's primary exempt purpo | ose? | <u> </u> | | - | | | (Require | d for section |
| TO PROVIDE "EXTRAS" NEEDED BY ROSE | BURG H | IGH SCHOOL. | | | | | 501(c)(3) | and 501(c)(4) |
| Describe what was achieved in carrying out the | | | | | | | organizat | tions and section |
| manner, describe the services provided, the num | mber of p | ersons benefited, | or other r | elevant information | n for | ļ | 4947(a)(1 | 1) trusts; optional |
| each program title. | | | | | | | for others | s) |
| 28 SCHOLARSHIPS TO 14 COLLEGE BOUN | D STUD | ENTS | | • | | | | |
| | | | | | | | | |
| | | | | | | , [| | |
| (Grants \$ 8,000) If this | | | | eck here | <u> </u> | 4 | | 8,000 |
| 29 FINANCIAL GRANTS FOR SPECIAL PR | | | • | | | i | | |
| SCHOOL (MANY STUDENTS @ ROSEBUR | RG HIGH | SCHOOL BENEF | IT). | | • • | ľ | Ï | |
| (0 2F 794) KIL | | | | | | ra l | 20- | 25 704 |
| (Grants \$ 25,784) If this 30 DONATION TO SENIOR CLASS GRADUA | | | grants, cn | eck nere | | | 29a | 25,784 |
| • | ATTON P. | ARTY | | | | · i | | |
| (APPROXIMATELY 400 SENIORS) | | • • | | | • | ł | | |
| (Grants \$ 1,000) If this | s amount | Lincludes foreign | orants ch | eck here | | \Box | 30a | 1,000 |
| 31 Other program services (attach schedule) | <u>amount</u> | inioidado foreign | granto, on | 50.1.110.10 | | | , | |
| · · · · · · · · · · · · · · · · · · · | s amount | ıncludes foreign | orants, ch | eck here | · • | \Box | 31a | |
| 32 Total program service expenses (add lines | | | | | | > | 32 | 34,784 |
| Part IV List of Officers, Directors, True | | | s. List ead | h one even if not | compensated (Se | e the | instructions ' | |
| | | | | (b) Title and average hours per week | | (d) | Contributions to yee benefit plans | (e) Expense |
| (a) Name and ac | agress | | | devoted to position | enter -0) | | red compensation | |
| GREG MARLAR | RO | SEBURG | | PRESIDENT | | Į | | |
| 2330 NW CHAMBRES DR | OR | 97471 | | 2.00 | <u> </u> 0 | ـــــــ | | 0 |
| JANICE WIMBERLY | | SEBURG . | | VICE PRES | 1 | Ì | | |
| 770 DARLEY DR | | 97471 | | 3.50 | 0 | | | 0 |
| WETONA HYKOTY | • | ESBURG . | | SECRETARY | | | | |
| PO BOX 1193 | | 97470 | | 1.00 | 0 | | | 0 0 |
| BARBARA JOHNSON | | NCHESTER | | TREASURER | | | | |
| PO BOX 334 | OR | 97495 | | 2.00 | 0 | | | 0 |
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| Pear t | Form | 990-EZ (2009) ROSEBURG INDIAN BOOSTERS CLUB 93-0853780 | | | Page 3 |
|---|------|--|-------------|--------------|----------|
| 33 Del the organization engage in any activity not previously reported to the IRS? If "Yes," attached a destinated of each activity. 34 Were any changes made to the organizing or governing documents? If "Yes," attached a conformed copy of the changes. 35 If the organization had income from business activities, such as those reported on lines 2, 5a, and 7a (arrong others), but not reported on From 950-17 and the total programs of the comment of the programs of th | | | | | |
| description of each activity Were any changes made to the organization or governing documents? If "Yes," attached a conformed copy of the changes If the organization had income from business activities, such as these reported on lines 2, 6s, and 7s (among others), but not reported on From 591, fasts à sistemant explaining with the organization and not report the income on Form 590-T a but the organization have unrelated business gloss income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax recurrements? but the organization undergo a disqualation, dissolution, termination, or significant disposition of not assets from the year? If "Yes," complete applicable parts of Schedule N 353 | _ | | | Yes | No |
| 34 Were any changes made to the organizing or governing documents? If Yes, attached a conformed copy of the changes 35 The organization had income from business scienties, such as those regorded on less 2.6., and 7.8 (among othes), but not reported on Form 990-1 and the organization have unrelated business gives income for 1.000 or more or was at subject to section 0003(s) notice, reporting, and proxy tax requirements? 350 M the organization have unrelated business gives income of \$1.000 or more or was at subject to section 0003(s) notice, reporting, and proxy tax requirements? 350 X | 33 | Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed | ł | l | 1 |
| the changes If the organization had income from business activities, such as those reported on lose 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaning why the organization due for report the income on Form 990-T a) Did the organization have unrelated Dusiness gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and forpory bits requirements? b) If "Yes," has it filled a tax return on Form 990-T for this yea? 35a | | · · · · · · · · · · · · · · · · · · · | 33 | ļ | X |
| 35 If the organization had roome from business advives such as those reported on fines 2, 5a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization of not report the income on Form 990-T and the organization have unrelated business gross income of \$1,000 or more or was it subject to section 033(a) notice, reporting, and proxy lax requirements? 35 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If Yes, "complete applicable parts of Schedule 1. 36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? 37 Did the organization borrow from, or make any loans to, any officer, director, flustee, or key employee or were any such loans made in a prior year and still cutstanding at the end of the period covered by this return? 38 Did the organization borrow from, or make any loans to, any officer, director, flustee, or key employee or were any such loans made in a prior year and still cutstanding at the end of the period covered by this return? 38 Section \$100 (SIC)71 organizations. Enter amount for the year? 39 Section \$100 (SIC)73 organizations. Enter amount of the period covered by this return? 39 Section \$100 (SIC)31 organizations. Enter amount of the ximposed on the organization during the year or is it aware that it engaged in an 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 this organizations prior Form \$90 or \$990-EZ? If Yes, complete Schedule I. Part I. 40b X 40b X 40b X 40b X 40b X 40c Section \$100 (SIC)3 and \$501 (CIQ) organizations. Enter amount of tax imposed on organization managers or discuplified persons during the value of the organization as a bank account, securities account, or other financial account in a foreign country. ► 4 | 34' | Were any changes made to the organizing or governing documents? If "Yes," attached a conformed copy of | İ | ļ | - |
| on Form 930-T, attach a statement explaining why the organization did not report the income on Form 950-T. Dot the organization have unreliated business gross secone of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements? 35a | | | 34 | <u> </u> | X |
| a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section \$6033(e) notice; reporting, and prory lat requirements? b If "Yes," has it filled a tax routin on Form \$90-T for this year? 50 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year of If "Yes," complete applicable parts of Schedule N 73 Either amount of political expenditures, direct or indirect, as described in the rists' 13 Did the organization borrow from, or make any loans to, any officer, director, fusitee, or key employee or were any such loans made in a prory year and still outstanding at the end of the pend covered by this relum? 13 Section 501(c)(?) organizations included on line 9 14 Section 501(c)(?) organizations. Either amount molived 15 Section 501(c)(?) organizations. Either amount molived 16 Section 501(c)(?) organizations. Either amount of tax imposed on the organization during the year on still aware that it engaged in an excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in an prory year, and that the transaction has not been reported on any of the organization's pror Forms 990 or e90-E27 if "Yes," complete Schedule I., Part I 14 Section 501(c)(3) and 501(c)(4) organizations. Einter amount of tax imposed on organization manages or disqualified persons during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person and manages or disqualified persons during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person and organization manages or disqualified persons during the year or is it aware that it engage | 35 | | | | |
| 8633(e) notice, reporting, and proxy tax requirements? 35 If "Yes," has it filed a tax return or Form 990-7 for this year? 36 Did the organization undergo a fliquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N. 37a Enter amount of pollucial expenditures, direct or indicate, as described in the inst? 37b Did the organization file Form 1120-POL for this year? 37c Did the organization file Form 1120-POL for this year? 37c Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization form file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization from 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization file Form 1120-POL for this year? 37d Did the organization | | | | 1 | 1 |
| b If Yes, has it filled a fax return on Form 990-T for this year? 5 Did the organization undergo a figuration, dissolution, termination, or significant disposition of net assets during the year? If Yes, complete applicable parts of Schedule N 73 Enter amount of political expenditures, direct or indirect, as described in the rist? 13 Did the organization floor make any loans to, any officer, director, frustee, or key employee or were any such boars made an a prory year and still outstanding at the end of the period covered by this return? 13 Bid If Yes, complete Schedule I, Part II and enter the total amount involved 13 Section 501(c)(7) organizations. Enter: 14 Intellation fees and captal contributions included on line 9 15 Gross receipts, included on line 9, for public use of club facilities 16 Section 501(c)(3) and 501(c)(4) organizations. Did the organization during the year unders, section 4911 ▶ section 5911 ▶ section 5911(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 during the year or is it aware that it engaged in an excess benefit transaction during the year or is it aware that it engaged in any expert organizations prior Forms 990 organizations and 501(c)(4) organizations. Enter amount of tax imposed on organizations prior Forms 990 organization and 501(c)(4) organizations. Enter amount of tax on line 40c rembursed by the organization 14 List the states with which a copy of this return is filed ▶ OR 15 A any time during the calendar year, did the organization have an interest in or a signature or other authonty over a financial account in a foreign country ▶ Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c rembursed by the organization and filing requirements for Form 104 Foreign Bank and Financial Accounts. 15 A any time during t | а | | | 1 | 1,7 |
| 36 Did the organization undergo a liguidation, dissolution, (remination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N. 37a | | • | | ļ | X |
| dunng the year? if "Yes," complete applicable parts of Schedule N 36 Enter amount of political expenditures, direct or indirect, as described in the instr Did the organization file Form 1120-POL for this year? 37 But 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 pened covered by this return? 38 But S Section 501(c)(7) organization Scherier. indiation fees and capital contributions included on line 9 Gross receipts, included on line 9, for public use of rotub facilities. Section 601(c)(3) and 501(c)(4) organizations. Dut the organization during the year under. section 4911 ► section 4911 ► section 4912 ► section 4912 ► section 4915 ► Section 501(c)(4) organizations. Dut the organization engage in any section 4955 E section 501(c)(4) organizations. Dut the organization engage in any section 4955 E section 501(c)(4) organizations. Dut the organization engage in any section 4955 E section 501(c)(4) organizations. Dut the organization engage in any section 4955 E section 501(c)(4) organizations. Dut the organization engage in any section 4955 E section 501(c)(4) organizations. Dut the organization engage in any section 4955 E section 501(c)(4) organizations. Dut the organization engage in any section 4955 E section 501(c)(4) organization has not been reported on any of the organization with a disqualified person of unique the year under sections 4912. 4955, and 4958 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c rembursed by the organization 405 | | • • • • | 35b | | - |
| The Ember amount of political expenditures, direct or indirect, as described in the insit Did the organization file Form \$1124-POL for this year? 37b | 36 | | 1 00 | | . |
| b Did the organization file Form 112b-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 outstanding at the end of the penod covered by this return? 38b X X Vers, complete Schedide I., Part II and enter the total amount involved 38b 38a 38b | 27- | | 36 | | |
| 38a | _ | | 276 | | • |
| any such loans made in a prior year and still outstanding at the end of the penod covered by this return? 1 | | | 3/6 | - | |
| b If "Yes," complete Schedule L, Part II and enter the total amount involved 38 Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on line 9 39 Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 ► section 5911 ► section 4911 ► section 5911 ► section 5911 ► section 4911 ► section 5911 ► | sea | | 200 | | v |
| 39 Section 501(c)(7) organizations Enter: a Initiation fees and capital contributions included on line 9 b Gross recepts, 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, section 4911 ▶ 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 during the year or is it aware that it engaged in an 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 Forms 990 or 990-E27 if "Yes," complete Schedule L, Part I Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax miposed 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 reimbursed by the organization. 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 List the states with which a copy of this return is filed ▶ PO BOX 2084 Located at ▶ ROSEBURG, OR All organizations books are in care of ▶ BARBARA JOHNSON Telephone no. ▶ 541-784-784. Telephone no. ▶ 541-784-784. Yes No At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account; or exceptions and filing requirements for Form TD F90-22.1, Report of Foreign Bank and Financial Accounts. 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. ▶ Section 4947(a)(1) nonexempt chantable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of t | _ | | 38a | - | |
| a Initiation fees and capital contributions included on line 9 Gross receipts, included on line 9 33b | | | - | | |
| b Gross receipts, included on line 9, for public use of dub facilities 39b 40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under, section 4911 ▶ | | 177.1 | | | |
| Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 ▶ section 4915 ▶ section | | | - | | |
| section 4911 ▶ section 4912 ▶ section 4915 ▶ section 4915 ► section 4915 ► section 4955 ► 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 Forms 990 or 990-E27 if "Yes," complete Schedule L, Part I 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 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 List the states with which a copy of this return is filed ▶ PO BOX 2084 Located at ▶ ROSEBURG, OR ZIP + 4 ▶ 974.70 b At any time during the calendar year, did the organization have an interest in or a signature or other authonty 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 ▶ Section 495(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the name of the foreign country. ▶ Section 4967(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 Yes No | | | - | | |
| b 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 Forms 990 or 990-EZ7 if "Yes," complete Schedule I., Part I c 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 reimbursed by the organization. All organizations at you time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T 40 | 4va | | | | |
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| "Yes," Form 990 must be completed instead of Form 990-EZ | | • • • • • | 44 | ļ | <u>X</u> |
| · | 45 | | | | 37 |
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| Form 9 | 90-EZ (2009) ROSEBURG INDIAN BOOSTERS CLUI | 3 93 | 3-0853780 | | Page 4 |
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| Part | 501(c)(3) organizations and section 4947(a)(1) none | | | | |
| | and complete the tables for lines 50 and 51. | | | | T., T., |
| | old the organization engage in direct or indirect political campaign activities of | n behalf of or in op | position to | | Yes No |
| | andidates for public office? If "Yes," complete Schedule C, Part I | | | | 46 X 47 X |
| | old the organization engage in lobbying activities? If "Yes," complete Schedul | | | • | |
| | s the organization operating a school as described in section 170(b)(1)(A)(ii) | | Schedule E | | 48 X |
| | old the organization make any transfers to an exempt non-charitable related of | organization? | | | 49a X |
| | "Yes," was the related organization a section 527 organization? | | | | 49b |
| | Complete this table for the organization's five highest compensated employee | | | | |
| e | mployees) who each received more than \$100,000 of compensation from the | (b) Title and average | (c) Compensation | | (e) Expense |
| | (a) Name and address of each employee paid more than \$100,000 | hours per week devoted to position | (b) compensation | employee benefit plans & deferred compensation | account and other allowances |
| NONE | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| f T | otal number of other employees paid over \$100,000 | • | | | |
| | (a) Name and address of each independent contractor paid more than \$100,000 | (b) | Type of service | (c) C | ompensation |
| NONE | · | | | | |
| | | | | | |
| · | · · · · · · · · · · · · · · · · · · · | | · | | |
| | · · · · · · · · · · · · · · · · · · · | | | | · |
| | | | · <u>-</u> | | |
| d T | otal number of other independent contractors each receiving over \$100,000 | > | | | |
| Sign Here | Under penalties of perjury, I declare that have examined this return, including and belief, it is pue, correct, and complete Declaration of preparer (other than Signature of officer | accompanying sched officer) is based on al | ules and statements, I information of which Date | and to the best of my foreparer has any know | knowledge wledge |
| | GREG MARLAR Type or print name and title | PRE | SIDENT | | <u></u> |
| Paid | Preparer's Signature Ruttleu CA | PA 12/29 | Check if self- | ` | ifying Number (See instr.) |
| raiu Prepa | | P.C. | 9/⊥0 employed ▶ | | 2023 |
| Use C | | 201 | | EIN | |
| JJU 4 | | 401 | | Phone 541 | -672-6525 |
| May th | e IRS discuss this return with the preparer shown above? See instructions | | | | Yes No |
| way ut | C 11.0 GISSUOS BIIS FORMIT MIDT BIE PREPARET SHOWER ADOVE. SEE HISBUULIONS | | | Fo | m 990-EZ (2009 |

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

| ۱åm | Arme of the organization ROSEBURG INDIAN BOOSTERS CLUB Employer identification number 93-0853780 | | | | | | | | | | | | | |
|-----|--|---------------------------------------|------------------------------|------------|--|---------------|---------------------|------------|------------------------|--------------|-------------------------|---------------|--------|----|
| D. | art I | Poss | | | Status (All organizations | | omnlet | e this | nart) | | | | | |
| | | | | | | | | | part. | OCC II | iou uci | 10113. | | |
| _ | organ | | | | e it is: (For lines 1 through 11, o | | | | | | | | | |
| 1 | H | | | | ociation of churches described i | ii section | וויטנטוני | · /(~/(·). | | | | | | |
| 2 | H | | | | A)(ii). (Attach Schedule E) | 470 | /L\/4\/ A \/ | :::\ | | | | | | |
| 3 | | | • | | ce organization described in sec | | | | | | | | | |
| 4 | Ĺ | | | operate | d in conjunction with a hospital of | described | in sectio | n 170(b |)(1)(A)(ı | II). Ente | er the ho | ospital's nar | ne, | |
| | | city, and stat | • • • • | • | | | | | | | | • | | |
| 5 | | | | | of a college or university owned | or operat | ed by a g | overnme | ental uni | t descn | bed in | | | |
| | | section 170(| b)(1)(A)(iv). (Comple | ete Part | II) | | | | | | | | | |
| 6 | Ш | | • | • | overnmental unit described in s | | | | | | | | | |
| 7 | | An organizati | ion that normally rec | eives a | substantial part of its support fro | om a gove | emmenta | l unit or | from the | genera | al public | : | | |
| | _ | described in | section 170(b)(1)(A) |)(vi). (Co | omplete Part II) | | | | | | | | | |
| 8 | | A community | trust described in s | ection 1 | 70(b)(1)(A)(vi). (Complete Part | II) | | | | | | | | |
| 9 | X | An organizati | on that normally rec | eives: (1 |) more than 33 1/3 % of its sup | port from | contribut | ions, me | embersh | ip fees, | and gre | oss | | |
| | | receipts from | activities related to | ıts exem | pt functions—subject to certain | exceptio | ns, and (2 | 2) no mo | re than | 33 1/3 | % of its | | | |
| | | support from | gross investment in | come ar | id unrelated business taxable in | come (le: | ss section | 1 511 tax | c) from b | usines | ses | | | |
| | | acquired by t | he organization aftei | r June 3 | 0, 1975 See section 509(a)(2). | (Comple | te Part III | .) | | | | | | |
| 10 | | An organizati | on organized and or | perated (| exclusively to test for public safe | ety See s | ection 50 | 09(a)(4). | | | | | | |
| 11 | | An organizati | on organized and op | perated e | exclusively for the benefit of, to | perform ti | ne functio | ns of, o | r to carry | out the | е | | | |
| | | | - | | ed organizations described in se | | | | | | section | 1 | | |
| | | 509(a)(3). Ch | eck the box that des | scribes t | ne type of supporting organization | on and co | mplete lu | nes 11e | through | 11h. | | | | |
| | _ | a Type | I b ∐ Ty _l | pe II | c Type III–Functions | ally integr | ated | d | Тур | e III–Ot | her | | | |
| e | | By checking t | this box, I certify that | t the org | anization is not controlled direct | lly or indir | ectly by o | one or m | ore disc | ualified | | | | |
| | | persons othe | r than foundation ma | anagers | and other than one or more pub | licly supp | orted org | janizatio | ns desc | ribed in | section | 1 | | |
| | | 509(a)(1) or s | section 509(a)(2). | | | | | | | | | | | |
| f | | If the organiz | ation received a writ | ten dete | rmination from the IRS that it is | a Type I, | Type II, | or Type | III suppo | orting | | | | |
| | | organization, | check this box | | _ | | | | | | | | | |
| g | | Since August | t 17, 2006, has the c | organiza | tion accepted any gift or contrib | ution from | any of th | ne | | | | | | |
| | | following per | sons? | | | | | | | | | | | |
| | | (i) A persor | who directly or indi | rectly co | ntrols, either alone or together v | with perso | ons descr | ibed ın (| н) | | | | Yes | No |
| | | and (III) l | below, the governing | body o | f the supported organization? | _ | | | | | | 11g | (i) | |
| | | (ii) A family | member of a persor | n describ | ed in (i) above? | | | | | | | 11g | (II) | |
| | | (iii) A 35% c | ontrolled entity of a | person o | lescribed in (i) or (ii) above? | _ | | _ | | | | 11g | (iu) | |
| _h_ | | Provide the f | following information | about t | ne supported organization(s) | | | | | | | | | |
| (i) | Name | of supported | (ii) EIN | | (iii) Type of organization | (iv) Is the o | • | | ou notify | (vi) | ls the | (vii) A | Amount | of |
| | orga | anization | | | (described on lines 1–9 | | sted in your | the organ | nization in of your | organizat | on in col zed in the | SU | podqı | |
| | | | | | above or IRC section (see instructions)) | governing | document? | | port? | | S 2 | | | |
| _ | | | | | (000,, | Yes | No | Yes | No | Yes | No | | | |
| | | | | | | | | | | | | | | |
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Total

Schedule A (Form 990 or 990-EZ) 2009 ROSEBURG INDIAN BOOSTERS CLUB

| Pa | Support Schedule for O (Complete only if you ch | | | |)(1)(A)(iv) and | l 170(b)(1)(A)(v | i) |
|-----|---|---------------------|-----------------------|------------------------|----------------------|------------------|-------------|
| Sec | tion A. Public Support | JONES IN DOX | 011 11110 0, 1, 0 | . o or r are in | | | |
| | lendàr year (or fiscal year beginning in) | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | | | | | | |
| 2 | Tax revenues levied for the organization's benefit and either paid to 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 | | | | | | |
| | tion B. Total Support | | | | , | | |
| Ca | endar year (or fiscal year beginning in) 🕨 | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
| 7 | Amounts from line 4 | | | | | | |
| 8 | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 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.) | | | | | | |
| 11 | Total support. Add lines 7 through 10 | <u> </u> | <u> </u> | | <u> </u> | <u> </u> | |
| 2 | Gross receipts from related activities, etc. | • | • | | | . 12 | |
| 13 | First five years. If the Form 990 is for the organization, check this box and stop here | _ | t, secona, tnira, tol | urth, or lifth tax yea | ar as a section 50 | 1(c)(3) | ▶ □ |
| Sec | tion C. Computation of Public Su | | tage | | | · | |
| 4 | Public support percentage for 2009 (line 6 | | | in (f)) | | 14 | % |
| 5 | Public support percentage from 2008 Scho | | • | ··· (' <i>')' .</i> | | 15 | |
| | 33 1/3 % support test—2009. If the organ | | • | 13. and line 14 is | 33 1/3 % or more. | | |
| | and stop here. The organization qualifies | | | | | | ▶ □ |
| b | 33 1/3 % support test—2008. If the organ | | • | | 15 is 33 1/3 % or i | nore, check this | |
| | box and stop here. The organization quali | | | | | , | ▶ □ |
| 7a | | _ | - · · | • | Sa, or 16b, and line | e 14 is 10% or | . ⊔ |
| | more, and if the organization meets the "fa | icts-and-circumsta | inces" test, check | this box and stop | here. Explain in P | art IV how the | |
| | organization meets the "facts-and-circums | | | | | | ▶ □ |
| b | 10%-facts-and-circumstances test—200 | | - | | _ | • | |
| | more, and if the organization meets the "fa | - | | | | | |
| | organization meets the "facts-and-circums | tances" test. The o | organization qualifi | es as a publicly su | pported organization | tion | ▶ 🗌 |
| 8 | Private foundation. If the organization did | not check a box o | on line 13, 16a, 16i | o, 17a, or 17b, che | eck this box and se | ee instructions | ▶ 🗌 |
| | | | | | | | |

93-0853780

Page 2

1

Section A. Public Support

any "unusual grants")

ıts behalf

Gifts, grants, contributions, and membership fees received. (Do not include

organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on

The value of services or facilities furnished by a governmental unit to the

7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the

Public support (Subtract line 7c from

Calendar year (or fiscal year beginning in) ▶

Gross income from interest, dividends, payments received on securities loans. rents, royalties and income from similar

Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975

Net income from unrelated business activities not included in line 10b, whether or not the business is regularly

Other income. Do not include gain or loss from the sale of capital assets

Total support. (Add lines 9, 10c, 11,

organization without charge

Total. Add lines 1 through 5

amount on line 13 for the year

c Add lines 7a and 7b

Section B. Total Support

Amounts from line 6

Add lines 10a and 10b

(Explain in Part IV.)

carned on .

line 6.)

Calendar year (or fiscal year beginning in)

Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the

(e) 2009

24,360

13,385

37,745

(e) 2009

37,745

14,033

(d) 2008

33,728

15,973

49,701

10,973

10,973

49,701

(d) 2008

(c) 2007

39,598

20,077

59,675

15,077

15,077

59,675

77

77

(c) 2007

Page 3

(f) Total

693,180

96,903

790,083

62,696

62,696

727,387

790,083

408

408

14,033

804,524

90.41%

87.89%

%

X

(f) Total

Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

(a) 2005

555,667

26,311

581,978

20.489

20,489

581,978

204

204

(a) 2005

(b) 2006

39,827

21,157

60,984

16,157

16,157

60,984

127

127

(b) 2006

| and 12.) | 582,182 | 61,111 | 59,752 | 49,701 | 51,778 |
|--|---------------------------|----------------------|----------------------|--------------------|--------|
| First five years. If the Form 990 is for the o | organization's first, sec | cond, third, fourth, | or fifth tax year as | a section 501(c)(3 | 5) |
| organization, check this box and stop here | | | | | |
| tion C. Computation of Public Su | pport Percentage | e | | | |
| Public support percentage for 2009 (line 8, | column (f) divided by | line 13, column (f) |) | _ | 15 |
| Public support percentage from 2008 Sche | dule A, Part III, line 15 | 5 | | | 16 |
| tion D. Computation of Investmen | nt Income Percer | ntage | | | |
| Investment masses passestess for 2000 /liv | - 10a aaluma (6 duu | dad bulling 12 poli | .mn (f)) | | |

Section 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))

Investment income percentage from 2008 Schedule A, Part III, line 17

19a 33 1/3 % support tests—2009. If the organization did not check the box on line 14, and line 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

33 1/3 % support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2009

18

14

16

18

Section 15

| Schedule A (F | orm 990 or 990-EZ) 2 | 009 ROSEBU | JRG INDIA | N BOOSTERS | CLUB | 93-0853780 | Page 4 |
|---------------|----------------------|---------------------------------------|-----------------|------------------|-----------------|---|---------|
| Part IV | Supplemental I | nformation. C | complete this p | art to provide t | he explanations | required by Part II, I formation. See instru | ine 10; |
| | | | | | | _ | |
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46430 ROSEBURG INDIAN BOOSTERS CLUB

93-0853780

Federal Statements

FYE: 6/30/2010

Statement 1 - Form 990-EZ, Part I, Line 3 - Membership Dues and Assessments

| Description | Am | ount |
|-------------|----|--------|
| MEMBERSHIPS | \$ | 13,385 |
| TOTAL | \$ | 13,385 |

Statement 2 - Form 990-EZ, Part I, Line 8 - Other Revenue

| Description | <u> </u> | Amount |
|--------------------------------|----------|----------------|
| PROGRAMS OTHER FUND RAISING | \$ | 8,874 5,413 |
| TOTAL | \$ | 14,287 |

1-2

12/29/2010 4:09 PM

46430 ROSEBURG INDIAN BOOSTERS CLUB

93-0853780

Federal Statements

FYE: 6/30/2010

12/29/2010 4:09 PM

Statement 3 - Form 990-EZ, Part I, Line 16 - Other Expenses

| Description | Amount |
|--------------------------|-----------|
| EXPENSES | \$ |
| OFFICE SUPPLIES | 424 |
| POSTAGE & SHIPPING | 40 |
| PRINTING & REPRODUCTIONS | 9,973 |
| LIABILITY INSURANCE | 29 |
| ANNUAL FEES | 50 |
| MEMBERSHIP EXPENSES | 9 |
| TAXES - STATE | 65 |
| FUNDRAISING EXPENSES | 41 |
| TOTAL | \$ 10,631 |

(Rev April 2009)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

| Internal Reven | ue Service | | i i |
|---|--|-------------|-------------------------------|
| If you are | e filing for an Automatic 3-Month Extension, complete only Part I and check this box | | ▶ X |
| If you are | e filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this for | m) | _ |
| Do not comp | plete Part II unless you have already been granted an automatic 3-month extension on a previously filed F | om 886 | 8 |
| Part I | Automatic 3-Month Extension of Time. Only submit original (no copies needed | l). | |
| A corporation | required to file Form 990-T and requesting an automatic 6-month extension—check this box and comple | te | |
| Part I only | required to the return coo r and required ing an automation of month extension. Shock this box and comple | | ▶ □ |
| • | continue (maliiding 1120 C Flore), madeaushing DENICs, and trusts must use Form 7004 to require | | · · |
| • | orations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an excome tax returns | tension (| ot |
| Electronic F | iling (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension o | f time to | file |
| one of the re | turns noted below (6 months for a corporation required to file Form 990-T) However, you cannot file Form | 8868 | |
| electronically | of (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 88 | 70, grou | p |
| returns, or a | composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (| Part II) o | f Form |
| 8868 For mo | ore details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Charities & Nong | profits | |
| Type or | Name of Exempt Organization | Employ | er identification number |
| print | | | |
| File by the | ROSEBURG INDIAN BOOSTERS CLUB | <u>93-0</u> | 853780 |
| due date for filing your | Number, street, and room or suite no. If a P.O. box, see instructions | | |
| return See | PO BOX 2084 | | |
| instructions | City, town or post office, state, and ZIP code For a foreign address, see instructions | | |
| | ROSEBURG OR 97470-0444 | | ···· |
| | of return to be filed (file a separate application for each return) | | □ r 4700 |
| Form 9 | — | | Form 4720 |
| X Form 9 | | | Form 5227 |
| Form 9 | | | Form 6069 |
| romis | 50-FF [] F0III 1041-A | | Form 8870 |
| If the org If this is for the whole a list with the I reque until for the | names and EINs of all members the extension will cover st an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time 02/15/11, to file the exempt organization return for the organization named above. The extension organization's return for calendar year or tax year beginning 07/01/09, and ending 06/30/10 | | ▶ □ |
| 2 If this t | ax year is for less than 12 months, check reason Initial return Final return Change i | n accoun | ting period |
| | application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, | | |
| | y nonrefundable credits. See instructions | 3a | \$ |
| | application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax | | |
| | nts made Include any prior year overpayment allowed as a credit | 3b | \$ |
| | the Due. Subtract line 3b from line 3a Include your payment with this form, or, if required, | | |
| | t with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment | | |
| | n) See instructions | 3c | \$ |
| - | ou are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 88 | 79-EO | |
| for payment | | | |
| For Privacy | Act and Paperwork Reduction Act Notice, see Instructions. | | Form 8868 (Rev 4-2009) |

