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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)

OMB No 1545-0047

Interr	al Rever	nue Service		<u> </u>	The organi	zation may	have to u	ise a cop	by of this return i	o satisfy	state report	ing requi	ements		Ot	en to Pu	DUC INSP	ection
	For the	e 2009 calend	lar year, c	or tax y	ear begi	inning	Oct	1		2009,	and endi	ng S	ер :	30		, 2010)	
В	Check if	applicable			me of orga	nization							7	Employ	er Iden	tification Nu	mber	
	Add	tress change	Please use IRS label	Opti	mist C	lubof	Loch	Raver	n, Marylar	id, Fo	undati	on, I	ıc.	52-	1973	3885		
	Nan	me change	or print or type.						at delivered to stre		Room/			Telepho	ne num	iber		
		al return	See specific	8719	Gre	en Pas	sture	es Di	rive					(41	0) 8	328-82	58	
	H	mination	instruc- tions.		y, town or o					State	ZiP code +	4		,				
	H	ended return		Balt	imor	e				MD	21286	-210	ه ا ه	Gross re	eceints	s 99	670	_
	=	ofication pending	F Name a											roup return			Yes	X No
		Silver pointing	Donald B		•	•	turna N	Tai	Maon	MD	21286	Н(ь) А	re all af	filiates inclu	uded?		Yes	No
$\overline{}$	Tay.	exempt status) < (inser		1	4947(a)(1)		527	- 11	'No,' at	ach a list.	(see ins	structions)		_
÷		site: N/		7	-) - (111361	rt no.,		+3+/ (a)(1)	<u> </u>	1 327	- Luca C		un nodame	mbar D	•		
ĸ		of organization	X Corpore	-t [Trust	☐ Acres	ciation	Othe		Ti v	ear of Forma		996			legal domici	e: MD	
Pa		Summa		BUOTI	[Trust	ASSU	Jauon I	LOne	n -	<u> </u>	sar or roma	HOII A	550	1 841 3	SIZIE OI	iegai domici	le: 1-112	
1		Briefly describ		anızatıc	n'e mise	sion or m	net sia	nıfican	t activities:	Co	mmunit	v Se	rwi					
	' '	briefly describ	e are orga	ariizalic	#15 IIIIS	3011 01 111	iost sig	mincan	t activities.		miraii F.	7 56	T A T					
ဦ	-																	
Activities & Governance	-																	
ş	2	Check this box	~~ ~	of the c	 rnanızai	tion disco	nntinue	d its or	nerations or o		d of more	than 2	5% of	tits asse	~			
ð		Number of vol								лэроэс	G 01 111010	· triair z			3	4		
∞		Number of and								ne 1b)					4	4		
≨		Total number	-	_			·								5			
₹		Total number		•			• .								6	15		
٧		Total gross ur								2					7a	+		0.
	b	Net unrelated	business	taxable	Income	from Fo	rm 990			 :	<u></u>			···	7 b	·		
								P	RECEIV	ÆD.	1		Pri	or Year		Cu	rrent Ye	ar
		Contributions					.	·		 ,	mrsf			3,2	212.	1		77.
Ě	9	Program servi Investment in	ce revenu	ıe (Parl	t VIII, lin	ie 2g)	l g	8	MAN TO 18	<u> </u>								
Revenue	10	Investment in	come (Pa	rt VIII,	column	(A), lines	3,4	and 7d)	MYI. II @	2011				14,1				726.
œ		Other revenue										••-		-8,3				359.
	12	Total revenue	— add lir	es 8 th	rough 1	1 (must e	equal P	art VIII	I,₁column (A)	, l _i ne 1:	2) —				957.	7		444.
	13	Grants and si	mılar amo	ounts pa	aid (Part	l IX, colu	mn (A)	, l ines-	1-3)		····	·		7,8	356.	ļ	6,	924.
	14	Benefits paid	to or for r	membe	rs (Part	IX, colun	nn (A),	line 4)	١.									
•	15	Salaries, othe	r compen	sation,	employe	ee benefi	its (Par	t IX, α	olumn (A), lır	es 5-10	0)					ļ		
Expenses	16a I	Professional f	undraisin	g fees (Part IX,	column	(A), lin	e 11e)				L						
륈	ь	Total fundrais	ına exper	ises (Pa	art IX, c	olumn (D), line	25) ►			7,204	.						
a	i	Other expens)					11,2	296.		14.	998.
		Total expense	-											19,1				922.
	ľ	Revenue less									, ,			-10,1				478.
k 2		TEVELIGO 1033	CAPCI130.	J. Oub.	uot iirio	10 110111	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		· · · · ·				laning	ning of Y		1	d of Ye	
Net Assets or Fund Belenose	20	Total assets (Dort V lu	no 16\								<u> </u>	eyanı	689,				302.
10	1	Total liabilities		•				•		•		<u> </u>		005,	557.	' 	004	302.
15			• '		•				•			+		600 1		<u> </u>	604	200
	<u>22</u> rt	Net assets or	runo bala		Subtract	line 21 h	rom IIn	e 20 .	•••					689,	55/.	<u>. F</u>	684,	302.
Fe	17 (11									···		-						
		Under penaltie true, correct, a	s of perjury, and complete	i declare i Declarat	that I have lo prof prep	examined the arer (other t	ns return, han office	, includin er) is bas	g accompanying : ed on all informat	schedules tion of whi	and stateme ch preparer	ints, and has any l	to the bi	estofmyku ge	nowledg	ge and belief	, it is	
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On		yours if self- employed),	▶										EIN	>				
	·· <i>,</i>	address, and ZIP + 4											Pho	ne no 🕨				
May	y the IF	RS discuss thi	s return w	vith the	prepare	r shown	above?	(see	nstructions)					<u> </u>		Y	es 🕽	No
	_	Privacy Act a								truction	15.			TEEA0101	07/2	0/09		(2009)

Form 990 (2009) Optimist Club of Loch Raven, Maryl		Inc.	52-:	<u> 19738</u> 1	35		Page 2
Part III Statement of Program Service Accomp	olishments		· · · · · · · · · · · · · · · · · · ·				
1 Briefly describe the organization's mission:							
Community Service							
					~		
2 Did the organization undertake any significant program se	ervices during the year	which were not liste	ed on the prior			-	
Form 990 or 990-EZ?			u p		Yes	\mathbf{x}	No
If 'Yes,' describe these new services on Schedule O.				ш		E	
3 Did the organization cease conducting, or make significant	t changes in how it or	anducto any program	a canuage?		Yes	\mathbf{x}	No
If 'Yes,' describe these changes on Schedule O.	it changes in now it co	inducts, any program	ii services:	Ш	162	₾	NO
· •		I			- 501/		
4 Describe the exempt purpose achievements for each of the and 501(c)(4) organizations and section 4947(a)(1) trusts	are required to report	the amount of grant	vices by expense: Is and allocations	to other	n oul(c)(3) otal	
expenses, and revenue, if any, for each program service	reported.	and announced grain		10 011101	,o ·	0.0.	
4 (0)			0 1 5		-		
4a (Code:) (Expenses \$6, 924.							
Allocation for community service a	nd youth prog	rams.					
Over 3000 youth and adults benefit	_from						
the programs contributed to.							
	 	_					
			<u> </u>				
4b (Code:) (Expenses \$	including grants of	\$) (Revenue	\$)
	=	•					
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An (Code) \ \(\mathbb{E}\) \(\mathbb{E}\) \ \(\mathbb{E}\) \\(\mathbb{E}\) \\(including grants of	ė	\ /Davanua	¢			
4c (Code:) (Expenses \$	_ including grants of	₹) (Revenue	ې	·		'
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			- -				
Ad Other program consecs. (Describe in Cabadida O.)	· · · · · · · · · · · · · · · · · · ·						
4d Other program services. (Describe in Schedule O.)	ha of C	\ (D=	onuo ¢			,	
(Expenses \$ including gran) (Revi	enue \$				
4e Total program service expenses ► 6	5,924.						

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		х
3	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	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		х
11	Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	х	
•	Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI			
•	 Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII 			
•	Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII			
	• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX			
•	• Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X			
•	 Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If Yes,' complete Schedule D, Part X 			
12	Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12		х
12/	AWas the organization included in consolidated, independent audited financial statement for the tax Yes No			
	year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional	12	 -	
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E a Did the organization maintain an office, employees, or agents outside of the United States?	13 14a	-	X
	b Did the organization maintain an onice, employees, or agents outside or the office States: b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Part I.	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III	16		х
	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		x
20		20		х

Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II 21 X Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III 22 X Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J . . . 23 X 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25 24a X b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an 'on behalf of issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If Yes, complete Schedule L, Part I 25a X b is the organization 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 25b Х Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II 26 X Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III. 27 X Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV. 28a Х **b** A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete 28b x c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV 28c X Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 X Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M 30 X . . . Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N. Part I... 31 Х Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II 32 х 33 X Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, 34 X Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, 35 Part V. line 2 X .. . Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI 37 X Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? 38 38 X BAA Form 990 (2009)

Statements Regarding Other IRS Filings and Tax Compliance Yes No 1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. 0 0 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . . . 1b c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1 c X 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the 2a calendar year ending with or within the year covered by this return 2b 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by За 3ь b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 4a 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)? 4a X **b** 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. 5a 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? X 5**b** Х b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited 5c Tax Shelter Transaction? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization 6a X solicit any contributions that were not tax deductible? b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not 6ь Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services 7 a provided to the payor? 7b **b** If 'Yes,' did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file 7 c Form 8282? . e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 74 x f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? **7**f X 7g g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? . 7h h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? . Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business 8 X holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9,9 X Х **b** Did the organization make any distribution to a donor, donor advisor, or related person? . . 10 Section 501(c)(7) organizations. Enter: a initiation fees and capital contributions included on Part VIII, line 12 10a b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: a Gross income from other members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against 11h amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a

Form 990 (2009)

b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year

Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

sec	tion A.	Governin	g boa	y and	ı mar	iage	mer	<u> T</u>							 						
_				_										1	بایما			_		Yes	No
		number of v	-			-		•	•		•			·	1a 4						
b	Enter the	number of v	oting m	ember	s that	are in	ndepe	ende	∌nt .	• • • •	• •			ا. ٠	1b 4	<u> </u>					
2	Did any of officer, d	officer, directo irector, truste	or, truste e or ke	ee, or l y empl	key er loyee?	mploy	/ee ha	ave a	a fam	nily rel	lation	ship or	a busine:	ss rel	ationsh	ip with a	any other		2		х
3	Did the o	rganization d s, directors o	lelegate	contro	ol over kev en	mana	agem	nent to a r	dutie: mana	s cust	tomar	ily perf	ormed by	or ur	nder the	e direct	supervis	ion	3		x
4		rganization n			-					-			•	p0.00		•		r	4		x
·		prior Form 9				-	-												-		
5		rganization b	-					of a	mate	erial di	íversii	on of th	e organiz	ration	's asse	ts?	·	,	5		X
6		organization			_		-						5					-	6	х	-
7a	Does the	organization							other	perso	ns w	no may	elect one	e or m	nore me	mbers	of the		7a		v
	governin	g body: decisions of t	ha cove	· ··	hody s	subjec	ct to s	annr	oval t	hu ma	mhan	e etacl	holdere	or 0#	nor nor	one?		 	7b	х	X
																		}	-	^	
8	Did the o	organization c ving.	ontemp	oraneo	ously d	iocum	nent t	the n	neetir	ngs he	eld or	writter	actions	under	taken c	luring th	e year b	у			
а	The gove	erning body?														•		.	8a	Х	
b	Each cor	nmittee with	authority	y to ac	t on be	ehalf	of the	e go	vemi	ng bo	dy?								8ь	X	
9	is there a	any officer, di tion's mailing	rector o	or trusto s? <i>If</i> ')	ee, or Yes.' p	key e	emplo	oyee • nan	listed	d in P	art VI	II, Sect	on A, wh	o can	not be	reached	at the		9		х
Sec	tion B.	Policies							_				olicies		equire	ed by i	he Inte	rnal			
Reve	enue Code	e.)	•			•	•					·			•	-					
		•																		Yes	No
10a	Does the	organization	have lo	ocal ch	apters	s, brai	nches	s, or	· affilia	ates?								[10a	Х	
t	If 'Yes,' o	does the organiches to ensu	inization	i have	writter	n pol	icies a	and pent v	proce	edures	s gove	erning (he activit	ies of	such c	hapters	, affiliate	s,	10Ь	х	i
		organization i		-															11	X	
		ın Schedule	-	•	-							_	-	-				``	<u>···</u>		
		organization	•			-	-	•	•									F	12a		х
		ers, directors								•				ests t	that cou	ıld give	rıse		12Ь		
c	Does the	organization O how this	regular	rly and	consi	stent	ly mo	nitor	r and	enfor	се со	mpliani	e with th	e poli	cy? If	Yes,' de	escribe in	, [12c		
12		organization		writte	n whic	tleblo	· NWAT I	notic	·v2	•		•	•		•	•			13		х
14		organization							-	i destr	aictioi	n nolice	7	•		•		· · · -	14		X
		•																- +			
	persons,	comparabilit	y data, a	and co	ontemp	porane	eous	subs	stanti	ation	of the	delibe	ration an	d dec	ipprova ision?	i by ind	ependen		_		
		ınızation's CE					-		agem	nent of	fficial								15a		<u>X</u>
ł		icers of key			•	•					• . •					•		· -	15b		<u> </u>
	If 'Yes' to	o line 15a or	15b, des	scribe	the pro	ocess	s in S	ichec	dule (O. (Se	e ins	truction	s.)						- 1		
16 <i>a</i>		organization in ring the year		, contri	ibute a	assets	s to, o	or pa	articip	pate ir	n a joi	int vent	ure or sin	nilar a	arrange	ment w	th a taxa		16a		х
ŧ	in joint v	has the organenture arrang th respect to	rements	: under	r applic	cable	: fedei	eral ta	ax lav	w. and	i take	n steps	to safeg	ation uard	to eval the org	uate its anızatıo	participa n's exem	ipt	16Ь		
Sec		Disclosu											-								<u> </u>
		states with wh		opy of	this Fo	orm 9	990 is	rea	uired	to be	filed	► Ma	rylan	.d	•		·				
	Section	6104 requires	an orga	anizatı	on to r	make	ıts F	orms	s 102	3 (or	1024	of application			d 990-T	(501(c)	(3)s only) availa	ble f	or pul	blic
		website		٦	ther's v				_	_		equest		•							
19		in Schedule			nd if so	o, hov	w) the	e org	janiza	ation i	make	s its go	verning d	ocum	ents, c	onflict o	f interest	policy,	and	finan	cial
20		ame, phys	•		and tel	lepho	ne nı	umbe	er of	the pe	erson	who po	ssesses	the b	ooks ar	nd recor	ds of the	organi	zatio	n.	
		am A. Ro				•				-		•					45	- T			0193

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Section A.

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organizations's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of 'key employees.'
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A)	(B)			(4				(D)	(E)	(F)
Name and Title	Average hours		_		all t	hat app		Reportable compensation from	Reportable compensation from	Estimated amount of other
	per week	advided trustee or director	institutional lausten	Officer	Key employee	High est compensated employee	Former	the organization (W 2/1099 MISC)	related organizations (W-2/1099 MISC)	compensation from the organization and related organizations
Oonald_Buschman President	10.00			x				0.	0.	. (
Michael Mulford	8.00			х				0.	0.	(
Secretary William A. Rowe, III						-				·
Treasurer	8.00			Х	ļ		├	0.	0.	
Joseph Fiedler Vice President	8.00			x				0.	0.	
										·····
				· · · · · ·	-					·····
										,
							-			
				L	I					
					-					

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A)
(B)
(C)
Compensation

Compensation

Compensation

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Га		iii Statement of Re	venue		(A)	(B)	(0)	(D)
					Total revenue	Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
250	1 a	Federated campaigns	1a					
좋	b	Membership dues	1b					
S S	c	: Fundraising events	<u>1c</u>					
FE 등	d	Related organizations	. <u>1d</u>					
\$ E	е	Government grants (contribution	ons) <u>1 e</u>					
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	f	All other contributions, gifts, g similar amounts not included	grants, and above 1 f	77.				
E O	g	Noncash contribus included in						
	h	Total. Add lines 1a-1f .			77.			
UE				Business Code				
¥	2a	1						
2	b)						
볼	c							
E	d	1						
¥	е)						
PROGRAM SERVICE REVENUE	f	All other program service						
¥	g	Total. Add lines 2a-2f						
	3	Investment income (incl	udina dividend	s, interest and				
		other similar amounts)	,	. >	15,658.	15,658.	0.	0.
	4	Income from investmen	t of tax-exemp	t bond proceeds 🕞				
	5	Royalties .		<u> </u>				
			(i) Real	(ii) Personal				
	6a	Gross Rents	5,225	5.				
	b	Less: rental expenses	9,584	1.				
	C	: Rental income or (loss) .	-4,359	9.				
	d	Net rental income or (lo		<u> </u>	-4,359.	-4,359.	0.	0.
	7a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	78,710	D.				
	b	Less: cost or other basis						
		and sales expenses.	77,642					•
		Gain or (loss)	1,068					
	d	Net gain or (loss)		. <u> </u>	1,068.	1,068.	0.	0.
#UE	88	Gross income from fund (not including \$	traising events					
		of contributions reported	d on line 1c).					
~		See Part IV, line 18		a				
OTHER REVE	b	Less: direct expenses		b				
0	c	Net income or (loss) fro	m fundraising	events .				
	9a	Gross income from gam See Part IV, line 19	ning activities.	а				
		Less: direct expenses			1			
	•	: Net income or (loss) fro	m gaming acti	vities				
	10 a	Gross sales of inventory and allowances	, less returns	a				
	Ł	Less: cost of goods sole			1			
		: Net income or (loss) fro			1			
		Miscellaneous Reven		Business Code]		***********	
	11 a	·						
	t)	_					
		;						
	•	All other revenue						
	e	Total. Add lines 11a-11i	1	>				
	12	Total revenue. See insti	ructions	▶	12,444.	12,367.	0.	0.

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). (D) Fundraising (A) Total expenses Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. Management and general expenses Program service expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, 6,924. 6,924 line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 . . Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B) Other salaries and wages Pension plan contributions (include section 401(k) and section 403(b) employer contributions) Other employee benefits Payroll taxes Fees for services (non-employees) a Management **b** Legal 400 0. 400 0. c Accounting d Lobbying . . . e Prof fundraising svcs. See Part IV, In 17 f Investment management fees . g Other Office expenses Information technology ... 15 Royalties Occupancy 16 Travel Payments of travel or entertainment expenses for any federal, state, or local 19 Conferences, conventions, and meetings 20 Interest . . Payments to affiliates 14,408 0 7,204 Depreciation, depletion, and amortization 7,204. 23 Insurance Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) 190 0 a Bank Service Charges 190 6,924 25 Total functional expenses. Add lines 1 through 24f 21,922 7,794 7,204. Joint costs. Check here ▶ ☐ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational

campaign and fundraising solicitation

Capital stock or trust principal, or current funds .

Total liabilities and net assets/fund balances.

31 Paid-in or capital surplus, or land, building, and equipment fund

32 Retained earnings, endowment, accumulated income, or other funds

Part X Balance Sheet End of year Beginning of year 2,479 1 2,833. Cash - non-interest-bearing 2 2 Savings and temporary cash investments . . . 3 3 Pledges and grants receivable, net Accounts receivable, net 4 Receivables from current and former officers, directors, trustees, key employees, 5 and highest compensated employees. Complete Part II of Schedule L Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L . . 6 7 Notes and loans receivable, net 8 8 Inventories for sale or use . 9 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. . | 10a | 387,026. Complete Part VI of Schedule D 10Ь 67,583. 326,647. 319,443. **b** Less: accumulated depreciation. 11 11 Investments — publicly-traded securities 360,431 362,026. 12 13 Investments – program-related. See Part IV, line 11 13 14 15 15 Other assets. See Part IV, line 11 16 16 Total assets. Add lines 1 through 15 (must equal line 34) . 689,557. 684,302. 17 Accounts payable and accrued expenses . . . 17 18 Grants payable 18 19 19 Deferred revenue ... 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II LITIES 22 of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties . . . 24 25 25 Other liabilities. Complete Part X of Schedule D 0 26 0. 26 Total liabilities. Add lines 17 through 25 . Organizations that follow SFAS 117, check here X and complete lines 27 through 29 and lines 33 and 34. 27 28 689,557. 684,302. 28 Temporarily restricted net assets 29 29 Š Organizations that do not follow SFAS 117, check here lines 30 through 34.

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684,302. Form **990** (2009)

684,302.

<u>30</u> 31

32

33

689,557.

689,557.

Form 990 (2009) Optimist Club of Loch Raven, Maryland, Foundation, Inc. 52	-1973885	Pa	ige 12
Part.XI Financial Statements and Reporting			
		Yes	No
1 Accounting method used to prepare the Form 990. X Cash Accrual Other			
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.			
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		х
b Were the organization's financial statements audited by an independent accountant?	2b		х
c if 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of t review, or compilation of its financial statements and selection of an independent accountant?			
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d if 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issu consolidated basis, separate basis, or both:	ed on a		
Separate basis Consolidated basis Both consolidated and separate basis			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Audit Act and OMB Circular A-133?	Single 3a		x
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audits, explain why in Schedule O and describe any steps taken to undergo such audits.	uired audit		

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Form 990 (2009)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions 2009

OMB No 1545-0047

Open to Public Inspection

Name of the organization Employer Identification number Optimist Club of Loch Raven, Maryland, Foundation, Inc. 52~1973885 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or for any other purpose conferring impermissible private benefit?? No Part II Conservation Easements Complete if the organization answered 'Yes' to Form 990, Part IV. 1 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Year 2a a Total number of conservation easements **b** Total acreage restricted by conservation easements **2b** c Number of conservation easements on a certified historic structure included in (a) 2c 2d d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located > No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: Revenues included in Form 990, Part VIII, line 1 ▶\$ 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: a Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

. •\$

				Foundation, Inc.	52-197			Page 2
Part III Organizations Mainta	ning Collec	ctions of A	rt, Histori	cal Treasures, or (Other Similar Asse	ts (cor	ntınue	d)
3 Using the organization's acquisition items (check all that apply):	on accession	and other red	cords, check	any of the following the	at are a significant use	of its co	llection	1
a Public exhibition		d	Loan or	exchange programs				
b Scholarly research		е	U Other					
c Preservation for future gener	ations							
4 Provide a description of the organ Part XIV.			•		, , ,	ın		
5 During the year, did the organiza assets to be sold to raise funds r	tion solicit or i	receive donat	tions of art, I	nistorical treasures, or the organization's colle	other similar	Yes	Γ	No
Part IV Escrow and Custodia 9, or reported an amo	Arrangem	ents Comp	olete if org	anization answere			IV, li	
1a Is the organization an agent, trus included on Form 990, Part X?	itee, custodiar	n, or other int	ermediary fo	or contributions or other	r assets not	Yes	Г	No
b if 'Yes,' explain the arrangement					'		٠.	
. ,		•				Amount		
c Beginning balance					. 1c			
d Additions during the year					. 1d			
e Distributions during the year					1e			
f Ending balance					11			
2a Did the organization include an a	mount on For	m 990, Part X	K, line 21?			Yes		No
b If 'Yes,' explain the arrangement	ın Part XIV					-	-	
Part V Endowment Funds Cor	mplete if or	ganization	answered	l 'Yes' to Form 990), Part IV, line 10.			
	(a) Current	year	(b) Prior year	(c) Two years back	(d) Three years back	(e) F	our years	s back
1a Beginning of year balance .						T		
b Contributions						ļ		
c Net Investment earnings, gains, and losses								
d Grants or scholarships						1		
e Other expenditures for facilities and programs								
f Administrative expenses						<u></u>		
g End of year balance						<u> </u>		
2 Provide the estimated percentage	e of the year of	end balance l	neld as:					
a Board designated or quasi-endov	vment ►		.					
b Permanent endowment ▶								
c Term endowment ▶	8							
3a Are there endowment funds not a organization by:	n the possess	sion of the org	ganization th	at are held and admini	stered for the	٢	Yes	No
(i) unrelated organizations				•		3a(i)		
(ii) related organizations					• • •	3a(ii)		
b If 'Yes' to 3a(ii), are the related of	organizations !	listed as requ	ired on Sche	edule R?		3b		
4 Describe in Part XIV the intended	d uses of the	organization's	endowmen	t funds.				
Part VI Investments-Land, B	uildings, a	nd Equipm	ent. See F	orm 990, Part X, I	line 10.			
Description of investment	ł	(a) Cost or o		(b) Cost or other basis (other)	(c) Accumulated Depreciation	(d) E	Book Va	alue
1a Land		7	9,371.					,371.
b Buildings		28	0,866.		64,528.		216,	,338.
c Leasehold improvements								
d Equipment		2	6,789.		3,055.		23,	,734.
e Other	<u></u>	<u></u>						
Total. Add lines 1a through 1e (Column	n (d) must eq	ual Form 990,	, Part X, coli	umn (B), line 10(c).)			319,	,443.
PAA					······································	Jula D Æ	orm or	201 2000

	D (Form 990) 2009 Optimist Club of Loch Ra	ven, Maryland, Founda	tion, Inc.	52-1973885	Page 3
Part VII	Investments—Other Securities See Fo	rm 990, Part X, line	12.		
	(a) Description of security or category (including name of security)	(b) Book value	(c) N Cost or e	Method of valuation and-of-year market value	
	derivatives			······································	
	eld equity interests			·········	
Other					
					
					
					
		-			
				 	
			· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
Total (Colu	ımn (b) must equal Form 990 Part X, col. (B) line 12.)				
	I Investments—Program Related (See F	orm 990 Part X line	13)		
T art viii	(a) Description of investment type	(b) Book value		Method of valuation	
	(a) Description of investment type	(b) Book value	Cost or e	nd-of-year market value	
			· · · · · · · · · · · · · · · · · · ·		·····
					
					
					
				······································	
			· .		
		<u> </u>			
	(I) (I = 000 B + W 0 + (0) 10)				
Part IX	mn (b) must equal Form 990, Part X, Col. (B) line 13.) • Other Assets (See Form 990, Part X, I	line 15)			
[ait ix		scription	 	(b) Boo	k value
	(a) De	Scription		(5) 200	N Value
		· · · · · · · · · · · · · · · · · · ·	······································		
	· · · · · · · · · · · · · · · · · · ·				
Total. (Co	olumn (b) must equal Form 990, Part X, col.(B), lir			. ▶	
Part X	Other Liabilities (See Form 990, Part	X, line 25)	· ·		
	(a) Description of Liability	(b) Amount			
Federal In	ncome Taxes		_}		
			_		
			<u> </u>		
			_		
			4		
			-		
			_		
	 				
			_		
	· · · · · · · · · · · · · · · · · · ·				
T. 1 1 15 1	AND THE STATE OF T		-		
	mn (b) must equal Form 990, Part X, col. (B) line 25)		In a seal of the seal of the		
for uncert	Footnote. In Part XIV, provide the text of the footnote tax positions under FIN 48.	iole to the organization's f	manciai statements tr	iai reports the organization.	s napility

Sch	edule D (Form 990) 2009 Optimist Club of Loch Raven, Maryland, Foundation, Inc.	52-1973885	Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		
2	Total expenses (Form 990, Part IX, column (A), line 25)		
3	Excess or (deficit) for the year. Subtract line 2 from line 1		
4	Net unrealized gains (losses) on investments		
5	Donated services and use of facilities	·	
6	Investment expenses		
7	Prior period adjustments		
8	Other (Describe in Part XIV)		
9	Total adjustments (net). Add lines 4 through 8	· · · ·	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	· ·	
_	rt XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return	
1	Total revenue, gains, and other support per audited financial statements	1	
_	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	 	
	· · · · · · · · · · · · · · · · · · ·		
	a Net unrealized gains on investments		
	Donated services and use of facilities		
	Recoveries of prior year grants	<u> </u>	
	d Other (Describe in Part XIV)		
_	Add lines 2a through 2d	. 2e	
3	Subtract line 2e from line 1	. 3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
	a Investments expenses not included on Form 990, Part VIII, line 7b 4a		
l	Other (Describe in Part XIV)		
•	Add lines 4a and 4b	4c	
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	
Pa	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses p	er Return	
1	Total expenses and losses per audited financial statements	1	·
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
	a Donated services and use of facilities		
ı	Prior year adjustments		
(Cother losses		
(d Other (Describe in Part XIV)		
	a Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	. 3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
i	a Investments expenses not included on Form 990, Part VIII, line 7b 4a		
i	b Other (Describe in Part XIV)		
	c Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c (This must equal Form 990, Part I, line 18.)	. 5	
	t XIV Supplemental Information		
line	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part 4; Part X, line 2; Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this mation.	IV, lines 1b and 2b; Pa part to provide any add	irt V, ditional
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		. 	

TEEA3304 02/02/10

Schedule **D** (Form 990) 2009

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Schedule D	(Form 990) 2009	Optimist Club of Loch Raven, Maryland, Foundation, Inc.	52-1973885	Page 5
Part XIV	Supplemental	Optimist Club of Loch Raven, Maryland, Foundation, Inc. Information (continued)		- -
		,		

SCHEDULE 1 (Form 990)		a P	Grants and Oth Governments an	and Other Assistance to Organizations, nents and Individuals in the United States	o Organizations the United Star	s, les		2009 2009
Department of the Treasury Internal Revenue Service		Comple	Complete if the organizatio	organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22. ► Attatch to Form 990.	rm 990, Part IV, lines 2').	l or 22	. 	Open to Public Inspection
Name of the organization Optimist Club	e organization ist Club of Loch Raven, Maryland, Fo	i, Maryland,	Foundation	Inc.			Employer identification number 52-1973885	ation number 8.5
1 Does the organize the selection crite	ation maintain records the grant the	to substantiate the a grants or assistance.	mount of the grants	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	itees' eligibility for the g	rants or assistance, a		X Yes
12	Grants and Other Assistance to Governments and Organizations 990, Part IV, line 21 for any recipient that received more than \$5,0 Part IV and Schedule I-1 (Form 990) if additional space is needed	tecipient that report 990) if addit		Organizations in the United States. Complete if the organization answered 'Yes' to Form more than \$5,000. Check this box if no one recipient received more than \$5,000. Use bace is needed	d States. Complete	if the organizatio	on answered 'Ye more than \$5,00	s' to Form 0. Use ► 🏲
1 (a) Name and address of organization or government	ess of organization	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of mon cash assistance	(book, FMV, appraisal, other)	(g) Description of non cash assistance	(h) Purpose of grant or assistance
2 Enter total number	Enter total number of section 501(c)(3) and government organizations	and government orga						
	For Privacy Act and Paperwork Reductic	ion Act Notice, see	the Instructions for	Form 990.	TEEA3901	02/10/10	Sche	Schedule I (Form 990) 2009

Schedule 1 (Form 990) 2009 (f) Description of non cash assistance (Form 990) 2009 Optimist Club of Loch Raven, Maryland, Foundation, Inc.

| Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed. Part IV | Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) ___The_organization_receives any grant funds through the Treasurer._ (d) Amount of non-cash assistance No grant funds were received in 2008. (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance Pt_I Line 2_ Pt_I Line 2_ Part III BAA

Page 2

Schedule I (Form 990) 2009

SCHEDULE O (Form, 990)

Supplemental Information to Form 990

OMB No 1545-0047

2009

Open to Public Inspection

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Pepartment of the Treasury Internal Revenue Service

Attach to Form 990.

-	Employer identification number
Optimist Club of Loch Raven, Maryland, Foundation, Inc.	52-1973885
Pt VI-A, Line 6 The organization has members	
Pt VI-A, Line 7b Members approve the decisions of the organizat	<u>ion</u>
Pt VI-A, Line 8a Decisions of the governing body are recorded i	n_minutes
Pt_VI-A, Line 8b Committee decisions are recorded in minutes.	
Pt VI-B, Line 11AThe Form 990 is reviewed by the members.	
Pt VI-C, Line 19 Governing documents are available at 8719 Gree	n Pastures Drive
	
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Supporting Statement of:

Form 990 p 9/Line 3 Column B

Description	Amount	
Bond interest SUSA	745.	
Bond interest AT&T	1,324.	
Bond interest CSX	1,960.	
Bond interest FNMA CMO 2003	764.	
Bond interest FNMA REMIC CMO 1992	98.	
Bond interest GMAC	3,319.	
Bond interest GMAC	713.	
Bond interest Toyota Motor Corp	950.	
Bond interest Caterpillar Financial	400.	
Bond interest FNMA 5% 2019	278.	
Dividend ALTRIA Group Inc	210.	
Bond interest AT&T Inc.	2,072.	
Dividend Bristol-Myers Squibb Co.	128.	
Bond interest Comcast Corporation	497.	
Dividend Corning Inc.	60.	
Dividend Frontier Communications	11.	
Dividend Wisdomtree Emerging Market	174.	
Dividend General Electric	180.	
Dividend Genuine Parts Co.	164.	
Dividend Marathon Oil Corp.	418.	
Dividend Merck and Co Inc.	285.	
Dividend Merck&Co.	95.	
Dividend Pfizer Inc	216.	
Dividend Verizon Communications	475.	
Dividend Yum Brands	84.	
Dividend T. Rowe Price Blue Chip	21.	
Bank deposit interest	4.	
Bank deposit interest		
Total	15,658.	

Supporting Statement of:

Form 990 p 9/Real Rental Expenses

Description	Amount
Building Insurance	1,203.
Repairs and Maintenance	1,624.
Building supplies expense	490.
Building utilities	6,267.

Total 9,584.

Supporting Statement of:

Form 990 p 9/Sales of Securities

Description	Amount		
1000 Sek Arn Index	9,198.		
100 Google Inc	59,901.		
1000 ML&Co Capped Lirn	9,611.		
Total	78,710.		

Supporting Statement of:

Form 990 p 9/Gross Basis Amount

Description	Amount		
1000 Sek Arn Index	10,000.		
100 Google Inc	57,642.		
1000 ML&Co Capped Lirn	10,000.		

Supporting Statement of:

Form 990 p 10/Line 1 col (B)

Description	Amount	
Greater Loch Raven Community Giving	2,570.	
Halloween Parade	300.	
Local High School Scholarship	1,100.	
Mothers Day	400.	
Oratorical	554.	
Post Prom Parties	500.	
St. Andrews Food Bank	1,500.	
Total	6,924.	

Supporting Statement of:

Form 990 p 10/Line 22 col (D)

Description	Amount
Building and equipment	7,204.

Total

7,204.

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Su	pportina	Statement of:

Form	990	n	10.	/Line	24	col	(C) -	1

Description	Amount
Bank of America	40.
Merrill Lynch EMA Fee	150.
Total	190.

Supporting Statement of:

Form 990 p 11/Line 1, column (A)

Description	Amount
Bank of America Checking	2,479.
Total	2,479.

Supporting Statement of:

Form 990 p 11/Line 1, column (B)

Description	Amount
Bank of America	2,833.
Total	2,833.

Supporting Statement of:

Form 990 p 11/Line 11, column (A)

Description	Amount
Merrill Lynch - at cost	360,431.
Total	360,431.

Supporting Statement of:

Form 990 p 11/Line 11, column (B)

Description	Amount
Merrill Lynch at cost	362,026.

Continued

Supporting Statement of	Sut	portina	Statement	of:
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Form 990 p 11/Line 11, column (B)

Description	Amount
Total	362,026.

Supporting Statement of:

Sch D, page 2/Land Col (a)

Description	Amount
Land 8719 Green Pastures Drive	79,371.
Total	79,371.

Supporting Statement of:

Sch D, page 2/Buildings col (a)

Description	Amount
Building	133,234
Building improvements 2000	27,687
Building improvements 2001	60,379
Building improvements 2003	14,127
Building improvements 2007	31,883
New shed and brick patio	13,556

Total <u>280,866.</u>

Supporting Statement of:

Sch D, page 2/Buildings col (c)

Description	Amount
Building	37,152.
Building improvements 2000	6,852.
Building improvements 2001	13,469.
Building improvements 2003	2,503.
Building improvements 2007	2,018.
New shed and brick patio	2,534.

Total _____64,528.

Supporting Statement of:

Sch D, page 2/Equipment col (a)

Description	Amount
Equipment	23,734.
AV equipment	3,055.
Total	26,789.

Supporting Statement of:

Sch D, page 2/Equipment col (c)

Description	Amount
AV Equipment	3,055.
Total	3,055.