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Form **990**

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

2010

Department of the Treasury Internal Revenue Service

► The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public Inspection

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Form 990 (2010) BOURG LIONS CLUB

Part IV | Checklist of Required Schedules

			Yes	No
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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		_X_
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	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	-	Х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election. In effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5	Х	
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		х
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		X
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? <i>If 'Yes,' complete Schedule D, Part VI</i>	11 a	х	
	b 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	11 b		х
	c 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	11 c		х
	d 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	11 d		х
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		_X_
	f 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 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		x
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a		X
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	_	Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	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, Parts I and IV	14b		х
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, Parts II and IV	15		X
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, Parts III and IV	16		X
17	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 (see instructions)	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	х	
20	a Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		X
	b If 'Yes' to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20 b		

	·		Yes	No
21	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	Х	
22	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		Х
23	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? <i>If 'Yes,' complete Schedule J</i>	23		Х
24 a	a 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		х
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		
25 a	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		х
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
26	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		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		-4	V.5
а	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Χ
b	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		х
	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	-	Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
	The state of the s	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	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35_		X
а	a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2			
36	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		
37	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		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	х	
BAA		Form	990 (2010

Form 990 (2010) BOURG LIONS CLUB 72-6055796 Page 5 Part V | Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V Yes No 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 0 **b** Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 0 1 b c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1 c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this-returnb If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2 F Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 32 Х b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 3b 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) Х 4a **b** If 'Yes,' enter the name of the foreign country See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5.4 Х b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? Х 5b c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? 5с 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 6a Х **b** If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). d 15, 50 a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7 a Х b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7 b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file 7с Х d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 e Х f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f Х g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? **7**g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h 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 holdings at any time during the year? 8 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9a **b** Did the organization make a distribution to a donor, donor advisor, or related person? 9b 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 10b 5 (3 11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders 11 a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11 b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O } : **b** Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b 13c c Enter the amount of reserves on hand 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a Х

b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O

14b

Par	Tt VI [§] Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes Schedule O. See instructions.	ow, a ges ii	and f	or
	Check if Schedule O contains a response to any question in this Part VI			X
Sec	ction A. Governing Body and Management			
			Yes	No
	a Enter the number of voting members of the governing body at the end of the tax year b Enter the number of voting members included in line 1a, above, who are independent 10	,	2	,
_2	_Did_any_officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee?	2		_ x
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Does the organization have members or stockholders?	6	Х	
7 a	a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7 a	Х	
ì	b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Х	<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	a The governing body?	8 a	X	
9	b Each committee with authority to act on behalf of the governing body? Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	8b	Х	
Soc	organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	9		X
<u> </u>	Ction B. I Oncies (This Section D requests information about policies not required by the internal Revenue Code.)		Yes	No
10:	a Does the organization have local chapters, branches, or affiliates?	10a	X	140
•	b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		X
11 a	a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11 a	Х	<u> </u>
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	a Does the organization have a written conflict of interest policy? If 'No,' go to line 13	12a		X
	b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
	c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done	12c		
	Does the organization have a written whistleblower policy?	13		X
	Does the organization have a written document retention and destruction policy?	14		X
	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		~~ ~	
	a The organization's CEO, Executive Director, or top management official	15a		X
'	b Other officers of key employees of the organization If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions)	15b		X
16	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	die.	x
	b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		1
Sec	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► Louisiana			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) avainspection. Indicate how you make these available. Check all that apply. Own website	ılable	for pu	iblic
19	Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy statements available to the public	, and	financ	nal
	State the name, physical address, and telephone number of the person who possesses the books and records of the organic RANDOLPH BASCLE 111 RETREAT DR BOURG LA 70343 (98)			4 <u>810</u>

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Page 7

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

Check if Schedule O contains a response to any question in this Part VII

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

- 1 a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- 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, if any See instructions for definition of 'key employee'
- 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

K Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

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

(A)	(B)		0.9		;)			(D)	(E)	(F)
Name and title	Average	Posi	tion (check	all t	that app	ly)	Reportable	Reportable	Estimated
	hours per week (describe hours for related organiza- tions in Schedule O)	ומוטולו אן היזאפה.	mshinional trustee	Offi ei	Key employee	Highest configensated employee	ru,nei	compensation from the organization (W 2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(1) LERYES USIE						ļ				
PRESIDENT	5.00			х				0.	0.	0.
(2) TOBY LOGAN										
SECRETARY	3.00			Х				0.	0.	0.
(3) WALTER AUTHEMENT	_									
TREASURER	4.00		L	Х				0.	0.	0.
(4) LLOYD AUCOIN	_									
1ST V P	5.00			Х				0.	0.	0.
_(5)_RILEY_TALBOT	_									
2ND V P	5.00			Х				0.	0.	0.
(6) RUSSELL_BOQUET	_									
3RS_V_P	5.00	ļ <u>.</u>		Х			<u>_</u>	0.	0.	0.
_(7)_BERWICK_OLIVIER	_					ļ		_	_ [
LION TAMER	5.00	-	<u> </u>	X	_		<u> </u>	0.	0.	0.
_(8)_CURRY_MATHERNE										_
TAIL TWISTER	5.00	<u> </u>	<u> </u>	Х		<u> </u>	_	0.	0.	0.
(9) CARROLL CHARPENTIER										•
1ST YEAR BOARD	4.00	X				 	-	0.	0.	0.
(10) RANDOLPH BASCLE	- 00	v							_	0
BOARD CHAIRMAN	6.00	X		_				0.	0.	0.
(11) DONALD NAQUIN 2ND YEAR BOARD	4.00	x						0.	0.1	
(12) TERRY HEBERT	4.00	^			_		-	0.	0.	0.
3RD YEAR BOARD	- _{4.00}	x						0.	0.	0.
(13)	7.00	1								· · ·
ΣΥ	_									
<u>(14)</u>	-									-
<u>(15)</u>	-									, , ,
(16)	_									
<u>(17)</u>	_									<u> </u>
	<u> </u>		_	<u> </u>	<u> </u>			<u> </u>	<u> </u>	F: 000 (0010)

` (A)	(B)			(0	c)			(D)	(E)	(F)
Name and title	Average hours per week (describe		_	Check Officer	,—-		ply) Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the
	per week (describe hours for related organi- zations in Sch O)	idual truste ector	Institutional trustee	er	Key employee	Highest compensated employee	ier	,	,	organization and related organizations
	Sch O)		stee	_	_	sated	-		=	
18)										
19)										
20)										
21)										
22)										
23)	-									
24)										
25)										
26)										
27)										
28)										
29)										
1 b Sub-total	l	!	·	,			•	0.	0.	C
c Total from continuation sheets to Part VII, Section Ad Total (add lines 1b and 1c)	4					1	^	0.	0.	0
 Total number of individuals (including but not limited from the organization 	to those	e list	ted a	abov	/e) v	vho r	ece	eived more than \$	100,000 in reportab	le compensation
3 Did the organization list any former officer, director	or trusta	ام د	ev e	mnl	0.404	or.	hial	hest compensated	Lemployee	Yes No
on line 1a? If 'Yes,' complete Schedule J for such in: 4 For any individual listed on line 1a, is the sum of rep	dıvıdual		•	·	,		J	,	. ,	3 X
the organization and related organizations greater th	an \$150	,000)? <i>[[</i>	Ye	s' c	omple	ete	Schedule J for	ווונ	4 X
5 Did any person listed on line 1a receive or accrue or for services rendered to the organization? If 'Yes,' co	mpensa omplete	tion <i>Sch</i>	fror edu	m ar le J	ny u for s	nrela such	ted <i>per</i>	organization or ir son	ndıvıdual	5 X
Complete this table for your five highest compensate compensation from the organization	d indep	ende	ent c	contr	racto	ors th	nat i	received more tha	n \$100,000 of	
(A) Name and business addres	 S							(B)		(C) Compensation
2 Total number of independent contractors (including t	out not li	mıte	ed to	tho	se l	sted	abo	ove) who received	more than	* * **

1 41	t viii Statement of Nevellue				
• •	•	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<u>,,,</u>	1a Federated campaigns 1a		10101100		312, 313, 01 314
N S		-			,
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	b Membership dues 1b 642			 	
S, G	c Fundraising events 1c 11,806	<u>i.</u>		*	* * *
토술	_d Related_organizations 1 d	34	*	*	* * *
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	e Government grants (contributions) 1 e				
8 2	· ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	┦ *		4	
5삙	f All other contributions, gifts, grants, and	,	•		
문티	similar amounts not included above 1f 997	<u>•</u>	1	**	
동의	g Noncash contributions included in Ins 1a-1f \$			5. W	* · · '
გ∢	h Total. Add lines 1a-1f	► 13,445.	1.9	\$ / ×	# w # .
뀔	Business Code	*	,	<i>\$</i>	& , · ·
Ę,	2a				
[[,	-			j -
Ü					
<u> </u>	c		 		
SE	d				
¥	e				
<u>۾</u> ا	f All other program service revenue				
PROGRAM SERVICE REVENUE	g Total. Add lines 2a-2f	•		, ,	*

	Investment income (including dividends, interest and other similar amounts)	1 ,777.	1,777.	0.	
	•	1, 111.	1,111.	<u> </u>	0.
	4 Income from investment of tax-exempt bond proceeds	<u></u>	ļ	·	
	5 Royalties				
	(i) Real (ii) Personal		Y \$ 7	4	
	6a Gross Rents 75.	* , , *		*** *	. ***
l	b Less rental expenses			" although	
Í	c Rental income or (loss) 75.				
1	d Net rental income or (loss)		7.		'' '
1	·	<u>▶ 75.</u>	75.	0.	0.
	7a Gross amount from sales of (i) Securities (ii) Other	~ ~ *· *·	* * * * * * * * * * * * * * * * * * *	ŵ ^	
ł	assets other than inventory	_ ♦, *	* *	1 2.1 w	*
	b Less cost or other basis	* ***		l <i>a</i> ` .	,
	and sales expenses		#1	1-3. 	
1	c Gain or (loss)				***
1	d Net gain or (loss)	>	a land over 1991 to construct to the construction of the construct	· · · · · · · · · · · · · · · · · · ·	an aparini aminina a Car a minina
Į			/ /	7	·
Ę	8a Gross income from fundraising events (not including \$ 11,806.	7 4		* *	y ; .
		*	* * *		,
OTHER REVE	of contributions reported on line 1c)		· ·	* 4	
~	See Part IV, line 18	_	1 .		* * * '
ᇀ	b Less. direct expenses b	_	9	* .	* *
۰ ا	c Net income or (loss) from fundraising events	>	, , ,		
	9a Gross income from gaming activities	*	<i>*</i>	? . #	** *
	9a Gross income from gaming activities See Part IV, line 19 a 292, 463) is	M 12 N	
	b Less direct expenses b 263,734		C		
	c Net income or (loss) from gaming activities			<u> </u>	
		<u>▶ 28,729.</u>	0.	0.	28,729.
	10a Gross sales of inventory, less returns	§**	* \$ \$	**	× 4
	and allowances a 2,723	<u>•</u> « «	A	4 • •	* *
	b Less: cost of goods sold b				
	c Net income or (loss) from sales of inventory	<u>▶</u> 2,723.	2,723.	0.	0.
Ī	Miscellaneous Revenue Business Code				, ,
İ	11a				,
	h				
	~			 	
	d All all a second	 			
	d All other revenue	0.	0.	0.	0.
	e Total. Add lines 11a-11d	<u>0.</u>	<u> </u>		
	12 Total revenue. See instructions	▶ 46,749.	4,575.	0.	28,729.

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)

6b, 7	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	25,583.	25,583.		*
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
—3 [—]	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16		- -	**	· •
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees			, , , y,	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	_			
7	Other salaries and wages		-		
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes			-	
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting				
d	Lobbying				
	Professional fundraising services See Part IV, line 17 Investment management fees		·	\$ 400, 1	
g	Other				
12	Advertising and promotion				
13	Office expenses	166.	0.	166.	0
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,448.	0.	1,448.	0
20	Interest				-
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	4,721.	0.	4,721.	0
23	Insurance				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10%				
	of line 25, column (A) amount, list line 24f expenses on Schedule O.)			3.00	*
9	PICKLE JAR	4,747.	0.	0.	4,747
	PLAYGROUND	609.	0.	609.	0
	DUES	900.	0.	900.	0
	SUPPLIES	197.	0.	197.	0
е	·	157.	· ·	137.	
	All other expenses	20 051	05 500	0.011	=
	Total functional expenses. Add lines 1 through 24f	38,371.	25,583.	8,041.	4,747
26	Joint costs. Check here ► ☐ if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

₽₽a	ırt X	Balance Sheet				
		•		(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing			1	1,572.
	2	Savings and temporary cash investments		176,534.	2	188,061.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Receivables from current and former officers, directors and highest compensated employees. Complete Part I	s, trustees, key employees,			
Δ.	6	Receivables from other disqualified persons (as define persons described in section 4958(c)(3)(B), and contrisponsoring organizations of section 501(c)(9) voluntar organizations (see instructions)	buting employers and		6	
A S E T S	7	Notes and loans receivable, net			7	
Ě	8	Inventories for sale or use			8	
Ś	9	Prepaid expenses and deferred charges	1		9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 112,297.			
	b	Less accumulated depreciation	10b 97,954.	19,064.	10 c	14,343.
	11	Investments – publicly traded securities			11	
	12	Investments – other securities See Part IV, line 11			12	
	13	Investments – program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11			15	
	16	Total assets Add lines 1 through 15 (must equal line	34)	195,598.	16	203,976.
	17	Accounts payable and accrued expenses			17	
	18	Grants payable			18	
	19	Deferred revenue			19	
Ţ	20	Tax-exempt bond liabilities			20	
Å	21	Escrow or custodial account liability. Complete Part IV	√ of Schedule D		21	
ABILITI	22	Payables to current and former officers, directors, trus highest compensated employees, and disqualified persof Schedule L	stees, key employees, sons Complete Part II		22	
Š	23	Secured mortgages and notes payable to unrelated the	ird parties		23	
	24	Unsecured notes and loans payable to unrelated third	parties		24	
	25	Other liabilities Complete Part X of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		0.	26	0.
N E T	ŀ	Organizations that follow SFAS 117, check here ▶	and complete lines	7 94	,	: : : XX XXII
Ť		27 through 29 and lines 33 and 34.				
Ş	27	Unrestricted net assets			27	
ASSETS	28	Temporarily restricted net assets			28	
	29	Permanently restricted net assets			29	
R F		Organizations that do not follow SFAS 117, check her lines 30 through 34.	re ► X and complete		∵ ••`,	
t DZD	30	Capital stock or trust principal, or current funds		The forfamingous a second who see	30	
	31	Paid-in or capital surplus, or land, building, or equipm	ent fund		31	
Ļ	32	Retained earnings, endowment, accumulated income,		195,598.	32	203,976.
BALAZCES	33	Total net assets or fund balances		195,598.	33	203,976.
E S	34	Total liabilities and net assets/fund balances		195,598.	34	203,976.

BAA

Form **990** (2010)

Form 990 (2010) BOURG LIONS CLUB	72-6055796	Page	12
Part XI Reconciliation of Net Assets			_
Check if Schedule O contains a response to any question in this Part XI			\Box
. 1 Total revenue (must equal Part VIII, column (A), line 12)	1	46 740	`
2 Total expenses (must equal Part IX, column (A), line 25)	2	46,749	
	3	38,371	_
Revenue less expenses Subtract line 2 from line 1	4	8,378	
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<u> </u>	195,598	.
5 Other changes in net assets or fund balances (explain in Schedule O)	5		
6 Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	203,976	. – 3
Part XII Financial Statements and Reporting	1 9 1	203,370	<u>,.</u>
Check if Schedule O contains a response to any question in this Part XII		Γ	٦
		Yes N	ᅳ
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 X	-
b Were the organization's financial statements audited by an independent accountant?		2b X	\equiv
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight or review, or compilation of its financial statements and selection of an independent accountant?	f the audit,	2c X	
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 is separate basis, consolidated basis, or both	sued on a		
X Separate basis Consolidated basis Both consolidated and separate basis		<u> </u>	[
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?	ie Single	3a X	
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the reor audits, explain why in Schedule O and describe any steps taken to undergo such audits	quired audit	3b	
BAA		Form 990 (201	10)

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below.

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

OMB No 1545 0047

2010

Open to Public Inspection

f the organization answered 'Yes,' to Form 990, Part IV, line 3,	or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then
 Section 501(c)(3) organizations: Complete Parts I-A and B. I. 	On not complete Part I-C

• Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B

• Section 527 organizations: Complete Part I-A only

If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then_

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete

	•	to Form 990, Part IV, line 5 (Proxy Tax) or	Form 990-EZ, Part V,	line 35a (Proxy Tax), th	en
	of organization	ganizations: Complete Part III		Employer identifica	
	-			1 ' '	
	RG LIONS CLUB		F01/a\ au ia a	72-605579	
		rganization is exempt under section			zation.
	•	organization's direct and indirect political ca	mpaign activities in P		
	Political expenditures			► \$	
	Volunteer hours			·	
		rganization is exempt under section			
		se tax incurred by the organization under se		► \$	
	_	se tax incurred by organization managers u		► \$	
3	If the organization incurred a	section 4955 tax, did it file Form 4720 for t	his year?		Yes No
4 a	Was a correction made?				Yes No
	If 'Yes,' describe in Part IV				
Par	tં્ય-િ Complete if the o	rganization is exempt under section	on 501(c), excep	t section 501(c)(3).	
1	Enter the amount directly exp	pended by the filing organization for section	527 exempt function	activities > \$	
2	Enter the amount of the filing function activities	organization's funds contributed to other or	rganizations for section	on 527 exempt ► \$	
3	Total exempt function expendine 17b	ditures Add lines 1 and 2 Enter here and o	n Form 1120-POL,	► \$	
4	Did the filing organization file	Form 1120-POL for this year?			Yes No
5	organization made payments amount of political contribution	and employer identification number (EIN) or For each organization listed, enter the amons received that were promptly and directly action committee (PAC) If additional space	ount paid from the fill delivered to a separa	ng organization's funds ate political organization	Also enter the
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2010

Schedule C (Form 990 or 990 EZ) 20				72-605	
Part II-A Complete if section 501	the organization in (h)).	s exempt under se	ction 501(c)(3) an	d filed Form 5768 (e	election under
A Check ► if the filing	ng organization belong	s to an affiliated group			
B Check ► If the film	ng organization checke	d box A and 'limited con	trol' provisions apply		
(The term	Limits on Lobbying 'expenditures' means	g Expenditures amounts paid or incurr	ed.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditu	ures to influence public	opinion (grass roots lob	bying)		
b Total lobbying expenditu	ures to influence a legi:	slative body (direct lobby	ring)		
— -c Total-lobbying expenditum	ires (add lines 1a and	1b) ⁻			
d Other exempt purpose e	expenditures				
e Total exempt purpose e	xpenditures (add lines	1c and 1d)			
f Lobbying nontaxable an both columns	nount Enter the amour	nt from the following table	e ın		
If the amount on line 1e, col	umn (a) or (b) is Th	e lobbying nontaxable a	mount is		and the state of t
Not over \$500,000		% of the amount on line 1e			
Over \$500,000 but not over \$1		00,000 plus 15% of the excess	over \$500.000		
Over \$1,000,000 but not over \$		75,000 plus 10% of the excess			ua u
Over \$1,500,000 but not over \$		25,000 plus 5% of the excess of	<u>'''</u>		
Over \$17,000,000		.000.000	4.11.00.11.00		[*
g Grassroots nontaxable a					
h Subtract line 1g from lin	•				
i Subtract line 1f from lin					
				4700	<u> </u>
j If there is an amount of section 4911 tax for this	ner than zero on either s year?	line In or line II, did the	e organization file Forr	n 4/20 reporting	Yes No
(Sor	ne organizations that ı	Year Averaging Period L nade a section 501(h) el below. See the instruction	ection do not have to	complete all of the five gh 2f.)	
	Lobbyi	ng Expenditures During	4-Year Averaging Per	riod	1
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))			Maria Maria		

f Grassroots lobbying expenditures

BAA

Schedule **C** (Form 990 or 990-EZ) 2010

During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum,	(a)	(b)		
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public country on a legislative matter or referending.	Yes	No No		ount	
legislation, including any attempt to influence public opinion on a legislative matter or referendim			,		
through the use of	m -a		•		
——a Volunteers?———————————————————————————————————					
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?c Media advertisements?					-
d Mailings to members, legislators, or the public?					
e Publications, or published or broadcast statements?					
f Grants to other organizations for lobbying purposes?					
g Direct contact with legislators, their staffs, government officials, or a legislative body?					
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i Other activities? If 'Yes,' describe in Part IV					
j Total Add lines 1c through 1i					
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b If 'Yes,' enter the amount of any tax incurred under section 4912					
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912					
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part III-A Complete if the organization is exempt under section 501(c)(4), section 5 section 501(c)(6).	01(c)(5),	or			
				Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?			1	Х	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		Х
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?			3		Х
Part III-B Complete if the organization is exempt under section 501(c)(4), section 5 section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered 'No' OR if is answered 'Yes.'	Part III-/	A, line	3		
1 Dues, assessments and similar amounts from members		1			
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political		i* *			
expenses for which the section 527(f) tax was paid).	í				
expenses for which the section 527(f) tax was paid). a Current year		2a			
expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year		2b			
expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total	[-	
expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year		2b			
expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	:SS	2b 2c			
 expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pools. 	ess litical	2b 2c 3		-	
 expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and poexpenditure next year? 	ess litical	2b 2c 3			
 expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pools. 	ess litical	2b 2c 3			

Schedule C (Form 990 or 990-EZ) 2010 BOORG LIONS CLUB	 ge 4
Part IV * Supplemental Information (continued)	
	 - –

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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.

OMB No 1545-0047

2010

Open to Public

Employer identification number

DOL	IDG LTONG GLUD					
	JRG LIONS CLUB	41 12 15 1 011	6' '' E '		2-6055796	
Par	tl Organizations Maintaining Dono the organization answered 'Yes' t	to Form 990 Part IV June	er Similar Funds (or Accou	unts. Complete	e it
	the organization answered Tes t		·			
-	-	(a) Donor advised	tunds	(b) Fur	nds and other acco	ounts
1	Total number at end of year					
2	Aggregate contributions to (during year)					
3	Aggregate grants from (during year)	V				
4	Aggregate value at end of year		l			
5	Did the organization inform all donors and don funds are the organization's property, subject t	or advisors in writing that the to the organization's exclusive	assets held in donor ad legal control?	dvised	Yes	☐ No
6	Did the organization inform all grantees, donor used only for charitable purposes and not for the purpose conferring impermissible private bene	he benefit of the donor or dono	ng that grant funds can or advisor, or for any o	be ther	Yes	□No
Dat				- ····· 00/	_	
	till Conservation Easements. Comp			-orm 991	U, Part IV, line	7.
1	Purpose(s) of conservation easements held by		'' ''			
	Preservation of land for public use (e g , re	ecreation or education)	Preservation of an			rea
	Protection of natural habitat		Preservation of a c	ertified his	storic structure	
•	Preservation of open space					
2	Complete lines 2a through 2d if the organization last day of the tax year	on held a qualified conservation				
_	Takal assault as of a sure surely as a surely			1,,,,,,,	ld at the End of th	e Tax Year
	Total number of conservation easements		-	2a	"	
	Total acreage restricted by conservation easer			2b	·	
C	Number of conservation easements on a certification	ried historic structure included	ın (a)	2c		
	Number of conservation easements included in structure listed in the National Register	,		2d		·
3	Number of conservation easements modified, tax year ►	transferred, released, extinguis	shed, or terminated by	the organi	zation during the	
4	Number of states where property subject to con	nservation easement is located	d •			
5	Does the organization have a written policy regard enforcement of the conservation easemen	garding the periodic monitoring its it holds?	g, inspection, handling	of violation	ns, Yes	No
6	Staff and volunteer hours devoted to monitorin	ig, inspecting, and enforcing co	onservation easements	during the	e year	
7	Amount of expenses incurred in monitoring, in: \$\\$\\$	specting, and enforcing conse	rvation easements duri	ing the yea	ar	
8	Does each conservation easement reported on 170(h)(4)(B)(ı) and section 170(h)(4)(B)(ı)?	n line 2(d) above satisfy the red	quirements of section		Yes	No
9	In Part XIV, describe how the organization repinclude, if applicable, the text of the footnote to	orts conservation easements in the organization's financial s	n its revenue and expe	ense staten	nent, and balance anization's accoun	sheet, and
	conservation easements					
Par	t III Organizations Maintaining Colle Complete if the organization ans	ections of Art, Historical wered 'Yes' to Form 990	Treasures, or Oth), Part IV, line 8.	her Simi	lar Assets.	
1 a	If the organization elected, as permitted under art, historical treasures, or other similar assets in Part XIV, the text of the footnote to its finan	s held for public exhibition, edu	ication, or research in	atement ar furtherance	nd balance sheet we of public service	vorks of , provide,
t	 If the organization elected, as permitted under historical treasures, or other similar assets hel following amounts relating to these items 	SFAS 116 (ASC 958), to repoil d for public exhibition, education	rt in its revenue staten on, or research in furth	nent and baserance of	alance sheet work public service, pro	s of art, ovide the
	(i) Revenues included in Form 990, Part VIII,	line 1			► \$_	
	(ii) Assets included in Form 990, Part X				► \$	
2	If the organization received or held works of ar amounts required to be reported under SFAS 1	rt, historical treasures, or other 116 (ASC 958) relating to these	r similar assets for fina e items	incial gain,	, provide the follow	ving
a	Revenues included in Form 990, Part VIII, line	1			► \$	
L	Accete included in Form 000 Port V				- ^	-

Schedule D (Form 990) 2010 BOUR			<u> </u>			055796		Page 2
Part III Organizations Mainta	ining Colle	ctions	of Art, Histo	rical Treasures, o	r Other Similar A	ssets (d	ontini	ued)
3 Using the organization's acquisiting tems (check all that apply)	on, accession,	and ot	her records, ched	ck any of the following	that are a significant	use of its o	collectio	n
a Public exhibition			d Loan o	or exchange programs				
b Scholarly research			e U Other				_	
c Preservation for future generation								
 4 Provide a description of the organ Part XIV 						se in		
5 During the year, did the organizar assets to be sold to raise funds re	tion solicit or re ather than to b	eceive e main	donations of-art,- tained as part of	historical treasures, or the organization's coll	other similar- — ection?	Yes	. [No
Part'IV Escrow and Custodia 9, or reported an amo	l Arrangem	ents.	Complete if o	organization answe		n 990, P	art IV	, line
1 a ls the organization an agent, trus included on Form 990, Part X?	tee, custodian	, or oth	er intermediary f	or contributions or othe	er assets not	Yes	. [□ No
b If 'Yes,' explain the arrangement	ın Part XIV an	d comp	olete the following	j table	T			
						Amour	ıt	
c Beginning balance					1 c			
d Additions during the year					1 d			
e Distributions during the year					1 e			
f Ending balance	_				1f			
2a Did the organization include an a		n 990, I	Part X, line 21?			Yes	·	No
b If 'Yes,' explain the arrangement					000 D 1\/ 1	10		
Part V Endowment Funds. Co								
1. Dominion of year halous	(a) Current	<u>year</u>	(b) Prior year	(c) Two years bad	ck (d) Three years ba	ck (e)	Four yea	rs back
1 a Beginning of year balance			·· -1	-		3 /	····	
b Contributions			-) (1 <u>*</u>	**		<u> </u>
 Net investment earnings, gains, and losses 					The same of the		•	
d Grants or scholarships				-	4 30 19 V			79
e Other expenditures for facilities and programs) ;	
f Administrative expenses						3." 17.	*	· ž · ,
g End of year balance					3			
2 Provide the estimated percentage	of the year e	nd bala	nce held as					
a Board designated or quasi-endow	/ment ►		%					
b Permanent endowment ►	8							
c Term endowment ►	%							
3a Are there endowment funds not in organization by:	n the possessi	on of th	ne organization th	at are held and admin	stered for the		Yes	No
(i) unrelated organizations						3a(i)		
(ii) related organizations						3a(ii)		
b If 'Yes' to 3a(II), are the related o	rganizations li	sted as	required on Sch	edule R?		3b		
4 Describe in Part XIV the intended								,,
Part VI Land, Buildings, and	<u>Equipment</u>	. See	<u>Form 990, Pa</u>	rt X, line 10.		-1.		
Description of investment	<u> </u>		t or other basis evestment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d)	Book v	alue
1 a Land	ļ		10,000.		(m/%),		10	<u>,000.</u>
b Buildings			102,297.		97,954		4	<u>,343.</u>
c Leasehold improvements								
d Equipment								
e Other								
otal. Add lines 1a through 1e (Column	n (d) must equ	al Forn	n 990, Part X, coi	umn (B), line 10(c))		<u> </u>		,343.
BAA					Sc	hedule D (Form 99	90) 2010

2. FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

Schedule D (Form 990) 2010 BOURG LIONS CLUB	72-6055796	Page 4
Part XI: Reconciliation of Change in Net Assets from Form 990 to Audited 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		
Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue	nue per Return	
1 Total revenue, gains, and other support per audited financial statements	1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a Net unrealized gains on investments 2a		
b Donated services and use of facilities 2b		
c Recoveries of prior year grants		
d Other (Describe in Part XIV)		
e 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:	W7 : 14	
a Investments expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIV)		
c Add lines 4a and 4b	4c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	
Part XIII Reconciliation of Expenses per Audited Financial Statements With Exp		
1 Total expenses and losses per audited financial statements	1 1	
		
1 1		
· · · · · · · · · · · · · · · · · · ·		
c Other losses 2c	i. Z	
d Other (Describe in Part XIV)		
e 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:		
a Investments expenses not included on Form 990, Part VIII, line 7b 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	
Part XIV: Supplemental Information		
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and Part V, line 4; Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Als any additional information	4, Part IV, lines 1b and 2b; o complete this part to provide	·
		

Scriedule D	(Form 990) 2010 BOOKG LIONS CLOB	12-0033190	rage 3
Part XIV	Supplemental Information (continued)		
<u> </u>			
_			
		- 	

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered'Yes' to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

OMB No 1545-0047

2010

Open to Public

Name of the organization					Employer identifica	ntion number
BOURG LIONS CLUB					72-605579	6
Part I Fundraising Activities. Comple Form 990-EZ filers are not requ	te if the organ	ization ans te this pai	swered 'Ye rt	es' to Form 990, Part IV		
1Indicate-whether-the-organization-ra	ised-funds-thro	ough-any-c	of_the_follow	wing-activitiesCheck-a	II-that apply	
a Mail solicitations			е	Solicitation of non-	government grants	
b Internet and email solicitations			f	Solicitation of gove	ernment grants	
c Phone solicitations			q	Special fundraising	-	
d In-person solicitations			9		, 5.5.11.5	
2a Did the organization have a written employees listed in Form 990, Part	or oral agreem VII) or entity ir	ent with a	ny individu on with pro	ual (including officers, co ofessional fundraising s	lirectors, trustees or key ervices?	Yes No
b If 'Yes,' list the ten highest paid indicompensated at least \$5,000 by the	viduals or entit organization	ties (fundr	aisers) pui	rsuant to agreements u	nder which the fundraise	er is to be
45.11		() 5			(v) Amount paid to	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity		fundraiser dy or control	(iv) Gross receipts from activity	(or retained by) fundraiser listed in	(vi) Amount paid to (or retained by)
or critity (turiaraiser)		of contr	ibutions?	non activity	column (i)	organization
		Yes	No			
1						
2	<u> </u>					-
3						
4						
5				·		<u>-</u> -
6						
7						
		-		~		
8						
9						
10						
		·				
Total			▶			
List all states in which the organization licensing	ion is registere	d or licen	sed to soli	cit contributions or has	been notified it is exemp	ot from registration
			 _			
		- -			· -	
		- -				
					· -	
					·	
					·	
			- -			

Schedule G ((Form 990 or	990-EZ)	2010	BOURG	LTONS	CLUB

		G (Form 990 or 990-EZ) 2010 BOURG				55796	Page :
i ai	L 11	Fundraising Events. Complete if reported more than \$15,000 of fu and 6a. List events with gross re	undraising event co	ntributions and gros	ss income on Forn	ne 18, or n 990-EZ, lir	nes 1
	•		(a) Event #1	(b) Event #2	(c) Other events	(d) Total e (add colun through colu	nn (a)
R E V			(event type)	(event type)	(total number)		——————————————————————————————————————
E N U	1	Gross receipts					
Ē	2	Less: Charitable contributions					
	_ 3	Gross income (line 1 minus line 2)					
ļ	4	Cash prizes					
	5	Noncash prizes					
D-RECT	6	Rent/facility costs					
C	7	Food and beverages					
2	8	Entertainment					
M M M M M M M M M M M M M M M M M M M	9	Other direct expenses					
5	10	Direct expense summary Add lines 4- th	arough 9 in column (d)				
	11	•	• ,,		•		
ãr	ţ,llik	Gaming. Complete if the organiz \$15,000 on Form 990-EZ, line 6a	ation answered 'Ye	s' to Form 990, Par	t IV, line 19, or re	ported more	than
		\$13,000 011 0111 350-E2, line 02		452.45			
7117			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total ga (add colun through colu	nn (a)
<u> </u>	1	Gross revenue	122,508.	169,955.		292	2,463
E	2	Cash prizes	98,643.	140,084.		238	3,727
X P E	3	Non-cash prizes	194.				194
N S E S	4	Rent/facility costs	5,912.	5,911.		1,1	L , 823
	5	Other direct expenses	7,287.	5,703.		12	2,990
			X Yes 100.00 %	X Yes 100.00%	Yes 8		
	6	Volunteer labor	No	No	No		- + 0 FF
	7	Direct expense summary Add lines 2 three	ough 5 in column (d)		•	263	3,734
	8	Net gaming income summary Combine I	ines 1, column (d) and li	ne 7	•	28	3,729
9	Ente	er the state(s) in which the organization op	oratos gamino activitios	Louisiana			
а	ls th	ne organization licensed to operate gaming				X Yes	No
b	If 'N	lo,' explain	• -				
0 =	 Wer	e any of the organization's gaming license		terminated during the t		Yes	X No
		es, explain		_	•		
			·			·	
AΑ			TEEA3702 0	1/13/11	Schedule G (Fo	rm 990 or 990.	FZ) 201

Sche	dule G (Form 990 or 990-EZ) 2010 BOURG LIONS CLUB 72	-605	5796	Page 3
	Does the organization operate gaming activities with nonmembers?		Yes	X No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity forme administer charitable gaming?	d to	Yes	X No
13	Indicate the percentage of gaming activity operated in:			
	The organization's facility	13a	10	8 00.0
	an outside facility Enter the name and address of the person who prepares the organization's gaming/special events books and re			
_	Name ► RANDOLPH BASCLE			
	Address ► 111 RETREAT DRIVE BOURG, LA 70343			
ŧ	Does the organization have a contact with a third party from whom the organization receives gaming revenue? If 'Yes,' enter the amount of gaming revenue received by the organization \$ and the of gaming revenue retained by the third party \$ If 'Yes,' enter name and address of the third party	e amou	☐ Yes nt	X No
	Name ►			
	Address ►			
16	Gaming manager information			
	Name •			
	Gaming manager compensation ► \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions			
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain state gaming license?		Yes	X No
1	 Enter the amount of distributions required under state law to be distributed to other exempt organizations or specific organization's own exempt activities during the tax year 	ent in tl	пе	
Păi	Supplemental Information. Complete this part to provide the explanations required columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applied this part to provide any additional information (see instructions).	d by F cable.	Part I, line Also cor	e 2b, nplete
		-		
				 -

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SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

|--|

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22. ► Attatch to Form 990.

Open to Public

OMB No 1545-0047

Name of the organization						Employer identification number	cation number
BOURG LIONS CLUB	toios pac					72-6055796	96
1 Does the organization maintain record	de to substantiate the	† t	the grants or acceptance the grantage' algoribility for the grants or acceptance and	optoor of the thirty for the	greate or secretarion	700	
the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	ne grants or assistance in procedures for monit	ernount of the gran e? toring the use of gra	its of assistance, the graint int funds in the United Si	intees engioniny for the tates	grants of assistante,	 -	Yes X No
Partil Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed	nce to Governme for any recipient f additional space	ents and Organ that received me is needed	izations in the Unit nore than \$5,000. C	ed States. Comple theck this box if no	te if the organizat one recipient rec	ion answered 'Y eived more than	es' to 1 \$5,000.
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) <u>Bourg_Lioness_Club</u> <u>P_O Box_286</u> Bourg_LA 70343	90-0609234	501(c)4	7,075.				Program Servic
(2)		1					
(3)							
<u>(4)</u>							
(<u>5</u>)							
<u>(9)</u>							
<u></u>							
(8)							
	3) and government or	ganizations					
3 Enter total number of other organizations	ons					_	
BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	, see the Instructions	: for Form 990.		TEEA3901 10/29/10	10/29/10	Sched	Schedule I (Form 990) 2010

Page 2 Schedule I (Form 990) 2010 Grants and Other Assistance to Individuals in the United States. Complete of the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated of additional space is needed. (f) Description of non-cash assistance PartiV. | Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. 72-6055796 (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients BOURG LIONS CLUB (a) Type of grant or assistance Schedule I (Form 990) 2010 Part III* BAA ~ m 4 വ ဖ

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545 0047 2010

Open to Public

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990 or 990-EZ.

Name of the organization Employer identification number 72-6055796 BOURG LIONS CLUB Pt_VI-A, Line 6 ORGANIZATION HAS INDIVIDUALS AS GENERAL MEMBERS Pt VI-A, Line 7a ALL GENERAL MEMBERS HAVE VOTING RIGHTS Pt_VI-A, Line 7b ALL GOVERNING BOARD DECISIONS ARE SUBJECT TO RATIFICATION BY GENERAL MEMBERSHIP Pt VI-B, Line 10b the central organization has written policies & procedures governing affiliat activities Pt_VI-B, Line 11a A COPY OF THE FORM 990 IS AVAILABLE TO ALL MEMBERS BEFORE FILING.

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return. OMB No 1545 0172

2010

Attachment Sequence No 67

Name(s) shown on return BOURG LIONS CLUB Business or activity to which this form relates Identifying number 72-6055796

	m 990 / Form 9901			<u> </u>				
Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V-before-you-complete Part-I								
1								
2	2 Total cost of section 179 property placed in service (see instructions)						2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)						3	
4	Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-							
5	Dollar limitation for tax yea separately, see instructions		5					
6								<u>*</u>
	,							,
7	Listed property Enter the a	amount from line 2	9		7			
8	Total elected cost of sectio), lines 6 and 7			8	
9	Tentative deduction Enter						9	
10	Carryover of disallowed de						10	
11	Business income limitation Section 179 expense deduction		·	· · · · · · · · · · · · · · · · · · ·	-	ee instrs)	11 12	
12 13	Carryover of disallowed de				l ► 13		12	
	: Do not use Part II or Part				13			*,
Par			ce and Other Depre		t inaliida lis	tod proporty \	(\$00.1	unctructions \
	Special depreciation allows						(See)	instructions)
	tax year (see instructions)		,	-	+ +		14	
15	Property subject to section	168(f)(1) election					15	
	Other depreciation (including	ng ACRS)					16	4,721.
Par	t III MACRS Depred	ciation (Do not in	nclude listed property) (See instructions)				
			Section	on A				
17	MACRS deductions for ass	ets placed in servi	ice in tay years beginning	- before 2010			17	
		oto piacoa iii coi vi	ice in tax years beginnin	g before 2010				<u> </u>
18	If you are electing to group asset accounts, check here	any assets place		•	r more gen	eral -	17	* *
18	If you are electing to group asset accounts, check here	any assets placed		ax year into one o		<u> </u>		,
18	If you are electing to group asset accounts, check here	any assets placed	in Service During 2010 (c) Basis for depreciation (business/investment use	ax year into one o		Depreciation (f)	Syste	,
	If you are electing to group asset accounts, check here Section B (a) Classification of property	- Assets Placed (b) Month and year placed	in Service During 2010 (c) Basis for depreciation	ax year into one o Tax Year Using the (d)	ne General (e)	Depreciation (f)	Syste	m (g) Depreciation
19 a	If you are electing to group asset accounts, check here Section B (a) Classification of property 3-year property	- Assets Placed (b) Month and year placed	in Service During 2010 (c) Basis for depreciation (business/investment use	ax year into one o Tax Year Using the (d)	ne General (e)	Depreciation (f)	Syste	m (g) Depreciation
19 a	If you are electing to group asset accounts, check here Section B (a) Classification of property 3-year property 5-year property	- Assets Placed (b) Month and year placed	in Service During 2010 (c) Basis for depreciation (business/investment use	ax year into one o Tax Year Using the (d)	ne General (e)	Depreciation (f)	Syste	m (g) Depreciation
19a	If you are electing to group asset accounts, check here Section B (a) Classification of property 3-year property 5-year property 7-year property	- Assets Placed (b) Month and year placed in service	in Service During 2010 (c) Basis for depreciation (business/investment use	ax year into one o Tax Year Using the (d)	ne General (e)	Depreciation (f)	Syste	m (g) Depreciation
19 a	If you are electing to group asset accounts, check here Section B (a) Classification of property 3-year property 5-year property 7-year property 10-year property	- Assets Placed (b) Month and year placed	in Service During 2010 (c) Basis for depreciation (business/investment use	ax year into one o Tax Year Using the (d)	ne General (e)	Depreciation (f)	Syste	m (g) Depreciation
19 a	If you are electing to group asset accounts, check here Section B (a) Classification of property 3-year property 5-year property 10-year property 15-year property	- Assets Placed (b) Month and year placed in service	in Service During 2010 (c) Basis for depreciation (business/investment use	ax year into one o Tax Year Using the (d)	ne General (e)	Depreciation (f)	Syste	m (g) Depreciation
19 a	If you are electing to group asset accounts, check here Section B (a) Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property	- Assets Placed (b) Month and year placed in service	in Service During 2010 (c) Basis for depreciation (business/investment use	ax year into one o Tax Year Using th (d) Recovery period	ne General (e)	Depreciation (f)	Syste	m (g) Depreciation
19 a	If you are electing to group asset accounts, check here Section B (a) Classification of property 3-year property 5-year property 10-year property 15-year property	- Assets Placed (b) Month and year placed in service	in Service During 2010 (c) Basis for depreciation (business/investment use	ax year into one o Tax Year Using th (d) Recovery period	ne General (e)	Depreciation (f) Method	Syste	m (g) Depreciation
19 a	If you are electing to group asset accounts, check here Section B (a) Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 25-year property	- Assets Placed (b) Month and year placed in service	in Service During 2010 (c) Basis for depreciation (business/investment use	ax year into one o Tax Year Using th (d) Recovery period	ne General (e) Convention	Depreciation (f) Method	Syster	m (g) Depreciation
19 a	If you are electing to group asset accounts, check here Section B (a) Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 25-year property Residential rental	- Assets Placed (b) Month and year placed in service	in Service During 2010 (c) Basis for depreciation (business/investment use	25 yrs 27.5 yrs 27.5 yrs	MM MM	Depreciation (f) Method S/L S/L S/L S/L	Syste	m (g) Depreciation
19 a	If you are electing to group asset accounts, check here Section B (a) Classification of property 3-year property 7-year property 10-year property 15-year property 20-year property 25-year property Residential rental property	- Assets Placed (b) Month and year placed in service	in Service During 2010 (c) Basis for depreciation (business/investment use	25 yrs 27.5 yrs	ne General (e) Convention	Depreciation (f) Method S/L S/L S/L S/L S/L	Syste	m (g) Depreciation
19 a	If you are electing to group asset accounts, check here Section B (a) Classification of property 3-year property 7-year property 10-year property 20-year property 25-year property Residential rental property Nonresidential real property	- Assets Placed (b) Month and year placed in service	in Service during the tain Service During 2010 (c) Basis for depreciation (business/investment use only — see instructions)	25 yrs 27.5 yrs 27.5 yrs 39 yrs	MM MM MM MM	S/L S/L S/L S/L S/L S/L	Syste	(g) Depreciation deduction
19a k	If you are electing to group asset accounts, check here Section B (a) Classification of property 3-year property 5-year property 10-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C -	- Assets Placed (b) Month and year placed in service	in Service During 2010 (c) Basis for depreciation (business/investment use	25 yrs 27.5 yrs 27.5 yrs 39 yrs	MM MM MM MM	S/L S/L S/L S/L S/L S/L	Syster	(g) Depreciation deduction
19 a k c c c c c c c c c c c c c c c c c c	If you are electing to group asset accounts, check here Section B (a) Classification of property 3-year property 5-year property 10-year property 20-year property 25-year property 25-year property Residential rental property Nonresidential real property Section C -	- Assets Placed (b) Month and year placed in service	in Service during the tain Service During 2010 (c) Basis for depreciation (business/investment use only — see instructions)	25 yrs 27.5 yrs 27.5 yrs 39 yrs ax Year Using the	MM MM MM MM	S/L	System n Syst	(g) Depreciation deduction
19 a b c c c c c c c c c c c c c c c c c c	If you are electing to group asset accounts, check here Section B (a) Classification of property 3-year property 7-year property 10-year property 20-year property 25-year property 25-year property Residential rental property Nonresidential real property Section C - Class life	- Assets Placed (b) Month and year placed in service	in Service during the tain Service During 2010 (c) Basis for depreciation (business/investment use only — see instructions)	25 yrs 27.5 yrs 27.5 yrs 39 yrs ax Year Using the	MM MM MM MM Alternativ	S/L	System n Syst	(g) Depreciation deduction
19 a b c c c c c c c c c c c c c c c c c c	If you are electing to group asset accounts, check here Section B (a) Classification of property 3-year property 7-year property 10-year property 20-year property 25-year property 25-year property Residential rental property Nonresidential real property Section C - Class life 12-year	- Assets Placed (b) Month and year placed in service - Assets Placed - Assets Placed in service	in Service during the tain Service During 2010 (c) Basis for depreciation (business/investment use only — see instructions)	25 yrs 27.5 yrs 27.5 yrs 39 yrs ax Year Using the	MM MM MM MM	S/L	System n Syst	(g) Depreciation deduction
19 a b c c c c c c c c c c c c c c c c c c	If you are electing to group asset accounts, check here Section B (a) Classification of property 3-year property 7-year property 10-year property 20-year property 25-year property 25-year property 25-year property Residential rental property Nonresidential real property Section C - Class life 12-year 40-year Summary (See in	- Assets Placed (b) Month and year placed in service - Assets Placed in service	in Service during the tain Service During 2010 (c) Basis for depreciation (business/investment use only — see instructions)	25 yrs 27.5 yrs 27.5 yrs 39 yrs ax Year Using the	MM MM MM MM Alternativ	S/L	Syster	(g) Depreciation deduction
19a b c c c c c c c c c c c c c c c c c c	If you are electing to group asset accounts, check here Section B (a) Classification of property 3-year property 5-year property 10-year property 20-year property 25-year property 25-year property 25-year property Residential rental property Nonresidential real property Section C - Class life 12-year 40-year Listed property Enter amo Total Add amounts from line 12,	- Assets Placed (b) Month and year placed in service - Assets Placed in service - Assets Placed in service - Instructions) - Jount from line 28 - Lines 14 through 17, June 14	in Service During 2010 (c) Basis for depreciation (business/investment use only — see instructions) Service During 2010 T	25 yrs 27.5 yrs 27.5 yrs 27.5 yrs 39 yrs ax Year Using the	MM	S/L	Syster n Syst	m (g) Depreciation deduction
19 a b c c c c c c c c c c c c c c c c c c	If you are electing to group asset accounts, check here Section B (a) Classification of property 3-year property 5-year property 10-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C - Class life 12-year 40-year t IV Summary (See in Listed property Enter amo	- Assets Placed (b) Month and year placed in service - Assets Placed in service	in Service During 2010 (c) Basis for depreciation (business/investment use only — see instructions) The Service During 2010 To see 19 and 20 in column (g), a corporations — see instructions tee during the current years.	25 yrs 27.5 yrs 27.5 yrs 27.5 yrs 27.5 yrs 40 yrs and line 21 Enter here	MM	S/L	Syster	(g) Depreciation deduction

Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, Part V **Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles) No 24b If 'Yes.' is the evidence written? 24 a Do you have evidence to support the business/investment use claimed? Yes Yes No (i) (a) (c) Business/ (d) (e) **(f)** (g) (h) Elected section 179 Basis for depreciation Type of property (list vehicles first) Date placed Cost or Recovery Method/ Depreciation investment (business/investment period in service other basis Convention deduction use use only) cost percentage Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) Property used more than 50% in a qualified business use 27 Property used 50% or less in a qualified business use 28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 28 Add amounts in column (i), line 26 Enter here and on line 7, page 1 29 Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other 'more than 5% owner,' or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles (a) (b) (c) (d) (e) **(f)** Total business/investment miles driven 30 Vehicle 1 Vehicle 2 Vehicle 3 Vehicle 4 Vehicle 5 Vehicle 6 during the year (do not include commuting miles) Total commuting miles driven during the year 31 Total other personal (noncommuting) 33 Total miles driven during the year Add lines 30 through 32 Yes No Yes No Yes No Yes No Yes No Yes No Was the vehicle available for personal use during off-duty hours? Was the vehicle used primarily by a more than 5% owner or related person Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions) Yes No Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your 38 employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners Do you treat all use of vehicles by employees as personal use? 39 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? Do you meet the requirements concerning qualified automobile demonstration use? (See instructions) Note: If your answer to 37, 38, 39, 40, or 41 is 'Yes,' do not complete Section B for the covered vehicles Amortization Part VI (d) **(f)** (b) (e) (a) (c) Description of costs Date amortization Amortizable Code section Amortization Amortization for this year period or percentage beains amount 42 Amortization of costs that begins during your 2010 tax year (see instructions) 43 Amortization of costs that began before your 2010 tax year 43 44 Total. Add amounts in column (f) See the instructions for where to report 44

72-6055796

1

Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 1 (continued)

Briefly describe the organization's mission:

FUNDS FOR CASH GRANTS TO VARIOUS CHARITIES AND NON-PROFIT CAUSES AT

LOCAL, STATE AND NATIONAL LEVELS.

Form **8868** (Rev January 2011)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545 1709

Department of the Treasury Internal Revenue Service

► File a separate application for each return.

	filing for an Automatic 3-Month Extension, comp						► <u>X</u>		
If you are	filing for an Additional (Not Automatic) 3-Month	Extension,	complete only Part II (on page 2 of this t	orm)	000	0			
-	olete Part II unless you have already been granted								
corporation r request-an ex Associated M	ing (e-file). You can electronically file Form 8868 is equired to file Form 990-T), or an additional (not a ktension of-time to-file-any of-the-forms-listed in P fith Certain Personal Benefit Contracts, which mu- ing of this form, visit www irs gov/efile and click or	automatic) (art Lor Pari st he sent to	3-month extension of time You can electi t II with the exception of Form 8870, Infor to the IRS in paper format (see instruction	onicai matior	ıy file 1 Refu	roim 8 Jrn for T	ransfers		
Part I A	utomatic 3-Month Extension of Time. C	nly subm	nit original (no copies needed).						
A corporation	required to file Form 990-T and requesting an au	itomatic 6-r	month extension - check this box and cor	nplete	Part	I only	•		
All other corp income tax r	porations (including 1120-C filers), partnerships, F eturns	REMICS, an	d trusts must use Form 7004 to request a	n exte	nsion	of time	to file		
	Name of exempt organization			Emplo	yer ide	ntification	number		
Type or	/pe or								
print	BOURG LIONS CLUB		72-6055796						
File by the due date for	Number street, and room or suite number. If a P.O. box, see instructions								
filing your return See	111 RETEAT DRIVE								
nstructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions								
	BOURG						13-3414		
Enter the Re	turn code for the return that this application is for	(file a sepa	arate application for each return)				01		
Application		Return	Application				Return		
ls For		Code	Is For				Code		
Form 990		01	Form 990-T (corporation)				07		
Form 990-BL		02	Form 1041-A				08		
Form 990-E2		03	Form 4720				09		
Form 990-PF		04	Form 5227				10		
	(section 401(a) or 408(a) trust)	05	Form 6069				11		
Form 990-1	(trust other than above)	06	Form 8870				12		
Telephor If the org If this is check the	is are in the care of RANDOLPH BASCLE the No (985) 594-4810 the particular of the group check is the state of the group check is the state of the group check is the group is for	digit Group (United States, check this box Exemption Number (GEN) 0239 If						
until The ex X 2 If the talks	st an automatic 3-month (6 months for a corporate Feb 15 , 20 12 , to file the exempt orgetension is for the organization's return for calendar year 20 or tax year beginning Jul 1 , 20 10 ax year entered in line 1 is for less than 12 month ange in accounting period	anization re	eturn for the organization named above	al retu	urn				
nonrefu	application is for Form 990-BL, 990-PF, 990-T, 47, undable credits. See instructions			3a	\$		0.		
payme	application is for Form 990-PF, 990-T, 4720, or 60 nts made Include any prior year overpayment allo	owed as a c	redit	3b	\$		0.		
	e due. Subtract line 3b from line 3a Include your (Electronic Federal Tax Payment System) See ii			3c		·	0.		
Caution, If you	ou are going to make an electronic fund withdrawa	al with this l	Form 8868, see Form 8453-EO and Form	8879-	EO fo	or			