**Short Form**

**Return of Organization Exempt From Income Tax**

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

- Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than $1,000,000 and total assets less than $2,500,000 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.

**Department of the Treasury Internal Revenue Service**

**Form 990-EZ**

**2008**

**Open to Public Inspection**

**A** For the 2008 calendar year, or tax year beginning 7/01, 2008, and ending 6/30, 2009

**B** Check if applicable
- [ ] Address change
- [ ] Name change
- [ ] Initial return
- [ ] Termination
- [ ] Amended return
- [ ] Application pending

**C**
- Use IRS label or print or type:
- ACALANES BOOSTER CLUB
- 1200 PLEASANT HILL ROAD
- LAFAYETTE, CA 94549

**D** Employer Identification number
- 23-7428299

**E** Telephone number
- 925-932-3545

**F** Group Exemption Number

**G** Accounting method:
- [X] Cash
- [ ] Accrual
- [ ] Other (specify)

**H** Check ▶ [X] if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

**I**
- [ ] Website: WWW.ACALANESBOOSTERS.COM

**J** Organization type (check only one)
- [X] 501(c) (3) (insert no) 4947(a)(1) or 527

**K** Check ▶ [ ] if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than $25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

**L** Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if $1,000,000 or more, file Form 990 instead of Form 990-EZ

### Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Contributions, gifts, grants, and similar amounts received</td>
<td>2,379.00</td>
</tr>
<tr>
<td>2</td>
<td>Program service revenue including government fees and contracts</td>
<td>38,810.00</td>
</tr>
<tr>
<td>3</td>
<td>Membership dues and assessments</td>
<td>1,124.00</td>
</tr>
<tr>
<td>4</td>
<td>Investment income</td>
<td></td>
</tr>
<tr>
<td>5a</td>
<td>Gross amount from sale of assets other than inventory</td>
<td>725.00</td>
</tr>
<tr>
<td>5b</td>
<td>Less: cost or other basis and sales expenses</td>
<td></td>
</tr>
<tr>
<td>5c</td>
<td>Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)</td>
<td>101,266.00</td>
</tr>
<tr>
<td>6</td>
<td>Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here ▶</td>
<td></td>
</tr>
<tr>
<td>6a</td>
<td>Gross revenue (not including §725. of contributions reported on line 1)</td>
<td>101,266.00</td>
</tr>
<tr>
<td>6b</td>
<td>Less: direct expenses other than fundraising expenses</td>
<td>19,075.00</td>
</tr>
<tr>
<td>6c</td>
<td>Net income or (loss) from special events and activities (Subtract line 6b from line 6a)</td>
<td>82,191.00</td>
</tr>
<tr>
<td>7a</td>
<td>Gross sales of inventory, less returns and allowances</td>
<td></td>
</tr>
<tr>
<td>7b</td>
<td>Less: cost of goods sold</td>
<td></td>
</tr>
<tr>
<td>7c</td>
<td>Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)</td>
<td>82,191.00</td>
</tr>
<tr>
<td>8</td>
<td>Other revenue (describe ▶)</td>
<td>124,504.00</td>
</tr>
<tr>
<td>9</td>
<td>Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)</td>
<td>124,504.00</td>
</tr>
<tr>
<td>10</td>
<td>Grants and similar amounts paid (attach schedule)</td>
<td>1,000.00</td>
</tr>
<tr>
<td>11</td>
<td>Benefits paid to or for members</td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Salaries, other compensation, and employee benefits</td>
<td>33,358.00</td>
</tr>
<tr>
<td>13</td>
<td>Professional fees and other payments to independent contractors</td>
<td>400.00</td>
</tr>
<tr>
<td>14</td>
<td>Occupancy, rent, utilities, and maintenance</td>
<td>90.00</td>
</tr>
<tr>
<td>15</td>
<td>Printing, publications, postage, and shipping</td>
<td>52,075.00</td>
</tr>
<tr>
<td>16</td>
<td>Other expenses (describe ▶ SEE STATEMENT 2)</td>
<td>86,923.00</td>
</tr>
<tr>
<td>17</td>
<td>Total expenses (add lines 10 through 16)</td>
<td>37,581.00</td>
</tr>
<tr>
<td>18</td>
<td>Excess or (deficit) for the year (Subtract line 17 from line 9)</td>
<td>107,963.00</td>
</tr>
<tr>
<td>19</td>
<td>Net assets or fund balances at beginning of year (from line 18, must agree with end-of-year figure reported on prior year's return)</td>
<td>107,963.00</td>
</tr>
<tr>
<td>20</td>
<td>Other changes in net assets or fund balances (attach explanation)</td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Net assets or fund balances at end of year. Combine lines 18 through 20</td>
<td>145,544.00</td>
</tr>
</tbody>
</table>

### Part II Balance Sheets. If Total assets on line 25, column (A) are $2,500,000 or more, file Form 990 instead of Form 990-EZ (See the instructions for Part II)

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>22</td>
<td>Cash, savings, and investments</td>
<td>107,963.00</td>
</tr>
<tr>
<td>23</td>
<td>Land and buildings</td>
<td>145,544.00</td>
</tr>
<tr>
<td>24</td>
<td>Other assets (describe ▶)</td>
<td>24.00</td>
</tr>
<tr>
<td>25</td>
<td>Total assets</td>
<td>107,963.00</td>
</tr>
<tr>
<td>26</td>
<td>Total liabilities (describe ▶)</td>
<td>0.00</td>
</tr>
<tr>
<td>27</td>
<td>Net assets or fund balances (line 27 of column (B) must agree with line 21)</td>
<td>145,544.00</td>
</tr>
</tbody>
</table>

BAA For Privacy Act and Paperwork Reduction Act Notice, see the instructions for Form 990.

Form 990-EZ (2008)
### Part III Statement of Program Service Accomplishments

**What is the organization's primary exempt purpose?** SEE STATEMENT 3

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.

<table>
<thead>
<tr>
<th>Program Title</th>
<th>Expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>PROVIDED ATHLETIC TRAINER TO ASSIST WITH ATHLETIC DEVELOPMENT AND SEASON CONDITIONING</td>
<td>28a 33,358</td>
</tr>
<tr>
<td>PROVIDED ATHLETIC EQUIPMENT AND ACCESSORIES AS NEEDED TO AUGMENT THE NEEDS OF EACH TEAM (WHEN NOT SUPPLIED BY THE SCHOOL)</td>
<td>29a 49,991</td>
</tr>
</tbody>
</table>

**30** Other program services (attach schedule)

**31** Total program service expenses (add lines 28a through 31a) 83,349

### Part IV List of Officers, Directors, Trustees, and Key Employees

<table>
<thead>
<tr>
<th>Name and address</th>
<th>Title and average hours per week devoted to position</th>
<th>Compensation (if not paid, enter 0)</th>
<th>Contributions to employee benefit plans and deferred compensation</th>
<th>Expense account and other allowances</th>
</tr>
</thead>
<tbody>
<tr>
<td>KIM STERN</td>
<td>VICE PRESIDENT</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>4059 LOS ARABIS DRIVE</td>
<td>059 LOS ARABIS DRIVE</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>LAFAYETTE, CA 94549</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>VICTORIA BJERKE</td>
<td>TREASURER</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>30 WINDSONG WAY</td>
<td>30 WINDSONG WAY</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>LAFAYETTE, CA 94549</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>KATHY KROETCH</td>
<td>PRESIDENT</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>3230 GREENHILLS DRIVE</td>
<td>3230 GREENHILLS DRIVE</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>LAFAYETTE, CA 94549</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part V Other Information (Note the statement requirement in General Instruction V.)

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>33  Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity...</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>34  Were any changes made to the organizing or governing documents but not reported to the IRS? If 'Yes,' attach a conforming copy of the changes...</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>35  If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T. a Did the organization have unrelated business gross income of $1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>36  Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' complete applicable parts of Schedule N</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>37a Enter amount of political expenditures, direct or indirect, as described in the instructions</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>37b Did the organization file Form 1120-POL for this year?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>39  501(c)(7) organizations Enter: a Initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities</td>
<td></td>
<td>N/A</td>
</tr>
<tr>
<td>40  501(c)(3) organizations Enter amount of tax imposed on the organization during the year under: a section 4911 b section 4912 c section 4955</td>
<td></td>
<td>N/A</td>
</tr>
<tr>
<td>40b 501(c)(3) and (4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>40c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>40d Enter amount of tax on line 40c reimbursed by the organization</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>40e 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</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>41  List the states with which a copy of this return is filed</td>
<td></td>
<td>CA</td>
</tr>
</tbody>
</table>

**42a** The books are in care of ▶ TREASURER Telephone no. ▶ 925-299-1828 Located at ▶ ZIP + 4 ▶

**42b** 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)? If 'Yes,' enter the name of the foreign country: ▶

See the instructions for exceptions and filing requirements for Form TD F90-22.1, Report of a Foreign Bank and Financial Accounts.

**42c** At any time during the calendar year, did the organization maintain an office outside of the U.S.? If 'Yes,' enter the name of the foreign country: ▶

**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 ▶

**44** Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ. ▶

**45** Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' Form 990 must be completed instead of Form 990-EZ. ▶
**Part VI Section 501(c)(3) organizations only.** All section 501(c)(3) organizations must answer questions 46-49 and complete the tables for lines 50 and 51.

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>46 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</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>47 Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>49a Did the organization make any transfers to an exempt non-charitable related organization?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>49b If 'Yes,' was the related organization(s) a section 527 organization?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Employee Information</th>
<th>(a) Name and address of each employee paid more than $100,000</th>
<th>(b) Title and average hours per week devoted to position</th>
<th>(c) Compensation</th>
<th>(d) Contributions to employee benefit plans and deferred compensation</th>
<th>(e) Expense account and other allowances</th>
</tr>
</thead>
<tbody>
<tr>
<td>NONE</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Total number of other employees paid over $100,000</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Independent Contractor Information</th>
<th>(a) Name and address of each independent contractor paid more than $100,000</th>
<th>(b) Type of service</th>
<th>(c) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>NONE</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Total number of other independent contractors receiving over $100,000</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Signature**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on examination of the return and supporting information furnished by the client. See instruction BAA.

**Preparer**

Signature of preparer (check appropriate box)

- [ ] Preparer's name, address, and phone number
- [ ] Preparer's name and address for business purposes only

Firm's name (or yours if self-employed), address, and ZIP + 4

ARLÈNE K. MOSE, CPA
367 CIVIC DRIVE, SUITE 12
PLEASANT HILL, CA 94523-1935

May the IRS discuss this return with the preparer shown above? See instruction BAA.
Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

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

**Name of the organization**: ACALANES BOOSTER CLUB
**Employer Identification number**: 23-7428299

**Part I | Reason for Public Charity Status** (All organizations must complete this part.) (see instructions)

The organization is not a private foundation because it is: (Please check only one organization.)

1. A church, convention of churches or association of churches described in section 170(b)(1)(A)(i).
3. A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H)
4. A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital’s name, city, and state:
5. An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
6. A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7. An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
8. A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
9. An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions – subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
10. An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions)
11. An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11a through 11h.
   a. Type I
   b. Type II
   c. Type III- Functionally integrated
   d. Type III- Other

   By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f. If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box.

Since August 16, 2006, has the organization accepted any gift or contribution from any of the following persons?

   (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
   (ii) a family member of a person described in (i) above?
   (iii) a 35% controlled entity of a person described in (i) or (ii) above?
   (iv) Is the organization in col (i) listed in your governing document?
   (v) Did you notify the organization in col (i) of your support?
   (vi) Is the organization in col (i) organized in the U.S.?

<table>
<thead>
<tr>
<th>(i) Name of Supported Organization</th>
<th>(ii) EIN</th>
<th>(iii) Type of organization (described on lines 1-9 above or IRC section 509(a)(1) or section 509(a)(2))</th>
<th>(iv) Did you notify the organization in col (i) of your support?</th>
<th>(v) Is the organization in col (i) organized in the U.S.?</th>
<th>(vi) Amount of Support</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.**

Schedule A (Form 990 or 990-EZ) 2008
## Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2004</th>
<th>(b) 2005</th>
<th>(c) 2006</th>
<th>(d) 2007</th>
<th>(e) 2008</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions and membership fees received (Do not include ‘unusual grants.’)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Total. Add lines 1-3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Public support. Subtract line 5 from line 4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2004</th>
<th>(b) 2005</th>
<th>(c) 2006</th>
<th>(d) 2007</th>
<th>(e) 2008</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>7 Amounts from line 4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Net income form unrelated business activities, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 Other income. Do not include gain or loss form the sale of capital assets (Explain in Part IV.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Total support. Add lines 7 through 10</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Gross receipts from related activities, etc. (see instructions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>12</td>
</tr>
<tr>
<td>13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Section C. Computation of Public Support Percentage

| 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) |          |          |          |          |          | 14 %     |
| 15 Public support percentage for 2007 Schedule A, Part IV-A, line 26f |          |          |          |          |          | 15 %     |
| 16a 33-1/3 support test – 2008. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization |          |          |          |          |          |          |
| 16b 33-1/3 support test – 2007. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization |          |          |          |          |          |          |
| 17a 10%-facts-and-circumstances test – 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization |          |          |          |          |          |          |
| 17b 10%-facts-and-circumstances test – 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization |          |          |          |          |          |          |
| 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions |          |          |          |          |          |          |

BAA
### Section A. Public Support

#### Calendar year (or fiscal yr beginning in)

<table>
<thead>
<tr>
<th>Year</th>
<th>(a) 2004</th>
<th>(b) 2005</th>
<th>(c) 2006</th>
<th>(d) 2007</th>
<th>(e) 2008</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gifts, grants, contributions and membership fees received</td>
<td>53,651</td>
<td>38,372</td>
<td>46,248</td>
<td>52,698</td>
<td>41,189</td>
<td>232,158</td>
</tr>
<tr>
<td>Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in an activity that is related to the organization's tax-exempt purpose</td>
<td>74,015</td>
<td>83,430</td>
<td>79,056</td>
<td>71,692</td>
<td>82,191</td>
<td>390,384</td>
</tr>
<tr>
<td>Gross receipts from activities that are not an unrelated trade or business under section 513</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tax revenues levied for the organization's benefit and either paid to or expended on its behalf</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>127,666</td>
<td>121,802</td>
<td>125,304</td>
<td>124,390</td>
<td>123,380</td>
<td>622,542</td>
</tr>
</tbody>
</table>

#### Section B. Total Support

<table>
<thead>
<tr>
<th>Year</th>
<th>(a) 2004</th>
<th>(b) 2005</th>
<th>(c) 2006</th>
<th>(d) 2007</th>
<th>(e) 2008</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources</td>
<td>244</td>
<td>514</td>
<td>3,520</td>
<td>3,776</td>
<td>1,124</td>
<td>9,178</td>
</tr>
<tr>
<td>Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on</td>
<td>244</td>
<td>514</td>
<td>3,520</td>
<td>3,776</td>
<td>1,124</td>
<td>9,178</td>
</tr>
<tr>
<td>Other income</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total support</td>
<td>127,666</td>
<td>121,802</td>
<td>125,304</td>
<td>124,390</td>
<td>123,380</td>
<td>622,542</td>
</tr>
</tbody>
</table>

#### Section C. Computation of Public Support Percentage

<table>
<thead>
<tr>
<th>Year</th>
<th>(a) 2004</th>
<th>(b) 2005</th>
<th>(c) 2006</th>
<th>(d) 2007</th>
<th>(e) 2008</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public support</td>
<td>15</td>
<td>98.6%</td>
<td>16</td>
<td>99.1%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Part IV Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)
### Part I | Fundraising Activities

Complete if the organization answered ‘Yes’ to Form 990, Part IV, line 17.

1. Indicate whether the organization raised funds through any of the following activities. Check all that apply.
   - Mail solicitations
   - Email solicitations
   - Phone solicitations
   - In-person solicitations
   - Solicitation of non-government grants
   - Solicitation of government grants
   - Special fundraising events

2a. Did the organization have written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes □ No □

   b. If ‘Yes,’ list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization. Form 990EZ filers are not required to complete this table.

<table>
<thead>
<tr>
<th>(i) Name of individual or entity (fundraiser)</th>
<th>(ii) Activity</th>
<th>(iii) Did fundraiser have custody or control of contributions?</th>
<th>(iv) Gross receipts from activity</th>
<th>(v) Amount paid to (or retained by) fundraiser listed in col (i)</th>
<th>(vi) Amount paid to (or retained by) organization</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Yes □ No □</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total □ □ □

3. List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.
### Part II: Fundraising Events

Complete if the organization answered 'Yes' to Form 990, Part IV, line 18, or reported more than $15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than $5,000.

<table>
<thead>
<tr>
<th>Event #1</th>
<th>Event #2</th>
<th>Other Events</th>
<th>Total Events</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a)</td>
<td>(b)</td>
<td>(c)</td>
<td>(d)</td>
</tr>
<tr>
<td>Event Type</td>
<td>Event Type</td>
<td>Total Number</td>
<td>(Add col (a) through col (c))</td>
</tr>
<tr>
<td>-----------</td>
<td>------------</td>
<td>--------------</td>
<td>----------------</td>
</tr>
<tr>
<td>FUNDRAISING CLUB RAFFLE</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Revenue</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 Gross receipts</td>
<td>76,939</td>
<td>20,615</td>
<td>97,554</td>
</tr>
<tr>
<td>2 Less: Charitable contributions</td>
<td>725</td>
<td></td>
<td>725</td>
</tr>
<tr>
<td>3 Gross revenue (line 1 minus line 2)</td>
<td>76,214</td>
<td>20,615</td>
<td>96,829</td>
</tr>
<tr>
<td>Expenses</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Cash prizes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Non-cash prizes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Rent/facility costs</td>
<td>1,565</td>
<td></td>
<td>1,565</td>
</tr>
<tr>
<td>7 Other direct expenses</td>
<td>15,558</td>
<td>1,952</td>
<td>17,510</td>
</tr>
<tr>
<td>Direct expense summary</td>
<td>Add lines 4-7 in column (d)</td>
<td></td>
<td>19,075</td>
</tr>
<tr>
<td>Net income summary</td>
<td>Combine lines 3 and 8 in column (d)</td>
<td></td>
<td>77,754</td>
</tr>
</tbody>
</table>

### Part III: Gaming

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

<table>
<thead>
<tr>
<th>Revenue</th>
<th>(a) Bingo</th>
<th>(b) Pull tabs/Instant bingo/progressive bingo</th>
<th>(c) Other gaming</th>
<th>(d) Total gaming (Add col (a) through col (c))</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gross revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Cash prizes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Non-cash prizes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Rent/facility costs</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Other direct expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Volunteer labor</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Yes</td>
<td>%</td>
<td>Yes</td>
<td>%</td>
<td>Yes</td>
</tr>
<tr>
<td>No</td>
<td></td>
<td>No</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Direct expense summary: Add lines 2 through 5 in column (d)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Net gaming income summary: Combine lines 1 and 7 in column (d)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Enter the state(s) in which the organization operates gaming activities:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Is the organization licensed to operate gaming activities in each of these states?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b If 'No,' Explain:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b If 'Yes,' Explain</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does the organization operate gaming activities with nonmembers?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
13 Indicate the percentage of gaming activity operated in.
   a The organization's facility ............................... 13a %
   b An outside facility ........................................ 13b %

14 Provide the name and address of the person who prepares the organization's gaming/special events books and records:
   Name: ....................................................................
   Address: ..................................................................

15 a Does the organization have a contact with a third party from whom the organization receives gaming revenue? 15a
   b If 'Yes,' enter the amount of gaming revenue received by the organization $ ___________________ and the amount of gaming revenue retained by the third party $ ___________________.
   c If 'Yes,' enter name and address:
      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 the state gaming license? ..................................................
   b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year: $
STATEMENT 1
FORM 990-EZ, PART I, LINE 10
GRANTS AND SIMILAR AMOUNTS PAID

CLASS OF ACTIVITY: ATHLETIC SCHOLARSHIP
DONEE'S NAME: MICHELLE CAIN
RELATIONSHIP OF DONEE: NONE
CASH AMOUNT GIVEN: $ 500.

CLASS OF ACTIVITY: ATHLETIC SCHOLARSHIP
DONEE'S NAME: MICHAEL RULE
RELATIONSHIP OF DONEE: NONE
CASH AMOUNT GIVEN: $ 500.

STATEMENT 2
FORM 990-EZ, PART I, LINE 16
OTHER EXPENSES

ADMIN ASSISTANT .......................... $ 1,500.
LIABILITY INSURANCE ......................... 240.
OTHER EXPENSES ............................ 344.
UNIFORMS & SPORTS EQUIP. .................. 49,991.
TOTAL $ 52,075.

STATEMENT 3
FORM 990-EZ, PART III
ORGANIZATION'S PRIMARY EXEMPT PURPOSE

THE PURPOSE OF THE ACALANES BOOSTER CLUB IS TO SUPPORT A WELL-BALANCED AND DIVERSE ATHLETIC PROGRAM WHICH WILL BROADEN THE INVOLVEMENT OF STUDENTS, STUDENT FAMILIES AND THE SCHOOL PROVIDING OPPORTUNITIES FOR ALL STUDENT ATHLETES IN SPORTS.

STATEMENT 4
FORM 990-EZ, PART VI
REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS

(A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT? NO
(B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS, DIRECTLY OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT? NO