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Form 990-EZ

Short Form Return of Organization Exempt From Income Tax

2009

OMB No 1545-1150

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

▶ Sponsonng 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.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

A FC	r the :	2009 calendar	year,	or tax year beginning	1 October	, 2009, and	lending	30 S	epter	nber	, 20	10
B Ch	eck if ap	plicable PI	6830	C Name of organization				D Emp	oyer ic	lentific	ation numbe	er
] Ac	dress ch		e IRS bel or	Optimist International, Optin	mist Club of Van Wert,	Ohio, Club # 24	391		3	4-132	8741	
=	eme char	nge pr	nnt or	Number and street (or P.O. box,			ort/surte	E Telep	hone r	umber		
	tial retun		ре. эе	1008 Woodland Avenue					4	19/238	-2044	
≓	nended i	Si	pecific	City or town, state or country, an	d ZIP + 4	L		F Gro	ın Exe	mntio		
=			struc- ons.	Van Wert Ohio 45891-1433					nber	•	133	34
	•		manis	zations and 4947(a)(1) nonexe	amnt charitable trusts i	nust attach	G Accou				Cash	
	occu		_	mpleted Schedule A (Form 99	-	ilust attacii	II .	specify		، ت	Jasii //	icoi dai
				·			+			organi	zation is no	nt .
w	ebsite	e: ► NONE					l .			_	ile B (Form :	
			eck o	nly one) — 🗹 501(c) (4) ◀	(insert no.) 1 4947(a)(1) or 527	1 .	Z, or 99		cricad	ic b (i cimi	330,
	neck >		-	zation is not a section 509(a)(3)	*		<u></u>			oro the	an \$25 000	
			-	turn is not required, but if the		•	-	•			an \$≥5,000.	. A
				e 9 to determine gross receipts; i					101010	Luini	20.	443.10
	rt I			penses, and Changes in					ction	e for		443.10
1	1					-	-			3 101		514.50
	-		_	ts, grants, and similar amou					1			
	2			revenue including governme				• •	2		40.4	00
	3	•		s and assessments		· · · · ·		• •	3			062.50
	4	Investment in							4			140.00
	5a			m sale of assets other than	•			00				
1	b			er basis and sales expenses				00				
,	C			n sale of assets other than i					5c			00
1	6	•		tivities (complete applicable parts o	• •		check here	▶ ∐				
2010401	а		•	ot including \$		1 1						
:		reported on I		•				600.00				
	b			nses other than fundraising	•	· <u> </u>		00				
	С			ss) from special events and			6a)		6c			600.00
1	7a	Gross sales	of inv	entory, less returns and alle	owances <u>. N.E.U</u> .E.			060.10				
1	ь	Less: cost of	goo	ds sold		. 7b	5,	101.39				
1	C	Gross profit	or (lo	ss) from sales of inventory	Subtract line 75 from	(ine)7p()	위		7c		8,9	958.71
-	8	Other revenu	ie (de	escribe See Attachment	<u></u>	9	2)	8		1,0	066.00
	9	Total revenu	Je. A	dd lines 1, 2, 3, 4, 5c, 6c, 7	c, and 8	i	<u> </u>	. ▶	9		24,3	341.71
	10	Grants and s	imila	r amounts paid (attach sch	edule . ()(5,0,5	N. 111.	<u>.</u>]		10		12,	515.43
	11	Benefits paid	to o	r for members					11		8,2	283.96
2	12	Salaries, other	er co	mpensation, and employee	benefits				12			00
2012	13	Professional	fees	and other payments to inde	ependent contractors				13			00
-	14	Occupancy,	rent,	utilities, and maintenance					14		1,!	520.73
1	15	Printing, pub	licati	ons, postage, and shipping					15			317.36
1	16			describe > See Attachmer)	16		4,4	486.10
1	17			Add lines 10 through 16 .				. ▶	17		27,	123.58
1	18			for the year (Subtract line					18			781.87)
ا ز	19	•	•	nd balances at beginning o	•			with				
ž				e reported on prior year's re	•		_		19		52,4	402.83
Net Assets	20	Other change	es in	net assets or fund balance					20			00
Ž	21	_		d balances at end of year. (• • • • •			. ▶	21		49.6	620.96
Pa	rt II			ets. If Total assets on line 2						ad of		
				(See the instructions for				inning of			(B) End of year	
22	Ca	sh, savings, a	ınd ın	•			<u> </u>		02.83	22	19.0	620.96
23		nd and buildir					-			23		00
)A				De ► County Fair Business			-	30.0	00.00		30.0	000.00
. -		tal assets .		· · · · · · · · · · ·		,	-		02.83	_		620.96
		tal liabilities					-	32,7		26		00
ж ж	1~			cribe -								
25 26 27				cribe ► calances (line 27 of column	(B) must scree with I)		52 A	02.83		AQ 4	620.96

Part	III Statement of Program Service Accom	plishments (See the instr	uctions for Part II	1.)		Expenses
What	What is the organization's primary exempt purpose? Charitable and Social Welfare					ured for section (3) and 501(c)(4)
	escribe what was achieved in carrying out the organization's exempt purposes. In a clear and concise					
	nanner, describe the services provided, the number of persons benefited, and other relevant information for					
each	program title.				for ot	hers.)
28	After Prom Program - The program provided a well c					
	180 participants from two district schools. Goal of th		- 22:	free		
	environment for at least awhile. There were approxing	nately 70 volunteer hours util	lized.			
	*	includes foreign grants, che		. ▶ 🗆	28a	3,820.55
29	College Scholarship Program - The program provide					
	schools to awarded to a senior who excels in acader	nics and provides at least 10	0 hours of commur	ity service		

		includes foreign grants, che			29a	3,000.00
30	Hospital Animal Program - This program provided ap					
	Van Wert County Hospital or visiting the emergency		m is to provide the	children		
	with a soft cuddly animal to help lessen the children					
		includes foreign grants, che	eck here	. ▶ 📙	30a	948.78
		includes foreign grants, che			31a	4,746.10
	Total program service expenses (add lines 28a t				32	12,515.43
Part	IV List of Officers, Directors, Trustees, and Key					
	(a) Name and address	(b) Title and average hours per week	(c) Compensation (If not paid,	(d) Contributio employee benefit	plans &	
		devoted to position	enter -0)	deferred comper	nsation	other allowances
	yl Yearling	President, 3.2 to 4.0 hrs/wk	_			
	B Richy Road, Van Wert, Ohio 45891		0		0	0
	ım R Able	Sec/Treas, 4.8 to 5.5 hrs/wk	_		_	
	Woodland Ave, Van Wert, Ohio 45891	·	0		0	\$240
	y Sink	1st VP, .7 to 1.0 hr/wk	_		0	_
	David St, Van Wert, Oh 45891	ļ . ·	0			0
	Alessandrini	- 2nd VP, .7 to 1.0 hr/wk	_			_
	6 S R 118, Van Wert, Ohio 45891		0		0	0
	n Burchfield	Immed Past Pres, .5 hrs/wk	_			_
	Madison Blvd, Van Wert, OH 45891		0		0	0
	ey Baer	Dir - 1 yr, .5 hrs/wk	_		_	_
	State St, Van Wert, OH 45891		0		0	
	Bidlack	Dir - 1 yr, .5 hrs/wk	_		_	_
	4 W ridge Rd, Van Wert, OH 45891		0		0	<u>U</u>
	Carter	Dir - 1 yr, .5 hrs/wk	_			_
	Elm St, Van Wert, OH 45891		0		0	U
	dwards	Dir - 2 yrs, .5 hrs/wk	_			
	Liberty-Union Rd, Van Wert, OH 45891		0		0	0
	nan Dicke	Dir - 2 yrs, .5 hrs/wk	_		_	
	Wren Landeck Rd, Ohio City, OH 45874		0		0	<u> </u>
	l Dowdy 5 Linclin Highway, Van Wert, OH 4591	Dir - 2 yrs, .5 hrs/wk	o		0	
1314	5 Lincilli Highway, Vall Wert, On 4351					•
			<u> </u>			
						· · · · -
						}
		-				
		1	I	l		1

Part	Other Information (Note the statement requirements in the instructions for Part V.)			
			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	33		✓
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34		1
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			<u>'</u> ا
•	6033(e) notice, reporting, and proxy tax requirements?	35a		✓
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 significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		✓
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a 00			
b	Did the organization file Form 1120-POL for this year?	37b		✓
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			لـِــا
	any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a		✓
b	If "Yes," complete Schedule L, Part II and enter the total amount involved			
39	Section 501(c)(7) organizations. Enter:		·	
a	Initiation fees and capital contributions included on line 9			
b	Circus receipts, included on line 5, 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 4912 ▶ ; section 4955 ▶			
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-EZ? If "Yes," complete Schedule L, Part I	40b		✓
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on	100		
	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			
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		
41	List the states with which a copy of this return is filed. ▶ OHIO			
42a		119/23	8-204	4
		45891	-1433	
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		✓
	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.			
С	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c		1
-	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		. 1	▶ 🗆
	and enter the amount of tax-exempt interest received or accrued during the tax year			
			Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of	<u> </u>	ļ	
45	Form 990-EZ	44		✓
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		1
		-001	· ==	

1 01111 330		.003)						ayo v	
Part V N/A		Section 501(c)(3) organizations and s 501(c)(3) organizations and section 494 and complete the tables for lines 50 an	section 4947(a)(1 17(a)(1) nonexempted 51.) nonexen ot charitable	n pt charit le trusts m	able trusts only. A ust answer question	II section ons 46–49	b	
		he organization engage in direct or indirect					Yes	No	
•	cand	lidates for public office? If "Yes," complete S	Schedule C, Part I				46		
		he organization engage in lobbying activities	_				47	—	
	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E								
		he organization make any transfers to an exes," was the related organization a section 5	•		-		49a 49b	 	
		plete this table for the organization's five high						ıd kev	
		loyees) who each received more than \$100,0							
	(a) N	ame and address of each employee paid more than \$100,000	(b) Title and aver hours per wee devoted to posit	K ``	Compensation	on (d) Contributions to employee benefit plans & deferred compensation	(e) Exper account other allow	and	
	Total	I number of other employees paid over \$100	000	 >			L		
	φ100	0,000 of compensation from the organization (a) Name and address of each independent contractor		<u> </u>	.,	Type of service	(c) Compens	ation	
					-				
				<u> </u>					
	Tota	I number of other independent contractors e			· · ·				
		Under penalties of penjury, I declare that I have examine and belief, it is true, correct, and complete Declaration							
Sign Here		William R. able	14 May 2011						
	Signature of officer William R Able, Club Secretary / Treasurer Type or print name and title			Date					
Paid		Preparer's signature		Date	Check if self- employed ▶	Preparer's identifying nui	nber (See instru	ctions)	
Prepare Use Onl		Firm's name (or yours if self-employed),			еприува	EIN ►			
May the	e IPS	address, and ZIP + 4 S discuss this return with the preparer shown	ahove? See instr	ictions		Phone no ▶	Yes 🗌	No	
iviay ult	5 1110	Jaiouss this fotal if with the preparer shown	Laboro: Oce mon		· · · · ·	Fo	rm 990-EZ		

ATTACHMENT/RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX-Form 990-EZ/2009-2010 <u>ATTACHMENT</u>

RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX

Form 990-EZ For 2009-2010

Optimist Club of Van Wert, Ohio, Club# 24391 EIN: 34-1328741

Part I

Total

Schedule for #8		
Other Revenue		
Miscellaneous Items		
Meeting Fines	\$ 366.00	
Bear-Donations Jar	.00	
Fish Bowl-Door Prizes	309.00	
Other	30.77	
Revolving Account	315.23	
Unused After Prom Prize Money	<u>45.00</u>	
Total	\$1,066.00	
Schedule for #10		
Grants and Similar Amounts Paid		
Club Activities/Projects		
After Prom Program	\$3,820.55	
Art Rageous Celebration	629.39	
College Scholarship Program	3,000.00	
Essay Contest	368.15	
Hospital Animal Program	948.78	
Optimist Baseball Team (sponsor)	400.00	
Oratorical Contest	457.30	
Optimist Bicycle Rodeo	<u>166.26</u>	
Total		\$ 9,790.43
Club Donations for Youth		
American Legion Auxiliary-Buckeye Girls State	\$ 250.00	
D.A.R.E. Program	300.00	
Family Caring Clinic	125.00	
Junior Achievement	125.00	
Ohio District JOOI	75.00	
Van Wert Youth Football Program	100.00	
Y.W.C.A. Summer Food Program	100.00	

\$ 1,075.00

ATTACHMENT/RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX-Form 990-EZ/2009-2010

Schedule for #10 (continued)

Club Donation for Community Salvation Army Food Bank United Way of Van Wert County Van Wert Performing Arts Center Total	\$ 100.00 100.00 _1,000.00	\$ 1,200.00
Club Donations thru Optimist International Foundation Optimist International Foundation-general Childhood Cancer Campaign	\$ 375.00 75.00	
Total		\$ 450.00
Grants and Similar Amounts Total		\$12,515.43
Schedule for #16 Other Expenses		
Conferences and Conventions Payments to Affiliates Dues to Optimist International New Member Processing Fees Dues to Ohio District	2,862.67 90.00 545.00	\$ 240.00 3,497.67
Other Chamber of Commerce Dues Revolving Account Pork Barn Grill Repair Keys for Pork Barn	183.00 315.23 245.32 4.88	748.43
Other Expenses Total		\$ 4,486.10

Part III

Schedule for #31

Club Activities/Projects	Cash
Event/Activity	Support
Art Rageous Program	\$ 629.39
Essay Contest	368.15
Optimist Baseball Team (support)	400.00

ATTACHMENT/RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX-Form 990-EZ/2009-2010

Oratorical Contest Optimist Bicycle Rodeo Club Activity Totals	457.30 <u>166.26</u>	\$ 2,021.10
Club Donations/Youth	Donations Amount	
American Legion Auxiliary-Buckeye Girls State D.A.R.E. Program Family Caring Clinic Junior Achievement Ohio District JOOI Van Wert Youth Football Program YWCA Summer Food Program Club Donation Total	\$ 250.00 300.00 125.00 125.00 75.00 100.00 100.00	\$ 1,075.00
Club Donations/Community	Donation Amount	
Van Wert Performing Arts Center Salvation Army Food Bank United Way of Van Wert County Club Donation total	\$ 1,000.00 100.00 100.00	\$1,200.00
Club Donation through Optimist International Foundation (OIF)	Donation Amount	
Optimist International Foundation Childhood Cancer Campaign Total	\$ 375.00 	\$ 450.00
Youth Projects/Donation Total		\$4,746.10