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Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

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

OMB No 1545-1150 2011

Department of the Treasury Internal Revenue Service

▶ Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, All other organizations or donor advised links, organizations that operate one or more inspiral radiities and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions)

All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form

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

Open to Public Inspection

A I	For the	2011 calenda	ar year, or tax year beginning	October 1	, 2011,	and ending	Sept	ember	30 , 20	12
В	Check if ag	oplicable	C Name of organization			_	D Empl	oyer ide	intification numb	er
	Address c	hange	Optimist International - 29130 Mobil	le				63	3-0251837	
	Name cha	ange	Number and street (or P O box, if mail is n	not delivered to street addres	ss)	Room/suite	E Telep	hone nu	mber	
Ц	Initial retu	m	P.O. Box 161165					251	1-454-8560	
=	Terminate		City or town, state or country, and ZIP + 4				F Grou			
=	Amended		Mobile, AL 36616					iber ▶	•	
		on pending								
		ting Method: te: ► None				——— ^H			the organizatio	n is not
	Websit			\ <u>\</u>	10.17(-)(1)		•		ch Schedule B	
			eck only one) — 501(c)(3) 501(c)			527			I-EZ, or 990-PF)	
	Check •		e organization is not a section 509(a)(3)							
			0. A Form 990-EZ or Form 990 return i		rm 990-N (e	e-postcard) m	ay be req	uired (s	see instructions)	But if
	-		oses to file a return, be sure to file a co	•						
			b, to line 9 to determine gross receipts I	-	00 or more,	or if total asse	ts (Part II,			
			w) are \$500,000 or more, file Form 990 in				_	▶ \$		491.39
Р	art I		e, Expenses, and Changes in							
		Check if	the organization used Schedule	O to respond to any	question	in this Part	l <u></u>		. <u></u>	<u>. </u>
	1	Contribution	ons, gifts, grants, and similar amou	unts received				1		21.00
	2	Program se	ervice revenue including governme	ent fees and contracts				2		
	з		ip dues and assessments					3		
	4	Investment	tincome					4		20.23
	5a	Gross amo	ount from sale of assets other than	inventory	. 5a	1	54450.16	,		
	Ь		or other basis and sales expenses	<u>-</u>			25631.70			
	C		ss) from sale of assets other than					5c	29	3818.46
	6		nd fundraising events	inventory (Gabtiact init		ine saj .		30		1010.40
	a	-	ome from gaming (attach Sche	adule G if greater t	han					
₫	_					1				
Revenue	١.				· 6a					
Š	b		ome from fundraising events (not in			f contribution	ns			
ď			raising events reported on line 1)	•						
			ch gross income and contributions	•	. 6b					
	C		t expenses from gaming and fund					*		
	d		e or (loss) from gaming and fund	Iraising events (add li	nes 6a and	d 6b and si	ubtract			
		line 6c) .						6d		
	7a	Gross sale	s of inventory, less returns and alle	owances	. 7a					
	b	Less: cost	of goods sold		. 7b					
	\ 6		to prossifican sales of inventory		line 7a) .			7c		
	8	Otherveve	nue (describe im Schedule O)	, 			_	8		
	e	Total reve	nue. Add lines 1 8, 4, 5c, 6d, 7	c and 8			•	9	28	3859.69
-	_	প্র rants লিঞ	d similar amounts poid (list in Sche	edule O)	 .	<u> </u>		10		3408.66
			aid to or for members				• •	11		
LD.	1 1		ther compensation, and employee				• •	' ' ' 		
Se	13		allies and ether payments to inde				• •	12		
Expenses	13						• •	13		
×	14		y, rent, utilities, and maintenance					14		
Ų.	.		ublications, postage, and shipping					15		111.48
	16		enses (describe in Schedule O) .					16		
	17	Total expe	enses. Add lines 10 through 16 .	<u></u>	<u> </u>	<u> </u>	<u> ▶</u>	17	28	3520.14
S	18		(deficit) for the year (Subtract line					18		339.55
Se	19		s or fund balances at beginning o	•	• •					
As		-	ar figure reported on prior year's re	•				19	84	1157.04
Net Assets	20	Other char	nges in net assets or fund balance	s (explain in Schedule	O)			20		
Z	21	Net assets	or fund balances at end of year. (Combine lines 18 throi	ugh 20 .			21	84	1496.59
For	r Paner		tion Act Notice, see the separate ins			No. 10642I			Form 990-F	7 (2011)

Part				_
	instructions for Part V.) Check if the organization used Schedule O to respond to any question in this	s Part		
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	Yes	No
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		√
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		1
b c	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35b 35c		√
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		1
37a b 38a	Enter amount of political expenditures, direct or indirect, as described in the instructions. Did the organization file Form 1120-POL for this year?	37b 38a		//////////////////////////////////////
39 a b 40a	If "Yes," complete Schedule L, Part II and enter the total amount involved	_		
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		<i>€</i>
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		
41	List the states with which a copy of this return is filed. ▶ None			
42a		251-45		0
b	Located at ► 5809 Grelot Road, Mobile, AL 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)?	36 42b	Yes	No
	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.			
C	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c		√
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the tax year	· ·	· V	
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	Yes	No ✓
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		<i>Ø/</i>
c d	Did the organization receive any payments for indoor tanning services during the year?	44c 44d	110	1
45a 45b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?			

O	90-EZ (2011)							Page 4
omi 9	90-EZ (2011)					_	124-	-, -
46	Did the organization engage, directly or in	advectly in political c	ampaian activitus on	habalf of a	r in annous	tion [Ye	s No
46	to candidates for public office? If "Yes,"	complete Schedule C	ampaign activities on	Denan or or	in opposii		16	$+$ \nearrow
Part							-	<u> </u>
	501(c)(3) organizations and section and 52, and complete the tables Check if the organization used Sc	on 4947(a)(1) nonex for lines 50 and 51	kempt charitable tru	sts must a				
							Ye	s No
47	Did the organization engage in lobbying year? If "Yes," complete Schedule C, Par		section 501(h) electio	n in effect	during the		17	1
48	Is the organization a school as described in	n section 170(b)(1)(A)(ii)? If "Yes." complete 9	Schedule E		.	18	1
49a						. 4	9a	1
b	If "Yes," was the related organization a se	ection 527 organizatio	on?			. 4	9b	
50	Complete this table for the organization's employees) who each received more than							
	(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health contributions benefit plans, compe	to employee and deferred		nated am compens	
None	•						_	
					_			
								_
f	Total number of other employees paid ov	ver \$100,000	. ▶0					
51	Complete this table for the organization \$100,000 of compensation from the organization	's five highest compe anization. If there is no	ensated independent one, enter "None."	contractors	s who each	h receiv	ed mo	re than
(a) Name and address of each independent contractor pa	aid more than \$100,000	(b) Type of serv	rice	(c) Compe	nsation	
None)							
				_				
		 -						<u></u>
							_	
					_			

		_				
d Total	number of other independent	contractors each receiving over \$10	00,000 ▶	0		
	Did the organization complete Schedule A? Note : All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A					
Under penalties true, correct, ar	of perjury, I declare that I have examine documented Declaration of preparer (other	ed this return, including accompanying sched her than officer) is based on all information of	ules and statements, and to which preparer has any kno	the best of my knowledge and belief, it is owledge		
Sign Here	Signature of diffice Paul Carter, Secretary/Treas Type or print name and title	urer		2/12/13 Date		
Paid Preparer	Print/Type preparer's name	Preparer's signature	Date	Check if PTIN self-employed		
Use Only				Firm's EIN ▶		
May the IRS	he IRS discuss this return with the preparer shown above? See instructions			Phone no Yes No		

THE OPTIMIST CLUB OF MOBILE, INC YOUTH WORK INCOME STATEMENT - ACCRUAL YEAR ENDED SEPTEMBER 30, 2012

<u>REVE</u>	<u>.NU</u>	
		(

Christmas Tree Sales (Schedule "F-1")	\$28,818 46	
Contributions	21 00	
Investment Income	<u>20.23</u>	\$28,859.69

11,355.00

15,903.66

\$1,150.00

\$84,157.04

DISBURSEMENTS

BOYS AND GIRLS CLUB

Youth of the Month	\$0.00
Junior Optimist Club	\$80.00
Mobile International Festival	\$400.00
Baseball Night	\$800 00
I'm Perfect	300 00
Christmas Party	1,000.00
Youth of the Year	6,500.00
Limroth Scholarship	2,000.00
Miscellaneous	275 00
Service Dollar	<u>0 00</u>

COMMUNITY SERVICE

III CERTICE	
Training Sessions	\$495 90
Basketball Awards	2,568 61
Cross Country Awards	2,533 55
Swimmer Awards	2,279 01
Track & Field Awards	2,531 25
Baseball Team Sponsor	300 00
Softball Team Sponsor	0 00
Oratorical Contest	810 00
Jr. Citizenship Awards	0 00
Scholarships	4,242 34
Traffic Safety	0 00
Essay Contest	143.00
UMS Jr. Optimist Club	0.00

CONTRIBUTIONS (Schedule "F-2")

Youth Appreciation Week

Fund Balance, Begin

OTHER

Office Expenses	111.48	\$111.48	\$28,520.14
NET INCOME			\$339.55

0.00

Fund Balance, End \$84,496.59

SCHEDULE "F-1"

THE OPTIMIST CLUB OF MOBILE, INC YOUTH WORK INCOME STATEMENT - CHRISTMAS TREE SALES YEAR ENDED SEPTEMBER 30, 2012

Optimist Club of Mobile, Inc. 2011-12 Christmas Tree Sales and Expenses

INCOME

Tree Sales \$54,450.16

EXPENSES

Trees	\$20,146 20
Materials	1,702.00
Labor	2,149.00
Stands, Net, Bowls	1,472.50
Utilities	<u>162 00</u>

TOTAL EXPENSES \$25,631.70

NET PROFIT \$28,818.46

THE OPTIMIST CLUB OF MOBILE, INC YOUTH WORK INCOME STATEMENT - CONTRIBUTIONS YEAR ENDED SEPTEMBER 30, 2012

SCHEDULE "F-2"

\$250.00 250.00 150.00

<u>500.00</u>

TOTAL \$1,150.00